PARTY REQUESTING TRANSCRIPTS			FOR COURT USE ONLY
NAME:	\$	RECEIVED	
FIRM NAME:			
ADDRESS:			DATE:CLERK OF THE COURT
CITY:	STATE:	ZIP CODE:	
TELEPHONE NO:	FAX NO. (OPTIONAL):		
○ Salinas Division — 240 (○ Monterey Division — 120 THE PEOPLE OF THE STAT VS. DEFENDANT/RESPONDEN	00 Aguajito Road, Montere E OF CALIFORNIA		
REQUEST FOR TRANSCRIPTS			CASE NUMBER:
TRANSCRIPT INFORMAT	ION		
Court Reporter's Name:			
Hearing Date of Proceeding	g:	Time:	A.M / P.M.
Type of Proceeding:			
Judicial Officer's name:	Courtroom num		mber:

*NOTE: Pursuant to Government Code Section 69954, all requests for court reporter transcripts must be presented to the court reporter. The court reporter will contact you regarding billing information and delivery arrangements. A delay in processing your request may occur if the required information is not received. Please allow a minimum of 2 to 4 weeks to receive a copy of the requested transcript(s).