

UNITED STATES DISTRICT COURT ORTHERN 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:						
CONTACT PERSON FOR THIS ORDER andra Young King			2a. CONTACT PHONE NUMBER (323) 852-1000			3. CONTACT EMAIL ADDRESS sking@frandzel.com									
ATTORNEY NAME (if different) Michael Gerard Fletcher			2b. ATTORNEY PHONE NUMBER (323) 852-1000			3. ATTORNEY EMAIL ADDRESS mletcher@frandzel.com									
MAILING ADDRESS (INCLUDE LAW FIRM NAME, IF APPLICABLE) RANDZEL ROBINS BLOOM & SCATO, L.C. 000 Wilshire Boulevard, 19th Floor Los Angeles CA 94102				5. CASE NAME In re: PersonalWeb Technologies, LLC					6. CASE NUMBER 5:18-md-02834						
COURT REPORTER NAME (FOR FTR, LEAVE BLANK AND CHECK BOX)→ <input type="checkbox"/> FTR Lee-Anne Shortridge				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: <u>Do not use this form; use Form CJA24.</u>											
TRANSCRIPT(S) REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested), format(s) & quantity and delivery type:															
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 <small>If requesting less than full hearing, specify portion (e.g. witness or time)</small>	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
1/06/2023	SVK	Discovery		<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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ADDITIONAL COMMENTS, INSTRUCTIONS, QUESTIONS, ETC:															
ORDER & CERTIFICATION (11. & 12.) By signing below, I certify that I will pay all charges (deposit plus additional). SIGNATURE /s/ Michael Gerard Fletcher											12. DATE 01/18/2023				

Clear Form

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