

## Request for Transcript or Copy \_\_\_\_\_ County

Pursuant to Pa.R.J.A. 4007(A), this form must be completed by any person requesting a transcript for any court proceeding. Additional requirements may be found in the local rules of court for each judicial district. Local rules may be found by following the appropriate link at: <u>http://www.pacourts.us/courts/courts-of-common-pleas/</u> If the cost of the transcript presents an economic hardship, there are reduced rates available to those who qualify. See Pa.R.J.A. 4007 (E). Copies of this request must be served in accordance with Pa.R.J.A. 4007(B). A deposit determined by local rule may be required.

| I. Case Information   |                                       |                                      |                     |  |  |  |  |
|---|---------------------------------------|--------------------------------------|---------------------|--|--|--|--|
|   |                                       |                                      |                     |  |  |  |  |
| Case Caption  |                                       | Docket Number                        |                     |  |  |  |  |
|   |                                       | Country on                           |                     |  |  |  |  |
| Presiding Judge   | Courtroom                             |                                      |                     |  |  |  |  |
| Date(s) of Proceeding   | Co-Defendant docket # (If applicable) |                                      |                     |  |  |  |  |
| Court Reporter Name (If available)  |                                       |                                      |                     |  |  |  |  |
| Type of proceeding: (check the appropriate box)   |                                       |                                      |                     |  |  |  |  |
| Criminal Civil Family Orphans' Court Juvenile Other: (specify)  |                                       |                                      |                     |  |  |  |  |
| Is this transcript request associated with an appeal? Yes No Children's Fast Track Yes No   |                                       |                                      |                     |  |  |  |  |
| II. Requestor Information   |                                       |                                      |                     |  |  |  |  |
| I am Counsel for  | Self                                  | -Represented Not a p                 | arty to this action |  |  |  |  |
| Court Appointed? Yes No   |                                       |                                      |                     |  |  |  |  |
| Does this request qualify for a reduced rate pursuant to Rule 4007(<br>If Yes, please provide proof of authorization for a reduced rate or an |                                       | requesting waiver of all or a portio | on of the costs.    |  |  |  |  |
| 5 ···· ; · ···· ; · ··· ; · · · 5 · 5   | 55 1 5 (7(7)                          | 1 0 0 1                              | 0                   |  |  |  |  |
| Name of requestor/Attorney ID Number (if applicable)  |                                       |                                      |                     |  |  |  |  |
| Agency/Firm   |                                       |                                      |                     |  |  |  |  |
| Street Address  | City                                  | State                                | Zip                 |  |  |  |  |
| Sireei nuuress  | Cuy                                   | sidle Zip                            |                     |  |  |  |  |
| Email   | Phone                                 | Fax                                  |                     |  |  |  |  |
| III. Transcript Items Requested   |                                       |                                      |                     |  |  |  |  |
| Entire proceeding Jury Voir Dire Opening statements Closing arguments Jury Instructions   |                                       |                                      |                     |  |  |  |  |
| Testimiony (specify each witness):  |                                       |                                      |                     |  |  |  |  |
| Pre/Post trial hearing (specify):   |                                       |                                      |                     |  |  |  |  |
| Other (specify):  |                                       |                                      |                     |  |  |  |  |
| IV. Private Party Transcript Delivery and   | d Cost                                |                                      |                     |  |  |  |  |
| For original transcript requests, please select from  | n the following:                      |                                      |                     |  |  |  |  |
| Delivery Time: Ordinary   | Expedited                             | Daily                                | Same Day            |  |  |  |  |
| Cost per page (electronic format) \$2.50 page   | \$3.50 per page                       | \$4.50 per page                      | \$6.50 per page     |  |  |  |  |
| Manner of Delivery: Electronic (PDF) format Hard copy (add \$0.25 per page to page rates)   |                                       |                                      |                     |  |  |  |  |
| Other (if offered, extra charges may apply): Complex Litigation Real Time Feed  |                                       |                                      |                     |  |  |  |  |
| Special requests (if offered):     Minuscript/Condensed     ASCII     Include Word index     Other:   |                                       |                                      |                     |  |  |  |  |
| Are you requesting a copy of an existing transcript?  | Yes No (For Photocopy                 | rates, please see Rule 4008          | (D)).               |  |  |  |  |

| V. For court use only                  |             |          | Hard copy requested<br>(apply adjusted rate) |       |           |  |
|--|-------------|----------|--|-------|-----------|--|
| Cost estimate                          |             |          | •  |       |           |  |
| Ordinary, county paid                  | \$          |          | х  | pages | = \$      |  |
| Ordinary, private paid                 | \$          |          | х  | pages | = \$      |  |
| Expedited                              | \$          |          | х  | pages | = \$      |  |
| Daily                                  | \$          |          | х  | pages | = \$      |  |
| Same Day                               | \$          |          | х  | pages | = \$      |  |
| Other:                                 | \$          |          | х  | pages | = \$      |  |
| Photocopy                              | \$          |          | х  | pages | = \$      |  |
| Additional charges: Complex Litigation | Real Tir    | ne Feed  | 1  |       | \$        |  |
|  |             | Subtotal |  | al    | \$        |  |
| Are costs waived or reduced? Yes No    |             |          | Less deposit                                 |       | - \$      |  |
|  |             |          | Balanc                                       | e due | = \$      |  |
| Transcript to be prepared by:          | Date of dep | osit:    | Date assigned:                               |       | Date due: |  |
| Date balance received: Check/M.O.      | number:     | Date tra | anscript sent to requesting part(ies):       |       |           |  |