

**D.C. SUPERIOR COURT – COURT REPORTING DIVISION**

500 Indiana Avenue NW, Room 5400, Washington, D.C. 20001

Phone: (202) 879-1009

**REQUEST FOR TRANSCRIPT ORDER FORM**
**APPEAL**     **NON-APPEAL**     **ORDER DATE:** \_\_\_\_\_    **REPORTER/TAPE:** \_\_\_\_\_
**PLEASE READ THESE REMINDERS PRIOR TO REQUESTING A TRANSCRIPT:**

- We accept orders from 8:30 a.m. until 4:00 p.m. All orders after 4:00 p.m. will be processed the next business day.
- We require a 50% deposit at the time an order is placed. If it is a copy order, we require full payment.
- Daily Tape transcript orders must be placed by 1:00 p.m. in order to receive it by 9:00 a.m. the next business day. We will accept Daily Tape transcript orders placed after 1:00 p.m., but they will not be guaranteed until 9:00 a.m. after one full business day.
- You will receive an e-mail or telephone call once your transcript is complete informing you that it is ready and if there is a remaining balance or if you will be issued a refund. Once payment is received in full, the transcript will be released. Refunds from Clerk of the Court may take 4 to 6 weeks and will be mailed to the address provided on the order form.
- Appeal transcripts will not be filed with the Court of Appeals until payment is made in full.
- You must pay for any portion of a transcript that was completed prior to your written notice of cancellation.
- **ACCEPTABLE METHODS OF PAYMENT:**
  - **For Court Reporters:** Exact cash, money order, or check made payable to the name of the Court Reporter.
  - **For Tape:** Cash, money order, or an attorney's check with a DC Bar # made payable to Clerk of the Court, Transcripts.

**CONTACT INFORMATION OF ORDERING PARTY**

<b>FULL NAME:</b>			
<b>E-MAIL ADDRESS:</b>		<b>PHONE:</b>	
<b>MAILING ADDRESS:</b>			
<b>IF A REFUND IS TO BE ISSUED, TO WHOM SHOULD THE CHECK BE MADE PAYABLE?</b>			

**CASE INFORMATION FOR REQUESTED TRANSCRIPT**

<b>D.C. SUPERIOR COURT CASE NUMBER:</b>		<b>PRESIDING JUDGE:</b>	
<b>CASE NAME:</b>		<b>COURTROOM:</b>	
<b>REQUESTED PORTION:</b>	<input type="checkbox"/> Entire Proceeding <input type="checkbox"/> Ruling <input type="checkbox"/> Testimony: _____ <input type="checkbox"/> Other: _____	<b>DATE OF PROCEEDING:</b> (one date per form)	

**DELIVERY TIMES AND ESTIMATES**

ORDER TYPE	DELIVERY TIME	PER PAGE	ESTIMATED PAGE COUNT	ESTIMATED TOTAL COST	50% DEPOSIT
<b>REGULAR</b>	<b>NON-APPEAL:</b> 30 DAYS   <b>APPEAL:</b> 60 DAYS	\$3.65			
<b>INTERMEDIATE</b>	15 CALENDAR DAYS	\$4.25			
<b>EXPEDITE</b>	7 CALENDAR DAYS	\$4.85			
<b>EXPRESS</b>	9AM AFTER 3 FULL BUSINESS DAYS	\$5.15			
<b>DAILY</b>	9AM NEXT BUSINESS DAY	\$6.06			
<b>HOURLY</b>	SAME DAY (PRIOR APPROVAL REQUIRED)	\$7.25			
<b>COPY</b>	REGULAR (3 – 5 BUSINESS DAYS)	\$0.90			
<b>COPY</b>	DAILY (WITHIN 1 BUSINESS DAY)	\$1.20			
<b>REALTIME FEED</b>	COURTROOM REALTIME FEED	\$3.05			
<b>SELECT ONE:</b>	<input type="checkbox"/> <b>PDF/E-MAIL</b>	<input type="checkbox"/> <b>PAPER</b>	<input type="checkbox"/> <b>CONDENSED PAGE</b> (4 frames per page)		

**NOTE:** If you select the condensed page option, please be advised that you still pay the total estimated page count.