

The Family Court of East Baton Rouge Parish, State of Louisiana  
222 St. Louis Street, 9<sup>th</sup> Floor Governmental Building,  
Baton Rouge, LA 70802, (225) 389-4680, FAX (225) 389-4952

## Request for Transcript Form

A request for a transcript is hereby being made to the Family Court of East Baton Rouge Parish

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

\_\_\_\_\_  
Delivery Deadline

\_\_\_\_\_  
Date of Proceeding

\_\_\_\_\_  
Vs.

\_\_\_\_\_  
Case Number & Division

\_\_\_\_\_  
Case Title

\_\_\_\_\_  
Special Instructions (Entire transcript or otherwise)

\_\_\_\_\_  
Requestor Name, Address (Street, City, State), Phone number, & Fax number

**Note:** Transcripts are prepared by registered Court Reporters who are contracted by the Family Court to prepare a transcript of the requested court proceeding and must be presented on this form. Transcripts are usually completed two to three weeks from the date of receipt of the request. Transcripts must be paid for in advance. A charge of \$4.20 per page plus an administrative charge of \$5.00 is invoked.

The assigned Court Reporter will contact the requestor and supply an estimate of the cost. Transcripts in each Division of court are prepared in the order requested. Two separate checks are required for payment. The first check should be made payable to the Court Reporter at the rate of \$4.00 per page. A second check in the amount of \$5.00 plus 20 cents per page should be made payable to the Family Court of East Baton Rouge Parish. The requestor will receive a detailed billing from the Court Reporter and any final payment is due upon release of the transcript. No transcript can be released without prior payment of all costs. Although estimated costs are supplied in advance, the requestor is responsible for any amount over the estimated amount. Attorneys remiss in payment of overages will not be permitted to practice in Family Court.

Should the transcript no longer be needed, requestor shall notify the Court immediately by phone and follow-up with a letter in writing, either by mail or fax, and will be responsible for payment for all work completed up to the date of receipt of notification at the rates cited above. No transcript will have priority over regular appeal transcripts.

I have read and agree to all of the above terms.

\_\_\_\_\_  
Signature of requestor

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*For Family Court use only*

Date notification received \_\_\_\_\_ Approved \_\_\_\_\_

Estimated number of pages \_\_\_\_\_ Estimated cost \_\_\_\_\_

Payment received yes/no. \_\_\_\_\_ Check number \_\_\_\_\_ Amount \_\_\_\_\_

Date transcript complete \_\_\_\_\_ Date requestor paid \_\_\_\_\_

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**Comments** \_\_\_\_\_