

TRANSCRIPT ORDER FORM

CASE NAME: _____

WITNESS OR WITNESSES _____

DATE(S) OF DEPOSITION: _____

(Office Use Only: Job # _____ Reporter: _____)

- - -

I would like to purchase the following:

_____ Original Transcript (Taking Party)

_____ Copy of Transcript (I understand and agree that if the taking party does not have the deposition transcribed, that my order will then constitute an order for the original transcript and not a copy.)

_____ Copy of Video in DVD Format (if applicable)

- - -

The form in which I would like to receive the transcript (check all that apply):

_____ Hard Copy (full size)

_____ Electronic Copy

_____ Realtime or Rough Draft (only with purchase of certified transcript)

- - -

The delivery time in which I would like to receive my transcript:

_____ Regular Turnaround Time (10 to 14 Days)

_____ Expedited (2 to 7 Days) Requested Date of Delivery _____

_____ Overnight

Attorney: _____ (please print)

Firm: _____ (please print)

E-Mail Address _____

1. Invoices for services are due and payable upon receipt of work. Failure to make payment within 30 days will incur interest on the account and costs for collection of the debt including attorney fees.
2. If there are other parties in this case, I agree not to provide them with copies of this transcript. If I do, I understand and agree that the court reporter will look to me for payment, and I will pay said bill. (The purchasing party is buying the right to use the transcript for their own client. They are not buying the right to resell it or share it with parties beyond their own client.) Transcripts and exhibits may be shared with co-counsel and support staff. I agree not to share this transcript with opposing counsel and/or parties.
3. I agree that payment for services rendered by the court reporter shall not be contingent upon any third party's fulfillment of any financial obligation to my law firm in regard to the reporting and also shall not be contingent upon the outcome of the case.
4. I understand there will be and agree to pay the additional charges such as postage, CDs, disks, exhibit copying, etc.

Special Instructions _____

Attorney's Signature _____ **Date** _____