

CRAWFORD COUNTY MUNICIPAL COURT
Request for Court Audio Record

*You must fill out a record proceeding request for each case.

Date: _____

Audio Record Requested by:

Audio Record Requested for:

Name: _____

Name: _____

Address: _____

Date of Hearing: _____

Time of Hearing: _____

Phone #: _____

Case #: _____

The cost of producing a copy of each proceeding is \$20.00 payable by cash, money, order, or credit/debit card (NON-REFUNDABLE).

Please allow up to FOURTEEN (14) business days for request to be completed.

Media provided by the court can only be played back on a Windows-based computer capable of playing a DVD.

Signature

Date

Clerk/Deputy Clerk

Date

_____ I verify that I have received a copy of the media requested.

Signature

Date