

Commissioner Recording COPY REQUEST AND RECEIPT



Snohomish County Clerk
Sonya Kraski

AVAILABILITY: Recordings of Commissioner proceedings are available as follows: Sept. 14, 2006 through March 13, 2007 and July 9, 2007 forward. NO recordings exist prior to Sept. 14, 2007 or for the time period of March 14, 2007 through July 8, 2007.

USE WITHIN MOTIONS FOR REVISION: Effective Sept 1, 2007 SCLCR 7(b)(2)(m) was updated and reads as follows: A party seeking revision of a commissioner's ruling shall, within the time specified by statute, file and serve on all other parties a motion and completed calendar note. The filing of the written order of the commissioner shall commence the running of the time. Review of rulings shall be de novo on the pleadings submitted to the commissioner. **A transcript or recording of proceedings held before the commissioner shall not be filed or considered by the Court, unless specifically authorized by the judge hearing a motion to revise.** Any motion for revision shall state each particular finding of fact, conclusion of law, order or ruling for which revision is sought. Any such motion shall additionally contain a brief statement, for each such claimed error, which states the movant's claim of the correct finding, conclusion, order, or ruling. The Motion for Revision shall be filed timely and shall be scheduled by the movant to be heard not more than 14 days after the motion is filed. Working Copies of the motion and all papers which were before the commissioner in support or opposition shall be delivered as provided in SCLCR 7(2)(C).

DUPLICATION: Request forms will be available through the Clerk's Office. Efforts will be made to have the duplicate compact disks available for pick up within two (2) weeks of the date the request is made. The expense of searching for and duplicating the applicable proceeding shall be borne by the person making the request per standards set by the Clerk.

FEE RCW 36.18.016(2): \$25.00 per request.

SECTION I

Request Received: Date _____ Time _____ Staff _____		
In Person: <input type="checkbox"/> Phone: <input type="checkbox"/> Letter: <input type="checkbox"/> Fax: <input type="checkbox"/> Other: <input type="checkbox"/> _____		
Last Name	First Name	Initial
Address		Phone
City, State, Zip		E-mail

Hearing Requested: Case Number and Case Caption	Date of Hearing
Courtroom: Main Courthouse: A / B / C / D	Commissioner Name:

Description of Record Requested:

SECTION II

Copy of Order and Receipt: To be completed by Clerk's Office Staff

Cost of Compact Disk \$25.00 Number Requested: _____ Mailing Fees \$2.50 per Disk	
Total Due	

Date Received: _____ Fee Paid: _____ Request Completed: _____ Customer Notified: _____