



OFFICE SOLUTIONS PLUS LLC

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TRANSCRIPTION REQUEST FORM

INSTRUCTIONS: Print/download this form, complete all items, return completed form with media to OS+

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TYPE OF PROCEEDING: (Hearing, Appeal, etc.) _____ PRIVATE CASE ___ CPCS * ___ COURT ___

CASE NAME: _____

DOCKET NO: _____ DATE OF CASE _____

DATE OF PROCEEDING: _____

NAME OF DEFENSE ATTORNEY: _____

NAME OF PLAINTIFF ATTORNEY: _____

NAME OF COURT: _____

NAME OF JUDGE: _____

NAMES OF WITNESSES/INTERVIEWEES: _____

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Note: A PDF Copy CD will be attached to the last page or mailed to you to give to the Court on all cases. A PDF copy will be emailed to the Trial Courts Office of Transcription (OTS) for their records on all cases.

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