IN THE DISTRICT COURT OF	COUNTY, KANSAS
, Plaintiff	
v. C	ase number:
, Defendant	
A Proceeding Pursuant to	K.S.A. Ch
REQUEST FOR TRANSCRIPT	OF COURT RECORD
I,	Name of person making the request)
request a transcript of the court record for a	hearing held on
(date) at	(time) in front of Judge
held in	County District Court. I
request \square a transcript of the complete hearing \square a po	rtion of the hearing as follows (provide as
much detail as possible):	
Date of Proceeding:	
Type of Proceeding:	
Judge on Case:	
☐ This request is for an appeal subject to l	Kansas Supreme Court Rule 3.03.
☐ A paper copy is requested. I understand	I that the request for a paper copy will
result in an additional charge.	
Unless the Court orders otherwise, Lunderstan	d that I must pay the cost of the transcript

Unless the Court orders otherwise, I understand that I must pay the cost of the transcript preparation. Upon submission of the Request for Transcript of Court Record, I will be given a Demand for Payment of the Estimated Cost for the preparation of the transcript. I understand and agree to pay the estimated cost of the preparation of the transcript. I also understand and agree that the transcript will not be prepared until this payment is made. I also understand that I am

liable and agree to pay for any costs of preparation of the transcript that exceed the estimated
costs. I also understand the if the costs of preparation of the transcript are less than the estimated
costs paid, I may seek a refund of the excess payment.
Name:
Address:
City/ State/ Zip:
Telephone No:
Email:
CERTIFICATE OF SERVICE
I certify that a true and correct copy of this Request for Transcript of Court Record was
provided to the following persons by the method and on the date indicated:
(Name)by \square personal service \square U.S. Mail to:
(Address) on date.
(Name)by \square personal service \square U.S. Mail to:
(Address) on date.
(Name)by \square personal service \square U.S. Mail to:
(Address) on date.
Name:
Address:
City/ State/ Zip:
Telephone No:
Email: