

CAED 435 (Rev. 04/18)	United States District Court, Eastern District of California <b>Case 2:19-cv-00617-KJM-AC Document 79 Filed 11/08/22 Page 1 of 1</b>	<b>FOR COURT USE ONLY</b> <b>DUE DATE:</b>			
<b>TRANSCRIPT ORDER</b>					
<i>PLEASE Read Instruction Page (attached):</i>					
1. YOUR NAME <b>Amy Bellantoni</b>	2. EMAIL <b>ABELL@BELLANTONI-LAW.COM</b>	3. PHONE NUMBER <b>(914) 367-0090</b>			
5. MAILING ADDRESS <b>2 Overhill Road, Suite 400</b>		6. CITY <b>Scarsdale</b>			
		7. STATE <b>NY</b>			
		8. ZIP CODE <b>10583</b>			
9. CASE NUMBER <b>19 Clv. 00617</b>	10. JUDGE <b>Mueller</b>	DATES OF PROCEEDINGS			
		11. FROM <b>11 / 4 / 2022</b>	12. TO		
13. CASE NAME <b>Baird v Bonta</b>		LOCATION OF PROCEEDINGS			
		14. CITY <b>Sacramento</b>	15. STATE <b>CA</b>		
16. ORDER FOR					
<input type="checkbox"/> APPEAL No.		<input type="checkbox"/> CRIMINAL			
<input type="checkbox"/> NON-APPEAL		<input checked="" type="checkbox"/> CIVIL			
		<input type="checkbox"/> CRIMINAL JUSTICE ACT			
		<input type="checkbox"/> IN FORMA PAUPERIS			
		<input type="checkbox"/> BANKRUPTCY			
		<input type="checkbox"/> OTHER (Specify)			
17. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested) <i>You must provide the name of the Reporter.</i>					
TRIAL	DATE(S)	REPORTER	HEARINGS	DATE(S)	REPORTER
<input type="checkbox"/> ENTIRE TRIAL			<input checked="" type="checkbox"/> OTHER (Specify Below)		
<input type="checkbox"/> JURY SELECTION			Oral Argument on PI Motion	11/4/2022	Maryann Velanoti
<input type="checkbox"/> OPENING STATEMENTS					
<input type="checkbox"/> CLOSING ARGUMENTS					
<input type="checkbox"/> JURY INSTRUCTIONS					
18. ORDER (Grey Area for Court Reporter Use)					
CATEGORY	ORIGINAL (Includes Certified Copy to Clerk for Records of the Court)	FIRST COPY	ADDITIONAL COPIES	NO. OF PAGES ESTIMATE	COSTS
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14-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
EXPEDITED	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
3-Day	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
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HOURLY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
REALTIME	<input type="checkbox"/>	<input type="checkbox"/>			
CERTIFICATION (19 & 20) By signing below, I certify I will pay all charges (deposit plus additional).				ESTIMATE TOTAL	
19. SIGNATURE <i>Amy L. Bellantoni</i>			PROCESSED BY		
20. DATE <b>11/8/2022</b>			PHONE NUMBER		
TRANSCRIPT TO BE PREPARED BY			COURT ADDRESS		
ORDER RECEIVED			DATE BY		
DEPOSIT PAID			DEPOSIT PAID		
TRANSCRIPT ORDERED			TOTAL CHARGES		
TRANSCRIPT RECEIVED			LESS DEPOSIT		
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT			TOTAL REFUNDED		
PARTY RECEIVED TRANSCRIPT			TOTAL DUE		