

**TRANSCRIPT ORDER**

**DUE DATE:**

*Read Instructions on Back:*

1. NAME		2. PHONE NUMBER	3. DATE	
4. FIRM NAME				
5. MAILING ADDRESS			6. CITY	7. STATE
8. ZIP CODE				
9. CASE NUMBER	10. JUDGE		DATES OF PROCEEDINGS	
13. CASE NAME			11.	12.
13. CASE NAME			LOCATION OF PROCEEDINGS	
13. CASE NAME			14.	15. STATE
16. ORDER FOR				
APPEAL		CRIMINAL	CRIMINAL JUSTICE ACT	BANKRUPTCY
NON-APPEAL		CIVIL	IN FORMA PAUPERIS	OTHER ( <i>Specify</i> )

17. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)

PORTIONS	DATE(S)	PORTION(S)	DATE(S)
VOIR DIRE		TESTIMONY (Specify)	
OPENING STATEMENT (Plaintiff)			
OPENING STATEMENT (Defendant)			
CLOSING ARGUMENT (Plaintiff)		PRE-TRIAL PROCEEDING	
CLOSING ARGUMENT (Defendant)			
OPINION OF COURT			
JURY INSTRUCTIONS		OTHER (Specify)	
SENTENCING			
BAIL HEARING			

18. ORDER

CATEGORY	ORIGINAL + 1 (original to Court, copy to ordering party)	FIRST COPY	# OF ADDITIONAL COPIES	DELIVERY INSTRUCTIONS (check all that apply)	ESTIMATED COSTS
30 DAYS				EMAIL	
14 DAYS				PAPER COPY	
7 DAYS				WORD INDEX	
DAILY				PDF FORMAT	
HOURLY				E-TRANS	
REALTIME				ASCII FORMAT	

CERTIFICATION (19. & 20.)

By signing below, I certify that I will pay all charges  
(deposit plus additional).

E-MAIL ADDRESS

**NOTE: IF ORDERING BOTH PAPER AND ELECTRONIC COPIES, THERE WILL BE AN ADDITIONAL CHARGE.**

19. SIGNATURE

20. DATE

TRANSCRIPT TO BE PREPARED BY

ESTIMATE TOTAL

ORDER RECEIVED

DATE

BY

PROCESSED BY

PHONE NUMBER

DEPOSIT PAID

DEPOSIT PAID

TRANSCRIPT ORDERED

TOTAL CHARGES

TRANSCRIPT RECEIVED

LESS DEPOSIT

ORDERING PARTY NOTIFIED  
TO PICK UP TRANSCRIPT

TOTAL REFUNDED

PARTY RECEIVED TRANSCRIPT

TOTAL DUE