

**UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF WEST VIRGINIA**

v.

CASE NO.

**REQUEST FOR A COPY OF THE AUDIO OF AN
ELECTRONICALLY RECORDED HEARING**

Requestor's name: _____

Mailing Address: _____

Telephone: _____

E-mail address: _____

Judge: _____

Proceeding date(s): _____

Proceeding location: _____

Proceeding type(s):¹ _____

Attorneys present
at the hearing: _____

Witness(es) called
at the hearing: _____

¹ Proceeding types include: Initial Appearance; Arraignment; Detention Hearing; Motion Hearing; etc.

I acknowledge that I may be responsible to the Clerk of Court for payment of the cost for a copy of the recording of the proceedings described herein. Further, I understand that if a fee is required, this request will not be processed until appropriate financial arrangements are made.

By: *Requestor's Signature or e-Signature*

Date:

Attorney *(Civil or Criminal)*

Assistant United States Attorney

CJA Attorney

Pro Se Litigant

Federal Public Defender

For specific details on procedures for requesting audio recordings and transcripts please also see <https://www.wvnd.uscourts.gov/transcript-information-and-forms>.