

UNITED STATES DISTRICT COURT CENTRAL DISTRICT OF CALIFORNIA		FOR COURT USE ONLY DUE DATE:	
TRANSCRIPT DESIGNATION AND ORDERING FORM			
1. NAME Adam I. Kaplan		2. PHONE NUMBER 415.512.4016	
		3. DATE July 30, 2015	
4. FIRM NAME: Munger Tolles and Olson		5. E-MAIL ADDRESS: adam.kaplan@mto.com	
6. MAILING ADDRESS 560 Mission Street, 27th Floor		7. CITY San Francisco	
		8. STATE CA	9. ZIP CODE 94105
10. CASE NUMBER CV 13-4460 GHK (MRWx)		11. CASE NAME Good Morning to You Prod. v. Warner/Chappell Music	
		12. JUDGE Judge Wilner	
13. APPEAL CASE NUMBER		14. ORDER FOR <input type="checkbox"/> APPEAL <input type="checkbox"/> NON-APPEAL <input type="checkbox"/> CRIMINAL JUSTICE ACT <input type="checkbox"/> IN FORMA PAUPERIS <input type="checkbox"/> AUSA <input type="checkbox"/> FPD <input type="checkbox"/> OTHER _____	
15. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested) Attach additional page for designations if necessary.			
HEARING DATE	COURT REPORTER	PROCEEDINGS	
July 29, 2015	COURTSMART	<input type="checkbox"/> VOIR DIRE <input type="checkbox"/> OPENING STATEMENTS <input type="checkbox"/> SETTLEMENT INSTRUCTIONS <input type="checkbox"/> CLOSING ARGUMENTS <input type="checkbox"/> JURY INSTRUCTIONS <input type="checkbox"/> PRE-TRIAL PROCEEDINGS <input checked="" type="checkbox"/> OTHER (PLEASE SPECIFY): Oral Argument	
		<input type="checkbox"/> VOIR DIRE <input type="checkbox"/> OPENING STATEMENTS <input type="checkbox"/> SETTLEMENT INSTRUCTIONS <input type="checkbox"/> CLOSING ARGUMENTS <input type="checkbox"/> JURY INSTRUCTIONS <input type="checkbox"/> PRE-TRIAL PROCEEDINGS <input type="checkbox"/> OTHER (PLEASE SPECIFY):	
		<input type="checkbox"/> VOIR DIRE <input type="checkbox"/> OPENING STATEMENTS <input type="checkbox"/> SETTLEMENT INSTRUCTIONS <input type="checkbox"/> CLOSING ARGUMENTS <input type="checkbox"/> JURY INSTRUCTIONS <input type="checkbox"/> PRE-TRIAL PROCEEDINGS <input type="checkbox"/> OTHER (PLEASE SPECIFY):	
		<input type="checkbox"/> VOIR DIRE <input type="checkbox"/> OPENING STATEMENTS <input type="checkbox"/> SETTLEMENT INSTRUCTIONS <input type="checkbox"/> CLOSING ARGUMENTS <input type="checkbox"/> JURY INSTRUCTIONS <input type="checkbox"/> PRE-TRIAL PROCEEDINGS <input type="checkbox"/> OTHER (PLEASE SPECIFY):	
		<input type="checkbox"/> VOIR DIRE <input type="checkbox"/> OPENING STATEMENTS <input type="checkbox"/> SETTLEMENT INSTRUCTIONS <input type="checkbox"/> CLOSING ARGUMENTS <input type="checkbox"/> JURY INSTRUCTIONS <input type="checkbox"/> PRE-TRIAL PROCEEDINGS <input type="checkbox"/> OTHER (PLEASE SPECIFY):	
16. ORDER: IF ORDERING BOTH PAPER AND ELECTRONIC COPIES, THERE WILL BE AN ADDITIONAL CHARGE.			
CATEGORY	ORIGINAL + 1 (original to Court, copy to ordering party)	FORMAT	
ORDINARY	<input type="checkbox"/>	PAPER COPY	<input type="checkbox"/>
14 DAYS	<input type="checkbox"/>	PDF FORMAT	<input checked="" type="checkbox"/>
7 DAYS	<input type="checkbox"/>	ASCII FORMAT	<input type="checkbox"/>
DAILY	<input checked="" type="checkbox"/>	OTHER	<input type="checkbox"/>
HOURLY	<input type="checkbox"/>	FOR ADDITIONAL COPIES, CONTACT COURT REPORTER OR TRANSCRIPTION AGENCY	
REAL TIME	<input type="checkbox"/>		
(CERTIFICATION 17 & 18) By signing the below, I certify that I will pay all charges (deposit plus additional).		19. Transcription agency for digitally recorded proceedings:	
		20. Month: _____ Day: _____ Year: _____ Transcript payment arrangements were made with:	
17. DATE: July 30, 2015		NAME OF OFFICIAL: _____	
18. SIGNATURE: /s/Adam I. Kaplan		Payment of estimated transcript fees were sent on the following date:	
		Month: _____ Day: _____ Year: _____	