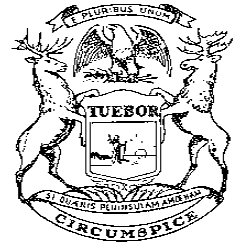




State of Michigan  
COUNTY OF MONTMORENCY



PLEASE MARK AN "X" BELOW FOR YOUR REQUEST

REQUEST FOR TRANSCRIPT  
COPY OF HEARING ON CD/E-MAIL

Date of Request: \_\_\_\_\_

District Court:

PLAINTIFF: \_\_\_\_\_

DEFENDANT: \_\_\_\_\_

Probate Court:

In the Matter of \_\_\_\_\_

CASE NUMBER: \_\_\_\_\_

DIVISION OF THE COURT:     DISTRICT     PROBATE

JUDGE: \_\_\_\_\_

HEARING DATE: \_\_\_\_\_

(ONE HEARING DATE PER TRANSCRIPT/CD/E-MAIL REQUEST)

PERSON REQUESTING CD OR TRANSCRIPT:    PERSON PICKING UP CD (IF APPLICABLE):

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ADDRESS

\_\_\_\_\_  
CITY, STATE, ZIP-CODE

\_\_\_\_\_  
CITY, STATE, ZIP-CODE

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TRANSCRIPTION REQUEST:

Your request will be sent to our contracted transcription firm. You will be contacted by the transcription firm with a quotation to produce transcripts and estimated time of production.

RECORDED HEARING REQUEST BY CD:

FEE OF \$20.00 MUST BE PRE-PAID, IN ADDITION TO POSTAGE FEE OF \$8.00 IF MAILED

Please send your request along with a certified check or money order made payable to the Montmorency Probate Court or 88<sup>th</sup> District Court. All materials are provided to the requesting party via Certificate of Mailing. If the party chooses to pick up the CD, the \$8.00 postage fee will be waived.

Requests for copies of recordings will only be provided to parties in the case and duplication, publishing or altering of any recording is strictly forbidden. Recordings are not for the purpose of transcription. Transcription requests must be requested through the designated court and transcription firm.

Court Contact Information: Mailing address – PO Box 789, Atlanta, Michigan 49756  
District Court -- Email: [kcheedie@montcounty.org](mailto:kcheedie@montcounty.org) or fax 989-785-8036  
Probate Court -- Email: [probate@montcounty.org](mailto:probate@montcounty.org) or fax 989-785-8065