

\_\_\_\_\_  
Requesting Person's Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Email

In the Juvenile Court of Utah

\_\_\_\_\_ Judicial District \_\_\_\_\_ County

State of Utah,  
In the Interest of

\_\_\_\_\_

**Request for a Copy of the  
Audio Record**

\_\_\_\_\_  
Case Number(s)

\_\_\_\_\_  
Judge

1. I am \_\_\_\_\_ (name of requester)
2. My date of birth is \_\_\_\_\_ .
3. I request a copy of the record of the proceeding in the child welfare/delinquency matter(s) held on:

\_\_\_\_\_, 20\_\_ at \_\_\_\_\_ am/pm.

4. My relationship to the child(ren) named above is:

- Family member
- Friend of child/family
- Member of the public
- Media representative

5. I understand notice of my request for a copy of the record of the proceeding will be provided to all subjects of the record and sufficient time will be allowed for the subjects of the record to respond before the court determines if there is good cause for the release of the record. (Utah Code 78A-6-115)

6. I would like the copy in the following format:  
 compact disc (CD) copy. I will pick it up at the court or pay mailing costs  
 emailed to me at this address: \_\_\_\_\_

7. I understand there is a \$10.00 for each one-half day of hearings. (Utah Code of Judicial Administration 4-202.08) I agree to pay a \$10.00 deposit today and any additional copy and/or mailing costs when the copy is ready.

8. My reasons for requesting a copy of the record of the proceedings are:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

***The court shall provide notice to all subjects of the record that a request for release of the record has been made. Utah Code 78A-6-115***

**Certificate of Service**

I certify that I filed with the court and served a copy of this Request for a Copy of the Audio Record on the following people.

Person's Name	Method of Service	Served at this Address	Served on this Date
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

\_\_\_\_\_ Date

Signature > \_\_\_\_\_

Printed Name \_\_\_\_\_