

CHEROKEE COUNTY - BLUE RIDGE JUDICIAL CIRCUIT
TRANSCRIPT REQUEST FORM

Please note: All requests for transcripts must be submitted through the Court Admin Office at: CourtAdmin@brjc.net or 90 North Street Ste. 250, Canton, GA 30114.

(type of case)
CRIMINAL ☐ CIVIL ☐
(class of court)
SUPERIOR ☐ STATE ☐ JUVENILE ☐ MAGISTRATE ☐

Name of Case: _____

Case # _____ Date of Proceeding: _____ Type: _____
(trial / motion / plea, etc.)

Judge: _____ Court Reporter _____
(if known)

Requested by: _____ Telephone: _____

If this request is made by the attorney of a case:

Name of Atty _____ APPOINTED ☐ or RETAINED ☐

****Email Address:** _____
Email address is required as transcript will be delivered in electronic format.

Why do you need this transcript?

Do you need the entire transcript? _____
If only partial transcript is requested, which part is needed? (ie: recitation of facts presented by DA, testimony of one party, sentence only, etc.)

(Signature of Requestor)

Date

*****COURT ADMINISTRATOR'S OFFICE USE ONLY*****

Request Received via _____ on _____
(email/fax/hand delivered, etc.) (date)

Initials: _____

Court Reporter: _____
(Verified Name of Court Reporter)

Forwarded to reporter by email on _____
(date)