

**TRANSCRIPT ORDER FORM**

Witness: \_\_\_\_\_ Date: \_\_\_\_\_ Job No.: \_\_\_\_\_  
Case: \_\_\_\_\_

Read & Sign: \_\_\_\_\_ Send To: Witness  Attorney:  Address: \_\_\_\_\_  
e-mail: \_\_\_\_\_

DELIVERY			
<input type="checkbox"/>	Standard Delivery (7 to 10 business days)	<input type="checkbox"/>	Expedited Delivery* - DUE DATE:
<input type="checkbox"/>	Rough Draft* – cc:	<input type="checkbox"/>	Realtime*

\*Additional Charges

TRANSCRIPT FORMAT		includes sealed original to taking attorney
<input type="checkbox"/>	<b>PRINTED WITH ELECTRONIC:</b> Printed Full, Mini, Exhibits (if applicable) and Disk. Includes email and repository access of e-Tran, ASCII, PDF, OCR scanning of exhibits and other common formats.	
<input type="checkbox"/>	<b>ELECTRONIC ONLY:</b> Files will be sent via e-mail and disk. Includes email and repository access of e-Tran, ASCII, PDF, OCR scanning of exhibits and other common formats.	
<input type="checkbox"/>	<b>NO ORDER</b>	

EXHIBITS					
<input type="checkbox"/>	Printed w/ OCR Scanned	<input type="checkbox"/>	OCR Scanned Only	<input type="checkbox"/>	No Exhibits

VIDEO		SPECIAL LOAD FILES
<input type="checkbox"/>	Sync – Transcript-Video-Exhibit	<input type="checkbox"/> LEF (LiveNote)
<input type="checkbox"/>	M-PEG on Thumb Drive	<input type="checkbox"/> SBF (Summation)
<input type="checkbox"/>	DVD	<input type="checkbox"/> XMEF (Text-Map)

I understand that by signing this firm, I acknowledge my contractual responsibility for timely payment of all items ordered. If I fail to pay within thirty (30) days, I agree to pay interest at 18 % simple interest per annum. If this matter is turned over to an attorney for collection of no-payment, I also agree to pay reasonable attorney's fees, legal expenses and court costs.

Attorney/Firm: \_\_\_\_\_

Billing e-mail: \_\_\_\_\_

CC e-mail to Legal Assistant/Co-Counsel: \_\_\_\_\_

Signature: \_\_\_\_\_

**STANDING ORDER** – This represents the firm's order for all depositions taken in the matter.