

# **REQUEST FOR COPY OF FTR RECORDING OF COURT PROCEEDINGS**

\*You must have computer access to listen to this recording. Instructions will be provided.

**Cost: \$9.00 per Request/Hearing/Day (Ex: 4 day trial=\$36) if delivered electronically; \$10.00 per Request/Hearing/Day (Ex: 4 day trial=\$40) if delivered on CD; \$9.00 + actual cost of court-provided media, if delivered on media other than CD. No FTR request will be processed until payment has been received in full. \*\*Make all checks payable to The State of Oregon\*\***

**Application must be complete or it will be rejected.**

Pay by phone: 503-655-8453; Select Option 2; You <b>must</b> provide the case number for the Accounting Clerk.	Please mail request and payment to: Court Cashier 807 Main Street, Room 104 Oregon City, Oregon 97045  By email: <b>cla-sftp@ojd.state.or.us</b>
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**Allow 10 business days after receipt of request for request to be processed.**

Today's Date: \_\_\_\_\_ Electronic Audio File \_\_\_\_\_ CD \_\_\_\_\_ Other (Court-provided media.) \_\_\_\_\_

Case Name/Number(s): \_\_\_\_\_

Date of Proceeding: \_\_\_\_\_

Judge's Name: \_\_\_\_\_ Courtroom # \_\_\_\_\_

Ordered By: \_\_\_\_\_ Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_

\*Email Address: \_\_\_\_\_

☐ Pickup – Information Center, Clackamas County Circuit Court

☐ Mail: Address \_\_\_\_\_  
\_\_\_\_\_

**Electronic records will be available for 7 days. All CD's will be destroyed after 30 days if not picked up.  
No refunds.**

**Your request was rejected due to:**

No hearing was held

Information reported by a Court Reporter

Request had incorrect or missing information

Other \_\_\_\_\_

**If we are unable to process your request,  
you will receive a full refund from the Accounting Department.**

***THE COURTS DO NOT PROVIDE WRITTEN TRANSCRIPTS:***

***If you need a written transcript, take your recording to a certified transcriber.***

***You should be able to find a list of transcribers or court reporters in the yellow-pages of the phone book or the on-line yellow pages.***

----- **FOR COURT USE ONLY** -----

Amount Due: \_\_\_\_\_ Receipt # \_\_\_\_\_ Refund Ck#: \_\_\_\_\_ Date Completed: \_\_\_\_\_