UNITED STATES BANKRUPTCY COURT DISTRICT OF UTAH

Hearing Audio File Order Form

Case Name:		Case Number:	
Hearing Date and Time(s):		Name of Presiding Judge:	
Portions Requested:		Cost Requirements:	
	Entire Hearing		Check for \$34.00* payable to "Clerk, U.S. Bankruptcy Court" or payment can be made
	Opening Statements		by credit card. If paying by phone, contact the U.S. Bankruptcy Court cashier at 801-
	Ruling Only		524-6687 (select option 1 for a cashier).
	Closing Statements		Name and email address of party requesting the audio file.
	Testimony of (Specify Witness)		
	<u>ti</u>		e
		*Each h	nearing requested costs \$34.00.
Select a file format:		Signature: By signing, I certify that I will pay all	
□ WMA (Windows Media Audio) Playback using Windows Media Player.		charges prior to receipt of the audio file.	
□ MP3		Date:	
Playback using any device that is MP3 compatible.			
		the requ	y certify that I made a true and correct copy of nested hearings: CRD Signature:

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