



COURT AUDIO/VIDEO RECORDING REQUEST

Court Address

- 212 E PAW PAW STREET, PAW PAW, MI 49079
- 1007 E WELLS STREET, SOUTH HAVEN, MI 49079

Court Telephone No.
(269) 657-8200
(269) 637-5258

1. Date of Request: _____

2. Type of Request (select one): Purchase a copy View proceeding at courthouse

3. Requested by: _____
Name _____ Phone _____

Address _____ City _____ State _____ Zip _____

Email _____

4. Specify the complete case number, hearing officer, and party names: _____
Case Number

Hearing Official _____ Party Name(s) _____

5. Date(s) and Time(s) of the court event: _____

6. Reason for request: _____

7. Complete this item only if you are purchasing a copy:
The cost to purchase a copy of a court proceeding is \$20.00 for each flash drive or disc needed to complete your request. Files are formatted to play only on a computer.

Select one of three purchase options below:

- Pick up and pay upon receipt at the courthouse.
- Pay in advance and mail items to my address listed above. (add \$5.00 for postage)
Payment of \$_____ is enclosed. (check or money order made payable to "Van Buren County Clerk")
- Pay in advance and have files emailed to my address listed above.
Payment of \$20.00 is enclosed. (check or money order made payable to "Van Buren County Clerk")

8. Date needed by: _____

I understand that any audio/video recording viewed or obtained pursuant to this request may not be reproduced, altered, disseminated, placed on the internet, published, or posted pursuant to Court Policy VBC-0100, without prior approval of the Chief Judge or designee. Any violation may be treated as contempt of court. (This restriction does not apply to attorneys of record and official news media representatives.)

Date: _____ Signature: _____

Submit completed request to the Court Services Unit at either address above or by email to vbcourts@vbco.org. You will be notified when the copies are available to view, pick up or have been emailed.

For Court Use Only					
<input type="checkbox"/> Public Recording	<input type="checkbox"/> Non-Public or Confidential Recording (must obtain permission hearing official presiding over the court proceeding)				
Authorizing Signature: _____					
Called/emailed requester regarding the status of their request on _____					Clerk initials: _____
For Copy Requests: AMOUNT DUE: \$ _____					
PAID BY:	<input type="checkbox"/> CHECK	<input type="checkbox"/> MONEY ORDER	<input type="checkbox"/> CASH	<input type="checkbox"/> CREDIT CARD	Clerk initials: _____