

**U.S. BANKRUPTCY COURT
WESTERN DISTRICT OF OKLAHOMA
TRANSCRIPT/AUDIO CD REQUEST**

1. ORDER REQUEST <div style="display: flex; justify-content: space-around;"> TRANSCRIPT AUDIO CD </div>	2. DATE OF ORDER												
3. NAME OF PERSON ORDERING	4. EMAIL ADDRESS												
5. MAILING ADDRESS	6. PHONE NUMBER												
7. CITY AND STATE	8. ZIP CODE												
9. CASE NUMBER OF HEARING	10. CASE STYLE OF HEARING												
11. JUDGE PRESIDING AT HEARING	12. DATE(S) OF HEARING From _____ to _____												
13. ORDER IS FOR: APPEAL BANKRUPTCY ADVERSARY OTHER _____													
14. PORTIONS REQUESTED (Indicate the portion of the hearing requested) <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Voir Dire</td> <td style="width: 50%;">Court Ruling Only</td> </tr> <tr> <td>Opening Statement (Plaintiff)</td> <td>Testimony of (Specify Name)</td> </tr> <tr> <td>Opening Statement (Defendant)</td> <td>_____</td> </tr> <tr> <td>Closing Statement (Plaintiff)</td> <td>_____</td> </tr> <tr> <td>Closing Statement (Defendant)</td> <td>_____</td> </tr> <tr> <td>Entire Proceeding</td> <td>Other: _____</td> </tr> </table>		Voir Dire	Court Ruling Only	Opening Statement (Plaintiff)	Testimony of (Specify Name)	Opening Statement (Defendant)	_____	Closing Statement (Plaintiff)	_____	Closing Statement (Defendant)	_____	Entire Proceeding	Other: _____
Voir Dire	Court Ruling Only												
Opening Statement (Plaintiff)	Testimony of (Specify Name)												
Opening Statement (Defendant)	_____												
Closing Statement (Plaintiff)	_____												
Closing Statement (Defendant)	_____												
Entire Proceeding	Other: _____												
15. TRANSCRIPTS ONLY: Specify the amount of time for the preparation of the transcript. Shorter time periods include higher transcription rates: <table style="width: 100%; border: none; margin-top: 10px;"> <tr> <td style="width: 33%;">Ordinary</td> <td style="width: 33%;">14 Day Expedited</td> <td style="width: 33%;">7 Day Expedited</td> </tr> <tr> <td>Daily</td> <td>Hourly</td> <td></td> </tr> </table>		Ordinary	14 Day Expedited	7 Day Expedited	Daily	Hourly							
Ordinary	14 Day Expedited	7 Day Expedited											
Daily	Hourly												
16. NUMBER OF COPIES REQUESTED: Transcript request includes 1 copy for the Court. _____ Transcript _____ Audio Disks													
By signing below, I certify that I will pay all charges for the preparation of the transcript, including the deposit and additional charges as specified by the assigned court reporter/transcriptionist:													
_____ Signature of Person Ordering	_____ Date												