

(Rev. 12/2023)

Please Read Instructions on Page 2.

TRANSCRIPT ORDER FORM			
1. REQUESTOR'S INFORMATION			
NAME Emily L. Szopinski		TELEPHONE NUMBER (304) 347-3350	
DATE OF REQUEST 4/19/24	EMAIL ADDRESS <i>(Transcript will be emailed to this address.)</i> kimberly_leadmon-ghareeb@fd.org		
MAILING ADDRESS 300 Virginia Street, East, Room 3400		CITY, STATE, ZIP CODE Charleston, WV 25301	
2. TRANSCRIPT REQUESTED			
NAME OF COURT REPORTER Ayme Cochran			
<u>OR</u> CHECK HERE ☐ IF HEARING WAS RECORDED ELECTRONICALLY (CourtSmart)			
CASE NUMBER 2:23-cr-00112	CASE NAME United States v. Imeesha Bradley	JUDGE'S NAME Faber	
DATE OF PROCEEDING 1/9/24	TYPE OF PROCEEDING Sentencing	LOCATION OF PROCEEDING Charleston	
REQUEST IS FOR: <i>(Select one)</i> ☒ FULL PROCEEDING <u>OR</u> ☐ SPECIFIC PORTION <i>(Must specify below)</i>			
SPECIFIC PORTION(S) REQUESTED <i>(If applicable):</i> 			
ADDITIONAL INSTRUCTIONS TO AID IN PREPARATION OF THE TRANSCRIPT: Contact undersigned with estimate prior to completing request - FPD authorization required in advance.			
3. TYPE OF TRANSCRIPT REQUESTED		Maximum Rate Per Page	
Transcript Type	Original	First Copy to Each Party	Each Add'l Copy
30-Day Transcript (Ordinary): A transcript to be delivered within thirty (30) days after receipt of order.	☐ \$4.00	☐ \$1.00	☐ \$0.60
14-Day Transcript: A transcript to be delivered within fourteen (14) days after receipt of order.	☒ \$4.70	☐ \$1.00	☐ \$0.60
7-Day Transcript (Expedited): A transcript to be delivered within seven (7) days after receipt of order.	☐ \$5.35	☐ \$1.00	☐ \$0.60
3-Day Transcript: A transcript to be delivered within three (3) days after receipt of order.	☐ \$6.00	☐ \$1.20	☐ \$0.75
Next-Day Transcript (Daily): A transcript to be delivered prior to the normal opening hour of the Clerk's Office on the calendar day following receipt of the order, regardless of whether or not that calendar day is a weekend or holiday.	☐ \$6.70	☐ \$1.35	☐ \$0.90
CD of electronically recorded proceeding	☐ \$34.00		
4. CERTIFICATION: By signing below, I certify that I will pay all charges (deposit plus additional).			
DATE 4/19/24	SIGNATURE s/Emily L. Szopinski		