



# Las Vegas Municipal Court

200 Lewis Ave., Las Vegas, NV 89101

## Request for Transcript

Defendant Name: \_\_\_\_\_

Cases: \_\_\_\_\_

Charge: \_\_\_\_\_

Dept./Judge: \_\_\_\_\_

City Attorney: \_\_\_\_\_

Defense Attorney: \_\_\_\_\_

Date(s) Requested: \_\_\_\_\_

Date Trans. Need By: \_\_\_\_\_

- APPEALS- An Original + 3 Copies**
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- NON-APPEAL-An Original + 2 Copies**

Requesting Party or Firm: \_\_\_\_\_

Address: \_\_\_\_\_

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Phone No.: \_\_\_\_\_ Contact: \_\_\_\_\_

E-mail: \_\_\_\_\_

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**IF YOU HAVE ANY QUESTION PLEASE CONTACT 702-229-2157**

FOR OFFICE USE ONLY	
Request Received:	
Request Received by:	
Request Completed by:	
Defendant Notified:	Time: