

TRANSCRIPT ORDER

Read Instructions on Back:

1. NAME Maria Crimi Speth		2. PHONE NUMBER (602) 248-1089		3. DATE 6/11/2007	
4. FIRM NAME Jaburg & Wilk, P.C.					
5. MAILING ADDRESS 3200 North Central Avenue, Suite 2000			6. CITY Phoenix		7. STATE AZ
8. ZIP CODE 85012					
9. CASE NUMBER 2:07-CV-00954-NVW		10. JUDGE Wake		DATES OF PROCEEDINGS	
				11. 5/17/2007	12.
13. CASE NAME Xcentric Ventures v. Stanley			LOCATION OF PROCEEDINGS		
			14. Phoenix		15. STATE Arizona
16. ORDER FOR					
<input type="checkbox"/> APPEAL		<input type="checkbox"/> CRIMINAL		<input type="checkbox"/> CRIMINAL JUSTICE ACT	
<input type="checkbox"/> NON-APPEAL		<input checked="" type="checkbox"/> CIVIL		<input type="checkbox"/> BANKRUPTCY	
				<input type="checkbox"/> IN FORMA PAUPERIS	
				<input type="checkbox"/> OTHER (Specify)	

17. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)

PORTIONS	DATE(S)	PORTION(S)	DATE(S)
<input type="checkbox"/> VOIR DIRE		<input type="checkbox"/> TESTIMONY (Specify Witness)	
<input type="checkbox"/> OPENING STATEMENT (Plaintiff)			
<input type="checkbox"/> OPENING STATEMENT (Defendant)			
<input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)		<input type="checkbox"/> PRE-TRIAL PROCEEDING	
<input type="checkbox"/> CLOSING ARGUMENT (Defendant)			
<input type="checkbox"/> OPINION OF COURT			
<input type="checkbox"/> JURY INSTRUCTIONS		<input checked="" type="checkbox"/> OTHER (Specify)	
<input type="checkbox"/> SENTENCING		Preliminary Injunction/	
<input type="checkbox"/> BAIL HEARING		OSC hearing	

18. ORDER

CATEGORY	ORIGINAL + 1 (original to Court, copy to ordering party)	FIRST COPY	ADDITIONAL COPIES	DELIVERY INSTRUCTIONS	ESTIMATED COSTS
ORDINARY	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES	PAPER COPY <input type="checkbox"/>	
EXPEDITED	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES	ELECTRONIC COPY:	
DAILY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES	DISK <input type="checkbox"/>	
				E-MAIL <input checked="" type="checkbox"/>	
HOURLY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES	E-MAIL ADDRESS MCS@jaburg.wilk.com	

CERTIFICATION (19. & 20.)
By signing below, I certify that I will pay all charges (deposit plus additional).

ESTIMATE TOTAL	0.00
----------------	------

19. SIGNATURE
Maria Crimi Speth

PROCESSED BY	PHONE NUMBER
--------------	--------------

20. DATE 6/11/2007

TRANSCRIPT TO BE PREPARED BY			NOTE: IF ORDERING BOTH PAPER AND ELECTRONIC COPIES, THERE WILL BE AN ADDITIONAL CHARGE.	
ORDER RECEIVED	DATE	BY		
DEPOSIT PAID			DEPOSIT PAID	
TRANSCRIPT ORDERED			TOTAL CHARGES	0.00
TRANSCRIPT RECEIVED			EBSS DEPOSIT	0.00
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT			TOTAL REFUNDED	
PARTY RECEIVED TRANSCRIPT			TOTAL DUE	0.00

Xcentric Ventures, L.C et al v Stanley et al

Doc. 25