

Clear Form

UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA CAND 435 <small>(CAND Rev. 7/2013)</small>		<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>Lucas Stratton</b>		2a. CONTACT PHONE NUMBER <b>(415) 875-6342</b>		3a. CONTACT EMAIL ADDRESS <b>lucasstratton@quinnemanuel.co</b>										
1b. ATTORNEY NAME (if different) <b>Matthew Warren</b>		2b. ATTORNEY PHONE NUMBER <b>(415) 875-6600</b>		3b. ATTORNEY EMAIL ADDRESS <b>matthewwarren@quinnemanuel.</b>										
4. MAILING ADDRESS (INCLUDE LAW FIRM NAME, IF APPLICABLE) <b>Quinn Emanuel Urquhart &amp; Sullivan, LLP</b> <b>50 California Street, San Francisco, CA 94111</b>			5. CASE NAME <b>Google Inc. v. Rockstar Consortium US LP et al.</b>			6. CASE NUMBER <b>13-cv-05933</b>								
7. COURT REPORTER NAME ( FOR FTR, LEAVE BLANK AND CHECK BOX)→ <input type="checkbox"/> FTR <b>Diane Skillman</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 type="checkbox"/> NON-APPEAL <input checked="" type="checkbox"/> CIVIL <input type="checkbox"/> CJA: Do not use this form; use Form CJA24											
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)	DAILY (Next day)	HOURLY (2 hrs)	REALTIME
03/13/14	CW	Mot.		<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
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10. ADDITIONAL COMMENTS, INSTRUCTIONS, QUESTIONS, ETC: <b>Contact email: lucasstratton@quinnemanuel.com; Attorney email: matthewwarren@quinnemanuel.com</b>							12. DATE <b>03/17/2014</b>							
ORDER & CERTIFICATION (11. & 12.) By signing below, I certify that I will pay all charges (deposit plus additional).							11. SIGNATURE <b>/s/ Matthew Warren</b>							
DISTRIBUTION: <input type="checkbox"/> COURT COPY <input type="checkbox"/> TRANSCRIPTION COPY <input type="checkbox"/> ORDER RECEIPT <input type="checkbox"/> ORDER COPY														