

FOR COURT USE ONLY

ATTORNEY OR PARTY WITHOUT AN ATTORNEY (Name, State Bar number, and address): NAME: ADDRESS: CITY, STATE, ZIP: TELEPHONE NO: FAX NO. (Optional): EMAIL ADDRESS (Optional): ATTORNEY FOR (Name):	<p style="text-align: center;"><i>FOR COURT USE ONLY</i></p>
<p style="text-align: center;">SUPERIOR COURT OF CALIFORNIA COUNTY OF SANTA CRUZ</p> <input type="checkbox"/> Santa Cruz Branch <input type="checkbox"/> Watsonville Branch 701 Ocean Street, Room 120 1 Second Street, Room 300 Santa Cruz, CA 95060 Watsonville, CA 95076	
PEOPLE OF THE STATE OF CALIFORNIA vs. DEFENDANT:	
<p>APPLICATION AND ORDER AUTHORIZING COST OF REPORTER'S TRANSCRIPTS</p>	CASE NUMBER:

FOR GOOD CAUSE as stated in the supporting declaration, I _____,
 attorney for _____,
 hereby apply for an Order Authorizing the Cost of Reporter's Transcripts to be used as follows: _____

DATED: _____

 Signature of Attorney

ORDER

BASED ON THE SUPPORTING DECLARATION, AND FINDING GOOD CAUSE, THE COURT AUTHORIZES THE EXPENDITURE OF ACTUAL COSTS OF PREPARATION OF REPORTER'S TRANSCRIPTS OF THE FOLLOWING PROCEEDING(S):

- | | | | |
|--------------------|------------------------------------|----------------------------------|---------------------------------|
| MOTION(S) _____ | DATE: _____ | <input type="checkbox"/> GRANTED | <input type="checkbox"/> DENIED |
| _____ | DATE: _____ | <input type="checkbox"/> GRANTED | <input type="checkbox"/> DENIED |
| TRIAL _____ | DATES: _____ | <input type="checkbox"/> GRANTED | <input type="checkbox"/> DENIED |
| | _____ | <input type="checkbox"/> GRANTED | <input type="checkbox"/> DENIED |
| | _____ | <input type="checkbox"/> GRANTED | <input type="checkbox"/> DENIED |
| VOIR DIRE | <input type="checkbox"/> REQUESTED | <input type="checkbox"/> GRANTED | <input type="checkbox"/> DENIED |
| OPENING STATEMENTS | <input type="checkbox"/> REQUESTED | <input type="checkbox"/> GRANTED | <input type="checkbox"/> DENIED |
| CLOSING STATEMENTS | <input type="checkbox"/> REQUESTED | <input type="checkbox"/> GRANTED | <input type="checkbox"/> DENIED |
| JURY INSTRUCTIONS | <input type="checkbox"/> REQUESTED | <input type="checkbox"/> GRANTED | <input type="checkbox"/> DENIED |
| OTHER _____ | DATE: _____ | <input type="checkbox"/> GRANTED | <input type="checkbox"/> DENIED |

DATED _____

 JUDGE OF THE SUPERIOR COURT