

UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA CAND 435 (CAND Rev. 08/2018)				TRANSCRIPT ORDER Please use one form per court reporter. <i>CJA counsel please use Form CJA24</i> Please read instructions on next page.					COURT USE ONLY DUE DATE:						
1a. CONTACT PERSON FOR THIS ORDER Curtis Schube				2a. CONTACT PHONE NUMBER (936) 524-8629			3. CONTACT EMAIL ADDRESS cschube@dhillonlaw.com								
1b. ATTORNEY NAME (if different) Michael Columbo				2b. ATTORNEY PHONE NUMBER (415) 433-1700			3. ATTORNEY EMAIL ADDRESS mcolumbo@dhillonlaw.com								
4. MAILING ADDRESS (INCLUDE LAW FIRM NAME, IF APPLICABLE) Dhillon Law Group Inc. 177 Post Street, Suite 700 San Francisco, CA 94108				5. CASE NAME National Association for Gun Rights et al. v. City of San Jose et al.					6. CASE NUMBER 5:22-cv-00501						
7. COURT REPORTER NAME (FOR FTR, LEAVE BLANK AND CHECK BOX)→ <input type="checkbox"/> FTR Summer Fisher				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 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 If requesting less than full hearing, specify portion (e.g. witness or time)	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
07/14/2022	BLF	MPI	Full	<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"/>
08/04/2022	BLF	MTD	Full	<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 s/Curtis Schube												08/05/2022			

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