

Court Services Toronto Local Appeal Body

Copy of Digital Audio Recording Request

Date Received by TLAB

Instructions:

- Complete one Form for each Proceeding you are requesting.
- A fee of \$25 is required for each copy of a Digital Audio Recording requested.

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Hearing Date Information

TLAB Case File Number (s)	Hearing Date (yyyy-mm-dd)		Hearing Room

Requestor Information

First Name			Last Name		
Company Name or Association Name (Association must be incorporated)					
Email					
Street Number	Street Name				Suite/Unit Number
City/Town		Province		Postal C	code
Telephone Number			Mobile Number		
Signature			Date (yyyy-mm-dd)		

Required Fee

Number of Copies	Format (CD, DVD)	Total Fee
Fee Paid by (Please check one)	🗌 MasterCard 🔲 Visa 🔲 Debit	

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Fee Received	Date Mailed:	Processed by

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