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 ☐ 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)

10.2025