Elite Reporting Transcripts Order Form

IF YOU NEED EXPEDITED DELIVERY, PLEASE CALL US NOW AT: 954-761-8338.

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*Phone Number:				
*E-mail:				
*Case Name:				
Deponent:				
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*Date of Proceedings:				
*Type of Proceeding:				
* Party your firm represents:				
Franscript Production and Delivery Instruction	ions			
Original		ed Transcript	E Transcript Only	v
Electronic Version: E-Transcript (ptx)				y
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Exhibits: Hard Copy Exhibits	□ Electronic Exhib	ts		
Date Needed By:			-	
Regular Delivery is 10 Business days.	. You may be charged	I expedite rates if r	needed before th	ne 10 th business day.
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The undersigned requests these services and ag TERMS: INVOICE FOR SERVICES DUE AND PAY. WILL INCUR INTEREST AT 1.5% PER MONTH AN It is agreed that both attorney attending the depositi are personally responsible for the payment in full.	ABLE UPON RECEIPT (ID COSTS FOR COLLEC	OF WORK. FAILURE CTION OF THE DEB	INCLUDING ATT	TORNEY'S FEES.
Attorney Name			Date Signed	