

UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA CAND 435 (CAND Rev. 08/2018)		TRANSCRIPT ORDER Please use one form per court reporter. <i>CJA counsel please use Form CJA24</i> Please read instructions on next page.					COURT USE ONLY DUE DATE:								
1a. CONTACT PERSON FOR THIS ORDER Carolyn Parker			2a. CONTACT PHONE NUMBER (404) 253-6987			3. CONTACT EMAIL ADDRESS caparker@duanemorris.com									
1b. ATTORNEY NAME (if different) Jennifer H. Forte			2b. ATTORNEY PHONE NUMBER (404) 253-6938			3. ATTORNEY EMAIL ADDRESS jhforte@duanemorris.com									
MAILING ADDRESS (INCLUDE LAW FIRM NAME, IF APPLICABLE) Duane Morris LLP 1075 Peachtree Street NE Suite 2000 Atlanta, GA 30309				5. CASE NAME Finjan, Inc. v. SonicWall, Inc.					6. CASE NUMBER 5:17cv4467-BLF						
				8. THIS TRANSCRIPT ORDER IS FOR: <input type="checkbox"/> APPEAL <input type="checkbox"/> CRIMINAL <input type="checkbox"/> In forma pauperis (NOTE: Court order for transcripts must be attached) <input checked="" type="checkbox"/> NON-APPEAL <input checked="" type="checkbox"/> CIVIL CJA: Do not use this form; use Form CJA24.											
7. COURT REPORTER NAME (FOR FTR, LEAVE BLANK AND CHECK BOX) → <input checked="" type="checkbox"/> FTR				9. TRANSCRIPT(S) REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested), format(s) & quantity and delivery type:											
a. HEARING(S) (OR PORTIONS OF HEARINGS)				b. SELECT FORMAT(S) (NOTE: ECF access is included with purchase of PDF, text, paper or condensed.)					c. DELIVERY TYPE (Choose one per line)						
DATE	JUDGE (Initials)	TYPE (e.g. CMC)	PORTION (If requesting less than full hearing, specify portion (e.g. witness or time))	PDF (email)	TEXT/ASCII (email)	PAPER	CONDENSED (email)	ECF ACCESS (web)	ORDINARY (30-day)	14-Day	EXPEDITED (7-day)	3-DAY	DAILY (Next day)	HOURLY (2 hrs)	REALTIME
01/28/2020	VKD	Hrg		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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10. ADDITIONAL COMMENTS, INSTRUCTIONS, QUESTIONS, ETC:															
ORDER & CERTIFICATION (11. & 12.) By signing below, I certify that I will pay all charges (deposit plus additional).												12. DATE			
11. SIGNATURE /s/ Jennifer H. Forte												01/29/2020			

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