

REQUEST FOR ELECTRONIC RECORDING BY THE PUBLIC

This form shall be submitted no less than (5) business days prior to the desired date of the recording.

NAME:

ADDRESS:

PHONE:

CASE NUMBER:

CASE NAME:

DATE TO RECORD:

TIME TO RECORD:

FACILITY TO RECORD:

PLEASE DESCRIBE THE INTENDED USE OF RECORDING(S). INCLUDE METHODS OF DISTRIBUTION, INTENDED AUDIENCE, ETC.

FOR COURT USE ONLY:

APPROVED

DENIED

SIGNATURE OF CHIEF JUDGE/DESIGNEE:

DATE:

Submit completed form to: mediainquiry@jud3.flcourts.org.