

05/20

UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF WEST VIRGINIA

REQUEST FOR MEDIA RECORDING OF HEARING/TRIAL

Case/Adversary Proceeding Style: _____

Case/Adversary Proceeding Number:

Date of Hearing/Trial:

Location of Hearing/Trial (e.g., Charleston, Beckley, etc.):

Date by which recording is needed:

Special Instructions (if any) :

Requesting Party:

Address:

Telephone Number :

Dated:

Signature

*Attorneys should e-file this request in appropriate case & pay fee online

**Parties filing this request on paper, should also include fee of \$31.00 in cash or check made payable to Clerk, U.S. Bankruptcy Court, SDWV

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FOR COURT USE ONLY:

Order Received

Date: _____
(initials):

By

Fee Paid

Date: _____

Amount:

☐ **Order Mailed:** _____ / _____ (date/initials)

☐ **Order Picked Up:** _____ / _____ (date/initials)

Comments: