

UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA CAND 435 (CAND Rev. 08/2018)	<b>TRANSCRIPT ORDER</b> Please use one form per court reporter. <i>CJA counsel please use Form CJA24</i> Please read instructions on next page.	COURT USE ONLY <b>DUE DATE:</b>													
1a. CONTACT PERSON FOR THIS ORDER <b>Erika J. Davis</b>	2a. CONTACT PHONE NUMBER <b>(202) 974-1864</b>	3. CONTACT EMAIL ADDRESS <b>ejdavis@cgsh.com</b>													
1b. ATTORNEY NAME (if different) <b>Arminda Bepko</b>	2b. ATTORNEY PHONE NUMBER <b>(212) 225-2517</b>	3. ATTORNEY EMAIL ADDRESS <b>abepko@cgsh.com</b>													
4. MAILING ADDRESS (INCLUDE LAW FIRM NAME, IF APPLICABLE) <b>Cleary Gottlieb Steen &amp; Hamilton LLP</b> <b>One Liberty Plaza</b> <b>New York, NY 10006</b>	5. CASE NAME <b>Andersen et al v. Stability AI Ltd. et al</b>	6. CASE NUMBER <b>23-00201-WHO</b>													
7. COURT REPORTER NAME ( FOR FTR, LEAVE BLANK AND CHECK BOX)→ <input type="checkbox"/> FTR <b>Jennifer Coulthard</b>	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>														
9. TRANSCRIPT(S) REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested), format(s) & quantity and delivery type:															
a. 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
11/07/2023	WHO	CMC		<input checked="" 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"/>	<input type="radio"/>
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10. ADDITIONAL COMMENTS, INSTRUCTIONS, QUESTIONS, ETC:															
ORDER & CERTIFICATION (11. & 12.) By signing below, I certify that I will pay all charges (deposit plus additional).													12. DATE		
11. SIGNATURE <b>/s/Arminda Bepko</b>													<b>11/10/2023</b>		

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