

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>NAME AND ADDRESS</i>):	TELEPHONE NO.:	<i>FOR COURT USE ONLY</i>
ATTORNEY FOR (<i>NAME</i>):		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA BARBARA		
STREET ADDRESS:		
MAILING ADDRESS:		
CITY AND ZIP CODE:		
BRANCH NAME:		
PLAINTIFF:		
DEFENDANT:		
TAPE RECORDING REQUEST		CASE NUMBER:

- I request permission to listen to the tape recording of the above-entitled case.
- I request a copy of the tape recording of the above-entitled case.
- I request a transcript of the above-entitled case be prepared.

Date of Proceedings _____

Heard Before Judge _____

Clerk _____

Reason for Request _____

Name of Person Making Request _____

Phone Number _____

A cost of \$5.00 (or \$2.50 plus a blank new 90-minute tape) will be charged for a copy of the proceedings per tape. The cost of preparing a transcript of the proceedings will be the responsibility of the requesting party. Arrangements to hear tapes will depend on availability of a courtroom.

For Court Use Only

Clerk's Initials _____

Tape Number _____