

## **Audio Record Request Form**

*Disclaimer: Any audio recording issued by the Tribal Courts is an “Unofficial and Uncertified Record” of the Court. For a Certified Copy of Court Proceedings, please use the Transcript Request Form.*

**Any unlawful distribution or editing of an audio recording issued by the Court is prohibited.**

Date of Request:

Name of Requester:

Address of Requester:

(Include City, State & Zip)

Telephone Number:

Case Number/Case Name:

Relationship to Case:

Signature:

**In order to process your request, please provide the following specific information:**

\*Date(s) of Hearing (if more than 1 day, specify what days/dates you want copied):

\*Time(s) of hearing:

**Fees: Payment of all fees must be received prior to processing your request.**

CD-Total number of Hearings \_\_\_\_ x \$15.00

Total Amount Due:

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**\*\*Office Use Only\*\***

Date/Time Request Received \_\_\_\_\_

Date/Time Request Completed \_\_\_\_\_

Court Staff Processing Request \_\_\_\_\_

Judge's Signature \_\_\_\_\_