

**SUPERIOR COURT OF CALIFORNIA  
COUNTY OF IMPERIAL  
939 W. MAIN STREET  
EL CENTRO, CA. 92243**

Request for Copy of Electronic Recording  
in a Misdemeanor/Infraction

Today's Date: \_\_\_\_\_ Case No: \_\_\_\_\_

Dept/Courtroom: \_\_\_\_\_ Case Name: \_\_\_\_\_

Date(s) of Hearing(s): \_\_\_\_\_

Requested By: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
(Full Name)

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

Verify this matter was recorded  
Cost is \$15 per hearing for copies of compact discs  
Fees must be paid before your request will be processed  
Make checks payable to Superior Court of California, County of Imperial

The Court will notify you by phone when the request has been completed.

Delivery Method

Mailed to you:  
Provide prepaid self-  
Addressed mailer

Pickup:  
Superior Court of California  
Civil Department  
939 W. Main Street  
El Centro, CA. 92243

Any electronic copy not picked up within 6 weeks of notification of completion  
will be destroyed.

---

(Clerk's Office Use Only)

DATE RECEIVED: \_\_\_\_\_ by: \_\_\_\_\_

Number of hearings: \_\_\_\_\_ Total fee paid: \_\_\_\_\_ Receipt # \_\_\_\_\_

Time sensitive reason \_\_\_\_\_

Mailer provided