

**LAKE COUNTY COURT OF COMMON PLEAS
DOMESTIC RELATIONS DIVISION**

**Request for Digital Audio Recording
[Please Print Legibly]**

Case Name: _____ Case Number _____

Hearing date(s): _____

Judge Falkowski _____ or
Magistrate _____

Preferred Copy (**check only one**): _____ CD (U.S. Mail) \$6.00
Check or money order payable to Lake County Treasurer

_____ CD (Pick up) \$5.00
Check or money order payable to Lake County Treasurer

_____ Email \$5.00
Check or money order payable to Lake County Treasurer
Email address: _____

Name

Street Address (will not be sent to P.O. Box)

City, State, ZIP

Phone Number

Counsel of record and parties requesting an electronic copy of the digital audio recording of proceedings before the Court shall complete this form and return it to the Lake County Court of Common Pleas, Domestic Relations Division. Within five (5) business days of receiving payment, a copy of the audio recording will be available for pick-up, sent via U.S. Mail, or will be sent electronically via email (whichever is requested). **An audio recording will not serve as a substitute for a written transcript of proceedings as required by Lake County Domestic Relations Court's Local Rule 10.**

----- internal use only -----

Date received: _____ Received by: _____

Person requesting copy has paid \$ _____ fee on _____ date.