



Production & Billing Sheet

Reporter: _____ **Job Number:** _____ **Job Date:** **Network Job?**
Original & Expedited # of days **Network Agency?** **Due Date**
Stipulation

Job Difficulty: Regular
 Semi-Technical
 Technical

Job Type: Deposition
 Hearing
 Courtroom Work
 Arbitration
 Appellate Transcript

Services Provided: Videographer
 Interpreter
 Video Conferencing
 Conference Room

Case Caption:

Witness Address: **E-mail**

Witness 1:	Start/End Time	Volume	Units	Exhibit Range
Witness 2:	Start/End Time	Volume	Units	Exhibit Range
Witness 3:	Start/End Time	Volume	Units	Exhibit Range

Special Instructions/Comments

APPEARANCES:

Original & I
Attorney Info:

Represents

Witness Letter

Phone
Number

E-mail

Rough	Realtime	Expedited # of days	Printed Copy	E-copy
Rough	Realtime	Expedited # of days	Printed Copy	E-copy
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Copy Order
Attorney Info:

Represents

Witness Letter

Phone
Number

E-mail

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