

Request for Transcript or Copy

IS THIS FOR A	AN APPEAL?
YES or	<i>NO</i>

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: http://www.pacourts.us/courts/courts-of-common-pleas/.

County

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						
Presiding Judge						
Date(s) of Proceeding						
Court Reporter Name (if available)						
Docket Number						
Type of Proceeding (check the appropriate box):	Criminal	Civil	Family	Orphan	s' Court	Juvenile
Other (please specify):						
II. Requestor Information						
Name of Requestor / Attorney ID Number (if appli	icable)					
I am Counsel for		Self-Repi	resented	No	t a party to	this action
Agency / Firm:			Court Repres	sented:	Yes	No
Street Address:	City:		St	ate:		Zip:
Email:			Tele	phone:		
Does this request qualify for a reduced ra	ite pursuant to	Pa.R.J.A.	4007(E)?	Yes	No	
If Yes, please provide proof of authorizati a waiver of all or a portion of the costs.	ion for a reduc	ed rate or	an affidavit r	equired by	Pa.R.J.A.	4008(B)(4) requesting
III. Transcript Items Requested						
Entire proceeding Jury Voir Dire	Opening states	ments	Closing arg	guments	Jury I	nstructions
Testimony (specify each witness):						
Pre/Post trial hearing (specify):						
Other (specify):						

IV. Transcript Delivery and Cost					
For the original transcript request, p	lease select from	n the following:			
Delivery Time:	Ordinary	Expedited	Daily	Same Day	
Original Transcript:	\$2.50	\$3.50	\$4.50	\$6.50	(cost per page)
Copy for Requestor: Yes N	+\$0.50	+\$0.75	+\$1.00	+\$1.25	(cost per page)
Note: Expedited, Daily, and Same D payable by requestor shall not excee Requesting Governmental Agency F	d the rates pres	cribed in Pa.R.J.			istrict or court reporter. Costs
Manner of Delivery: Electronic	c (PDF) Forma	t Hard copy	(add \$0.25 pe	er page to page rat	es)
Other (if offered, extra charges may	apply):	Complex Litigation	n Real T	ime Feed	
Special Requests (if offered): Minuscript/Condensed ASCII Include Word Index Other				Other	
If Other, please specify:					
Are you requesting a photocopy of a	n existing trans	script? Yes	No (For photocopy ra	tes, please see Pa.R.J.A 4008(D)
Requestor's Signature:				Date:	

Note: The first requestor of a transcript is obligated to pay for the original transcript, which is filed with the court, plus the copy rate if the requestor desires a personal copy (subject to any cost sharing with additional parties).



For Court Use Only

Docket Number				
Case Caption				
Name of Requestor				
Date of Request				
Date balance received:				
Deposit Check / M.O. Number:				
Date transcript completed:				
Date transcript sent to requesting parti	ies:			
Are the costs waived or reduced?	Yes	No		
Transcript to be prepared by:				
Date of Deposit:			Deposit Check/M.O. Number:	
Date Assigned:			Date Due:	

\$	X	pages	=\$	Subtotal
Φ.	37			Less Deposit
\$	X	pages	=\$	
				Cost Estimate
\$	X	pages	=\$	Final Pages
\$	X	pages	=\$	Final Cost
\$	X	pages	=\$	
\$	X	pages	=\$	Cost
\$	X	pages	=\$	Is the cost o
		1 0	1	Yes
\$0.25	X	pages	=\$	
\$	X	pages	=\$	N
\$	X	pages	=\$	
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Cost Sharing					
Is the cost of the transcript being shared between parties?					
Yes	No				

\$

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Notes: