| Superior Court of California of San Luis Obispo   | FOR COURT USE ONLY |  |  |
|---|--------------------|--|--|
| <ul> <li>San Luis Obispo Branch, County Government Center,<br/>1035 Palm Street, Room 355, San Luis Obispo, CA 93408</li> <li>Paso Robles Branch, 901 Park Street, Paso Robles, CA 93446</li> </ul>   |                    |  |  |
|   |                    |  |  |
| Plaintiff,<br>vs.   |                    |  |  |
| Defendant   |                    |  |  |
| REQUEST FOR DUPLICATE ELECTRONIC RECORDING  | Case Number        |  |  |
| *** <u>This digital recording cannot be used for purposes of preparing a transcript on appeal in unlimited civil cases, family law cases, felony cases and juvenile cases. It may be used for purposes of preparing a transcript on appeal in limited civil cases, misdemeanor cases, infractions and traffic. Our court will not accept transcripts prepared by the parties for an appeal.</u> |                    |  |  |

Please select one of the following:

I do not request the court prepare a transcript of the recording.
I request the Court prepare a transcript for \_\_\_\_\_ non-appeal purposes \_\_\_\_ appeal purposes, with cost to be paid by the requesting party.
I request the Court prepare a transcript of the recording for appeal purposes at Court expense. (A court order must be attached.)
Date appeal filed.
Let in the bit is the previous of the recording for appeal purposes.

A defective duplicate electronic recording will be replaced or refunded. Refund requests due to incompatibility of format with your equipment will not be honored. For transcript requests and/or questions, please call the transcript request line at (805) 706.3605. Cost: \$10.00 per CD:

| Requested   |  |           |
|---|--|-----------|
| by: (NAME)  |  |           |
| (ADDRESS)   |  |           |
| (CITY, STATE, ZIP)                                      |  |           |
| (TELEPHONE)<br>(DEPARTMENT WHERE<br>RECORDING WAS MADE) | E-mail   |           |
| (DATE OF RECORDING(s))                                  |  |           |
|   | COURT USE ONLY   |           |
| Date of Recording:<br>Number of CD's:<br>Total: = \$    | @ \$10.00 each.  |           |
| CASH<br>Pick-Up Location:                               | CHECK NUMBER   | VOUCHER   |
| Date:   | By:  | ty Clerk  |
|   | Бери   |           |
|   | ACKNOWLEDGMENT   |           |
| I hereby acknowledge receipt                            | of the electronic recording(s) in the above-entitled action: |           |
| Date:   |  | Signature |
|   |  |           |

NAME (Please print)