

**IN THE TRIBAL COURT OF THE CONFEDERATED SALISH AND KOOTENAI TRIBES OF THE
FLATHEAD RESERVATION, PABLO, MONTANA**

TRANSCRIPT REQUEST FORM

INSTRUCTIONS: This Transcript Request form must be completed by any person requesting a transcript from either the Tribal Court for a proceeding reported by stenograph or digital audio recording. The only format available from the Tribal Court is a digital audio recording. The cost is \$10 per digital audio recorded transcript. If a party wants a written transcription of a proceeding, then they must arrange and pay for a printed transcription.

For Appeals: This Transcript Request must be submitted with the **Designation of Transcript for Record on Appeal [TCF 0141]** to the Clerk of Court and filed in the case. The only format available from the Tribal Court is a digital audio recording. If a party wants a written transcription of a proceeding, then they must arrange and pay for a printed transcription pursuant to Rules of Appellate Procedure, Rule 3(2) (amended by Ord.103A, Am. No. 35). If a party gets a printed transcript, they are under no obligation to share it with the other party unless they file it with the Appellate Court.

ORDERING PARTY INFORMATION

Full Name:	Phone Number:	Email Address:	Mailing Address:

TRANSCRIPT INFORMATION

Cause No:	Case Caption (i.e. <i>CSKT v. John Doe</i>):	Court: <input type="checkbox"/> Tribal Court <input type="checkbox"/> Appellate Court
Request for: <input type="checkbox"/> Appeal <input type="checkbox"/> Civil <input type="checkbox"/> Upcoming Hearing/Trial on _____ <input type="checkbox"/> Non-Appeal <input type="checkbox"/> Criminal <input type="checkbox"/> Other:		

Transcript Requested (specify hearing, dates of hearing(s), time(s)).

Hearing	Date(s)	Time(s)

ORDERING INFORMATION

Date of Request:	Date Transcript Needed:

CERTIFICATION

By signing below, I certify that I will pay all charges.

Signature

Date

FOR COURT USE ONLY

Date of Request:	Transcript To Be Prepared by (name of clerk):	Date Clerk Contacted:
Date Transcript Mailed/Delivered:	<p>I certify that I prepared a true and correct digital audio recording transcript(s) formatted in a secure manner so that the content cannot be altered.</p> <p>_____</p> <p>Clerk of Court Signature Date</p>	<p>Date of Payment: _____</p> <p>Payment Amount: \$ _____</p> <p>Form of Payment</p> <p>Cashier's Check No: _____</p> <p>Money Order No: _____</p>