| TRANSCRIPT ORDER FORM | | | | | |
|--|--|---|---|--|--|
| 1. REQUESTOR'S INFO | ORMATION | | | | |
| NAME | TELE | TELEPHONE NUMBER | | | |
| DATE OF REQUEST | will be emailed to | this address.) | | | |
| MAILING ADDRESS | | CITY, STA | CITY, STATE, ZIP CODE | | |
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| 2. TRANSCRIPT REQUESTED | | | | | |
| NAME OF COURT REPORTE | ER | | | | |
| OR CHECK HERE IF H | HEARING WAS RECORDED E | _ LECTRONICA | _ LLY (CourtSmart | t) | |
| CASE NUMBER | | | JUDGE'S NAME | | |
| DATE OF PROCEEDING | TYPE OF PROCEEDING | | LOCATION OF P | ROCEEDING | |
| REQUEST IS FOR: (Select one) FULL PROCEEDING | | <u>OR</u> | SPECIFIC PORT (Must specify below) | SPECIFIC PORTION (Must specify below) | |
| SPECIFIC PORTION(S) REQU | JESTED (If applicable): | | (IVINOI opecy y cere., | , | |
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| ADDITIONAL INSTRUCTIO! | ADDITIONAL INSTRUCTIONS TO AID IN PREPARATION OF THE TRANSCRIPT: | | | | |
| ADDITIONAL INSTRUCTIONS TO AID IN TREFARATION OF THE TRANSCRIFT. | | | | | |
| | | I THE TRAINSCI | XII I. | | |
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| 3. TYPE OF TRANSCRI | | | ximum Rate Per I | | |
| | | | | Page Each Add'1 Copy | |
| Transc 30-Day Transcript (Ordi | IPT REQUESTED cript Type inary): A transcript to be | Max | ximum Rate Per I | Each Add'l | |
| Transc 30-Day Transcript (Ordi delivered within thirty (30) | Cript Type inary): A transcript to be days after receipt of order. | Original \$4.00 | ximum Rate Per I First Copy to Each Party \$1.00 | Each Add'l Copy \$0.60 | |
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GENERAL INSTRUCTIONS

This form is used to order the transcription of proceedings. **COMPLETE A SEPARATE**ORDER FORM FOR EACH CASE NUMBER AND FOR EACH COURT REPORTER FROM WHOM TRANSCRIPTS ARE ORDERED.

CJA Counsel. CJA Counsel must complete an AUTH-24 in eVoucher to obtain approval for the transcript.

Appeal. If the case is on appeal, visit https://www.ca4.uscourts.gov/ for transcript instructions. The transcript will need to be ordered through the United States Court of Appeals using their order form.

Completion. Complete Sections 1 – 4 in full.

Submitting to the Court.

Attorney – e-File the order form to the appropriate case in CM/ECF. The form must be flattened prior to electronically filing in CM/ECF so that all fillable fields can no longer be modified.

Non-Attorney/Private Party – Mail the order form to the Clerk's Office, U.S. District Court, 300 Virginia Street, East, Room 2400, Charleston, West Virginia 25301.

<u>Transcript Fee</u>. The Court Reporter will notify you of the amount of the required deposit fee which may be mailed or delivered to the court. Upon receipt of the deposit, the court reporter will process the order.

<u>CD Fee</u>. Upon receipt of payment of the CD fee, the Clerk's Office will process the order. Payment may be made by mailing a check or money order to Clerk's Office, U.S. District Court, 300 Virginia Street, East, Room 2400, Charleston, West Virginia 25301, or credit card by calling the Clerk's Office at 304-347-3000.

<u>Delivery Time</u>. Delivery time is computed from the date of receipt of the deposit fee or, for transcripts ordered by the federal government, from the date of receipt of the electronic notification.

<u>Completion of Order</u>. The court reporter will notify you when the transcript is completed.

<u>Balance Due</u>. If the deposit fee was insufficient to cover all charges, the court reporter will notify you of the balance due, which must be paid prior to delivery of the transcript.