

ATTORNEY OR PARTY WITHOUT ATTORNEY ( <i>NAME AND ADDRESS</i> ):	TELEPHONE NO.:	<i>FOR COURT USE ONLY</i>
ATTORNEY FOR ( <i>NAME</i> ):		
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA BARBARA</b>		
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.

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Clerk's Initials \_\_\_\_\_

Tape Number \_\_\_\_\_