



CITY OF CHICAGO  
 DEPARTMENT OF BUSINESS AFFAIRS  
 AND CONSUMER PROTECTION  
 121 N. LaSalle St., Room 805  
 Chicago, IL 60602



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# BACP TRANSCRIPT REQUEST

## INSTRUCTIONS

1. Submit a completed transcript request form to BACP.
2. Contact the transcription service below for prepayment arrangement and request the service to notify BACP.
3. BACP will forward a copy of the digitized recording to the transcription service upon the notification by the service.

Case Name: \_\_\_\_\_ v. \_\_\_\_\_

Case Number: \_\_\_\_\_

Hearing Date Requested: \_\_\_\_\_ Witness 1: \_\_\_\_\_

Hearing Date Requested: \_\_\_\_\_ Witness 2: \_\_\_\_\_

Hearing Date Requested: \_\_\_\_\_ Witness 3: \_\_\_\_\_

Hearing Date Requested: \_\_\_\_\_ Witness 4: \_\_\_\_\_

## REQUESTOR INFORMATION

Requester: \_\_\_\_\_ Standard 10 business days:  Yes  No

Firm: \_\_\_\_\_ Expedited:  Yes  No Due date: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact: \_\_\_\_\_

E-mail delivery:  Yes  No

Hard copy:  Yes  No

Requester signature: \_\_\_\_\_ Date: \_\_\_\_\_

**To order a transcript, please contact:**

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(312) 497-8341

info@barealtime.com