District Court Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_

Dept. No. \_\_\_\_\_\_\_\_\_\_\_\_\_

IN THE \_\_\_\_\_\_\_\_\_\_\_\_ JUDICIAL DISTRICT COURT OF THE

STATE OF NEVADA IN AND FOR

THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_

INDICATE FULL CAPTION:

|  |  |
| --- | --- |
| Click here to enter caption |  |

**REQUEST FOR ROUGH DRAFT TRANSCRIPT OF PROCEEDINGS**

TO:   enter court reporter/recorder name

Name of party requesting transcript,  party designation i.e. plaintiff/defendant named above, requests preparation of a transcript of the proceedings before the district court, as follows:

Judge or officer hearing the proceeding:

List the specific individual dates of proceedings for which transcripts are being requested (a range of dates is not acceptable):

List the specific portions of the transcript being requested (e.g., suppression hearing, trial, closing argument, etc.):

Number of copies required:

**This is a request for rough draft transcripts pursuant to NRAP 3C(d)(3) or NRAP 3E(c). Pursuant to this rule, the above-named court reporter/recorder shall have 21 days from receipt of this notice to prepare, file, and deliver the above-requested transcripts. NRAP 3C(d)(3)(E); NRAP 3E(c)(4).**

**CERTIFICATION**

I certify that on the  date  day of  month , 20 year , I ordered the transcript(s) listed above from the court reporter/recorder named above by mailing or delivering this form to the court reporter/recorder, and I paid the required deposit on the  date  day of  month , 20 year .

I certify that I have filed a motion for waiver of costs pursuant to NRAP 9(a)(9) with the Supreme Court and therefore am not required to serve the court reporter/recorder with this form or pay a deposit. NRAP 9(a)(4)-(6).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_

                                                Signature Date

**CERTIFICATE OF SERVICE**

I certify that on the date indicated below, I served a copy of this completed transcript request form upon the court reporter/recorder, if required, and all parties to the appeal:

By electronic service:

If served other than through the court's electronic filing system, enter the email address of the parties served by this means and attach a copy of that party’s written consent authorizing service by this means. See NRAP 25(c)(2)

By personally serving it upon him/her; or

By mailing it by first-class mail with sufficient postage prepaid to the following address(es):

 Enter names and address(es) of parties served.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_

Signature (and Bar # if applicable) Date

 Law Firm Name (if applicable)

 Address

 Telephone #

 Email address