DISTRICT COURT OF MARYL	AND FOR
	City/County
Located at	Case No.
Court Add	iress
STATE OF MARYLAND	
OR	
	VS.
Full Name of Plaintiff(s)         Full Name of Defendant(s)	

# **REQUEST FOR CD RECORDING / TRANSCRIPT / ELECTRONIC RECORDING**

### NOTE TO APPLICANT:

 $\Box$  CD Recording

- Fee due in advance is \$15.00 per case.
- Requests are processed on a first come first served basis (no exceptions).
- Cases heard more than three (3) years ago may not be available.

#### □ Transcript

- Written transcripts are only provided in accordance with MD Rule 7-102(b).
- A \$75.00 deposit in advance is required. Transcript costs are \$3.00 per page. Any balance due will be billed to the requestor.

□ Electronic Recording

• Recording delivered by e-mail using Citrix ShareFile.

(If requesting person is an attorney, provide attorney number)

- Fee due in advance is \$10.00 per case.
- Requests are processed on a first come first served basis (no exceptions).
- Cases heard more than three (3) years ago may not be available.

# PLEASE PROVIDE THE FOLLOWING COURT INFORMATION: (Check one box below and include information)

Trial Date	Courtroom
Court Location	Judge
□ DISTRICT COURT COMMISSIONER	
Proceeding Date	Commissioner Name
Commissioner Location	

Maryland Rule 16-502 provides in part that upon written request and the payment of reasonable costs, the authorized custodian of an official recording shall make a copy of the audio recording available to any person.

## **REQUESTED BY:**

OPTIONAL

□ Please mail to (if different from address shown on left):

Name A		Attorney Number	Name		
Street #		Apt #	Street #		Apt #
City	State	Zip	City	State	Zip
Telephone		Telephone			
Signature of Applicant F ELECTRONIC RECORDING REQUESTED:		Date STED:	Signature of Applicant		Date
-mail address for electro	nic recording inf	ormation to be sent:			
<b>CA-119</b> (Rev. 01/23/2023				E-mail	