

**Order Form for Transcripts from Sound Recording**

IN THE \_\_\_\_\_ JUDICIAL CIRCUIT, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ COUNTY, MISSOURI

If a deposit is required, collect the deposit before submitting this form to OSCA per COR 5.04.

**Email this completed form to** [**OSCA.Transcripts@courts.mo.gov**](mailto:OSCA.Transcripts@courts.mo.gov)

Division: Case Number: Judge:

Date(s) Heard:

Date Transcript Requested: Notice of Appeal Filing Date:

Appellate Case No.:

Date Deposit Received: Amount of Deposit Received: $ \_\_\_\_\_\_\_

Indigent Request

Do not submit the deposit to OSCA. OSCA will submit an invoice for the full amount due once the transcript has been completed.

**Style of Case:** Attach log sheets. **Note:** If the log sheets are not included the completion of the transcript may be delayed.

**Reason for Request:**

Case on Appeal  Felony Guilty Plea and/or Sentencing (Rule 24.035/29.15 Motion)

Preliminary Hearing  Requested by Judge (attach order)  Other:

**Case tried by:**  Judge  Jury

Include Opening/Closing Statements  Include Voir Dire of Jury

Defendant was charged with an offense under chapter 566 RSMo, domestic assault, or stalking\*

**Attorney(s) present at hearing:**

**Comments, Special Instructions:**

**Transcripts for non-party requests will be sent to the court for release. Criminal transcripts will be efiled with the court.**

**Person requesting transcript:**

Name: Email Address:

Street Address:

City, State, Zip: Telephone:

**Please provide information for the individual responsible for answering questions regarding this request.**

Court Contact Name: Court Email:

Telephone:

By submitting this form, you are giving OSCA staff permission to access and copy the audio files identified on the log sheets directly from your courtroom computer (or NAS device if the files are no longer on the courtroom computer).