

## RECORDS REQUEST

Requests may be submitted to [doc426@coshocountoncounty.net](mailto:doc426@coshocountoncounty.net)

Applicant's Name: \_\_\_\_\_ Applicant's Phone # \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

Applicant's Email Address: \_\_\_\_\_

Documents will be Picked Up, Approximate Date & Time: \_\_\_\_\_

### CERTIFIED MARRIAGE RECORD:

**\$2.00 fee per certified copy request**  Documents Mailed (extra \$1.00 fee)

Applicant 1's Name: \_\_\_\_\_ Date of Marriage: \_\_\_\_\_

Applicant 2's Name: \_\_\_\_\_ Former Last Name: \_\_\_\_\_

No. of copies requesting: \_\_\_\_\_

### ALL OTHER REQUEST:

**\$0.25 fee per page + \$1.00 to certify**  If mailed, postage will be determined on amount of pages

Case Caption: \_\_\_\_\_

Case Type: \_\_\_\_\_ Case No. \_\_\_\_\_

Date Documents Filed: \_\_\_\_\_

Requested Documents: \_\_\_\_\_

### REQUEST TO PREPARE TRANSCRIPT/DIGITAL COPY OF HEARING:

Request for  Written transcript  Digital copy of hearing held on \_\_\_\_\_  
(Date)

at \_\_\_\_\_ o'clock \_\_\_\_\_ M. before the  Judge  Magistrate on the Application /Motion  
for \_\_\_\_\_

Case Caption: \_\_\_\_\_

Case Type: \_\_\_\_\_ Case No. \_\_\_\_\_

FOR COURT USE:

Date of Request \_\_\_\_\_ Date Processed: \_\_\_\_\_ By: \_\_\_\_\_ Amount Due: \_\_\_\_\_