



Request for Transcript or Copy

_____ County

Request Form must be emailed to: transcripts@courts.phila.gov

Pursuant to Pa.R.J.A. 4007(A), this form must be completed by any person requesting a transcript for any court proceeding. Additional requirements may be found in the local rules of court for each judicial district. Local rules may be found by following the appropriate link at: <http://www.pacourts.us/courts/courts-of-common-pleas/>. If the cost of the transcript presents an economic hardship, there are reduced rates available to those who qualify. See Pa.R.J.A. 4007 (E). Copies of this request must be served in accordance with Pa.R.J.A. 4007(B). A deposit in the amount of 95% of the estimated cost of the transcript is required. All payments must be by check or money order payable to: "First Judicial District of Pennsylvania-Transcripts." No cash payments will be accepted. Direct payments to court reporters are not permitted.

I. Case Information					
Case Caption	Docket Number				
Presiding Judge or Arraignment Court Magistrate	Courtroom				
Date(s) of Proceeding	Co-Defendant docket # (If applicable)				
Court Reporter Name (If available)					
Type of proceeding: (check the appropriate box)					
Criminal	Civil	Family	Orphans' Court	Juvenile	Other: (specify) _____
Is this transcript request associated with an appeal? Yes No Children's Fast Track Yes No					
II. Requestor Information					
I am Counsel for _____ Self-Represented Not a party to this action					
Court Appointed? Yes No					
Does this request qualify for a reduced rate pursuant to Rule 4007(E)? Yes No					
If Yes, please provide proof of authorization for a reduced rate or an affidavit required by Rule 4008(B)(4) requesting waiver of all or a portion of the costs.					
Name of requestor/Attorney ID Number (if applicable)					
Agency/Firm					
Street Address		City	State	Zip	
Email		Phone	Fax		
III. Transcript Items Requested			Check if Digital Recording		
Entire proceeding Jury Voir Dire Opening statements Closing arguments Jury Instructions					
Testimony (specify each witness):					
Pre/Post trial hearing (specify):					
Preliminary Arraignment			Other (specify):		
IV. Private Party Transcript Delivery and Cost					
For original transcript requests, please select from the following:					
Delivery Time:	Original/Ordinary	Expedited	Daily	Same Day	
Cost per page	\$3.00 page	\$4.50 per page	\$6.00 per page	\$9.00 per page	
Manner of Delivery:		Electronic (PDF) format Hard Copy			
Other (if offered, extra charges may apply): Real-time \$11.00 per page Real Time Streaming - \$250.00 per day					
Special requests (if offered):		Word Index ASCII Other: _____			
Are you requesting a copy of an existing transcript? Yes No (For Rates, please see Phila.R.J.A. No. *4008					

Requestor's Name _____

_____ Date