CASS COUNTY COURTS & FRIEND OF THE COURT

Transcript and/or DVD Request Form

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STATE OF MICHIGAN 4TH DISTRICT COURT 43RD JUDICIAL CIRCUIT COURT (Criminal, Civil, Family, Juvenile) CASS COUNTY PROBATE COURT		**DOCKET/CASE NO. AND JUDGE**
PLAINTIFF'S/PETITIONER'S NAME(S)		**DEFENDANT'S/RESPONDENT'S NAME(S)**
In the matter of:		

Person making the request:	
Requester's phone number:	
Requester's email address:	
Hearing Date(s):	
Hearing type:	____ Trial, Motion Hearing, De Novo Review ____ Appeal ____ Other (specify)
Type of Request: [DVD and/or Transcript] (please note, for Transcripts only, specific sections or "excerpts" can be prepared; however, the entire section will be prepared, i.e., Defendant's testimony only, specific witness testimony only, etc.)	____ DVD(s) of proceeding(s) ($20/DVD due in advance) ____ Transcript of entire proceeding(s) ____ Partial Transcript of specific testimony, etc.
If Partial Transcript Request, description of specifically what is needed:	
Date DVD and/or Transcript is Needed by:	

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