

**SEVENTEENTH JUDICIAL CIRCUIT  
OFFICE OF THE COURT ADMINISTRATOR**  
Court Reporting Services  
Broward County Courthouse  
201 S.E. 6<sup>th</sup> Street, Room 19170  
Fort Lauderdale, Florida 33301  
Telephone: (954) 831-6260/ Fax: (954) 831-6230

**TRANSCRIPT REQUEST FORM**

Case Style: \_\_\_\_\_ Case No: \_\_\_\_\_  
Judge: \_\_\_\_\_ Courtroom: \_\_\_\_\_  
Dates of Proceedings: \_\_\_\_\_  
\_\_\_\_\_

**TYPE OF PROCEEDINGS**

Juvenile Dependency ☐ Domestic Violence ☐ Misdemeanor ☐  
Juvenile Delinquency ☐ Felony ☐ Other ☐

**REQUESTED BY**

Private Attorney ☐ SRP (self-represented party) ☐ DCF ☐ Appointed Attorney ☐ GAL ☐  
Other ☐ \_\_\_\_\_

Indigent for costs: YES ☐ NO ☐

**TYPE OF SERVICE**

30 business days ☐ 10 business days\* ☐ 6 business days\* ☐ 3 business days\* ☐ Overnight\* ☐  
\$6.25 per page \$7.25 per page \$8.50 per page \$9.75 per page \$10.25 per page

Copy rate ☐  
\$1.10 per page

\*if available due to resources

**ORDERING PARTY INFORMATION**

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Address: \_\_\_\_\_

Attorney of Record: YES ☐ NO ☐

Party to the Case: YES ☐ NO ☐

Court order attached for proceedings over an hour long (excluding appeals): YES ☐ NO ☐

**A FIFTY PERCENT (50%) NON-REFUNDABLE DEPOSIT OF THE ESTIMATED COST IS DUE TO PROCESS THE REQUEST. A CHECK OR MONEY ORDER MUST BE MADE PAYABLE TO THE STATE OF FLORIDA.**

**IT IS THE OBLIGATION OF THE REQUESTING PARTY TO IMMEDIATELY CONTACT CRS FOR THE CANCELLATION OF A TRANSCRIPT IF IT IS NO LONGER NEEDED.**