



DAUPHIN COUNTY

REQUEST FOR COURT REPORTER TO PREPARE TRANSCRIPT OF COURT PROCEEDING OR REQUEST FOR COPY OF AN EXISTING TRANSCRIPT OF COURT PROCEEDING

Are you requesting a copy of an existing transcript? YES NO If no, complete only Section I, II, III and V. (SKIP SECTION IV)
If you are requesting the court reporter to prepare the transcript of a court proceeding, complete entire form.

I. CASE INFORMATION	
Case Name:	Docket Number:
Presiding Judge:	Date(s) of Proceeding:
Is this transcript request associated with an appeal that has already been filed?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Is this transcript request associated with a Children's Fast Track Appeal (as defined in Rule of Appellate Procedure 102 as any appeal from an order involving dependency, termination of parental rights, adoptions, custody or paternity)?	<input type="checkbox"/> YES <input type="checkbox"/> NO
II. REQUESTOR INFORMATION	
Name:	
Complete Mailing Address:	
Email Address:	Telephone Number:
Check one of the three boxes below. If you are the attorney of record, please state the name of the party that you represent. I am: <input type="checkbox"/> Self-Represented Party <input type="checkbox"/> Not a party to this action <input type="checkbox"/> Attorney of Record for: <i>Court Appointed?</i> <input type="checkbox"/> YES <input type="checkbox"/> NO <i>Governmental Agency Rate (if applicable)?</i> <input type="checkbox"/> YES <input type="checkbox"/> NO	
III. TRANSCRIPT INFORMATION (check the portions you are requesting)	
Trial: <input type="checkbox"/> Voir Dire <input type="checkbox"/> Opening Statements <input type="checkbox"/> Testimony <input type="checkbox"/> Closing Arguments <input type="checkbox"/> Jury Instructions <input type="checkbox"/> Entire Proceeding (testimony and jury instructions) Hearing other than a trial: <input type="checkbox"/> Entire Proceeding <input type="checkbox"/> Include Word Index <input type="checkbox"/> Other (specify):	
IV. DELIVERY TIME (check one) *Time starts at date of payment	
<input type="checkbox"/> Non-Ordinary Transcript: A transcript requested by a party when no matters are open before the court or where the transcript is requested by a non-party. Delivery time is 30 days. Cost: \$2.50 per page for electronically filed original, and copy charge of \$0.50 per page if ordered in electronic format. <input type="checkbox"/> Ordinary Transcript: A transcript necessary for an appeal (delivery time 14 days) or to otherwise advance litigation (delivery time is 30 days). Cost: \$2.50 per page for electronically filed original, and copy charge of \$0.50 per page if ordered in electronic format. <input type="checkbox"/> Expedited Delivery: A transcript delivered within 72 hours of a request not including weekends or official court holidays. Cost: \$3.50 per page for electronically filed original, and copy charge of \$0.75 per page if ordered in electronic format. <input type="checkbox"/> Daily Transcript: A transcript delivered within 18 hours of a request not including weekends or official court holidays. Cost: \$4.50 per page for electronically filed original, and copy charge of \$1.00 per page if ordered in electronic format. <input type="checkbox"/> Same Day Delivery: A transcript delivered within 6 hours of the close of the court session. Cost: \$6.50 per page, and copy charge of \$1.25 per page if ordered in electronic format.	
<input type="checkbox"/> Complex Litigation (\$1.00 per page surcharge) <input type="checkbox"/> Real Time Feed (\$1.00 per page surcharge)	
* Expedited, Daily and Same Day Delivery cannot be guaranteed. These services are only available if the court reporter has that capability.	
V. MANNER OF DELIVERY	
Original: If a hard copy is filed, \$0.25 per sheet surcharge added.	
Copy for Requestor: <input type="checkbox"/> Electronic (PDF) format <input type="checkbox"/> Paper Copy (\$0.25 per sheet surcharge added) <input type="checkbox"/> No copy requested	

Requestor's Signature: _____ **Date:** _____

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 Dauphin County Local Rules of Judicial Administration at: <http://www.dauphincounty.org/government/Court-Departments/Local-Rules-of-Court/Pages/default.aspx>. 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 filed in the appropriate filing office with copies served on the presiding judge, the court reporter, the Court Administrator's Office and opposing counsel or the self-represented opposing party.

MANDATORY SUPPLEMENT TO REQUEST FOR TRANSCRIPT OR COPY FORM

“Ordinary Transcript” is defined as a transcript necessary for an appeal or to otherwise advance litigation. If the case is on appeal, the Court Reporter is obligated to provide the transcript within 14 days after the deposit is received by Court Administration. If the case is not on appeal, the Court Reporter must provide the transcript within 30 days after the deposit is received.

Notwithstanding these deadlines, please enter the date you would like to receive the transcript. (Enter date) _____. There is no obligation for the Court Reporter to provide the transcript by this date but we will attempt to accommodate.

A government attorney or court-appointed attorney should not request an expedited, daily or same-day transcript without attaching an explanation as to why the transcript is needed outside the time-frames listed above. Court administration will contact the court for approval before this request will be accommodated.

Please complete all of the following information for each opposing counsel or self-represented party. The Request for Transcript Form will not be entertained without this information.

<hr/> <i>Opposing Counsel or Self-Represented Party's Name</i> <hr/> <hr/> <i>Complete Mailing Address (street address, city, state, zip)</i> <hr/> <hr/> <i>Telephone Number</i> _____ <i>Email Address</i> _____	
<hr/> <i>Opposing Counsel or Self-Represented Party's Name</i> <hr/> <hr/> <i>Complete Mailing Address (street address, city, state, zip)</i> <hr/> <hr/> <i>Telephone Number</i> _____ <i>Email Address</i> _____	
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CERTIFICATE OF COMPLIANCE

I, _____, certify that this filing complies with the provisions of the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania* that require filing confidential information and documents differently than non-confidential information and documents.

Date

Signature