

PORTAGE COUNTY MUNICIPAL COURT

www.co.portage.oh.us

Ravenna Municipal Court
203 W. Main St. P.O. Box 958
Ravenna OH 44266
330.297.3635

Kent Municipal Court
303 East Main Street
Kent OH 44240
330.678.9170

STATE OF OHIO

COUNTY OF PORTAGE

CASE NO. _____

Plaintiff-Petitioner

-v-

Praecipe for Transcript

Defendant-Respondent

TO THE COURT REPORTER:

I hereby request that the following transcript (s) be prepared:

Date of hearing	Type of hearing	Judge/ Magistrate	For appeal/ other	Date needed
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

I acknowledge that arrangements for payment with a court reporter, including a deposit, if required, are necessary for this transcript order to be accepted and valid.

(If defendant is indigent and paperwork is in court file, please check here _____.)

BY: _____
Signature

Phone number and email address

ACKNOWLEDGE RECEIPT OF REQUEST:

Reporter: _____

Dated: _____

Note: file original with Clerk; copy to court reporter who took the proceedings –

It is your responsibility to contact the reporter and make timely arrangements for payment.