

State of Minnesota

District Court

County of: _____	Judicial District: _____
	Court File Number: _____
	Case Type: _____

In Re the Marriage of:

Request for Transcript

Petitioner (first, middle, last)

and

Respondent (first, middle, last)

Intervenor

TO: Court Administration

I, _____, request a transcript of the
(Name of Party)

hearing held on _____ before the Honorable _____
(Date of Hearing) (Name of Magistrate, Judge, or Referee)

Purpose of the Request: (check one)

- For information Only: Two transcripts will be made
- Motion to Correct Clerical: Three or four transcripts will be made
- Motion for Review: Three or four transcripts will be made
- Appeal to Court of Appeals: Three or four transcripts will be made

Is the County Agency a party in this action? Yes No

If yes, provide the name and address of the County Attorney:

Clearly print your name, address, and a daytime phone number where you can be reached in the area below. The transcriber who will prepare the transcript will contact you by telephone or by mail with the estimated cost of the transcript. Payment for the transcript and all additional copies must be made to the transcriber **before** the transcript is prepared. **Failure to do so may result in your request being canceled.**

If you cannot afford to pay the transcriber's fee, you may file a request to proceed In Forma Pauperis. See the Instructions page on how to get an In Forma Pauperis application form. **You must send a copy of the order that waives your costs for the transcript to the transcriber as soon as possible to verify that the court will pay for the transcript.. Failure to do so may result in your request being canceled.**

Dated: _____	_____ Signature
(Name and address of other party)	(Your name and address)
Name: _____	Name: _____
Address: _____	Address: _____
City/State/Zip: _____	City/State/Zip: _____
Telephone: _____	Telephone: _____
E-mail address: _____	E-mail address: _____
	Attorney for: _____