



**Job #:** \_\_\_\_\_  
**Date of Depo:** \_\_\_\_\_  
**Reporter:** \_\_\_\_\_  
**Location of Depo:** \_\_\_\_\_

**Case Pending In:** \_\_\_\_\_  
**Plaintiff:** \_\_\_\_\_  
**Start Time:** \_\_\_\_\_  
**Witness:** \_\_\_\_\_  
**Video?:** \_\_\_\_\_  
**# of Pages** \_\_\_\_\_  
**Send Sig Page To:** \_\_\_\_\_  
**# of Pages of Exhibits:** \_\_\_\_\_

**Case #:** \_\_\_\_\_  
**Vs.:** \_\_\_\_\_  
**End Time:** \_\_\_\_\_  
**Expert?:** \_\_\_\_\_  
**Asbestos?:** \_\_\_\_\_  
**Read & Sign?:** \_\_\_\_\_  
**# of Exhibits:** \_\_\_\_\_  
**Return Original Exhibits To:** \_\_\_\_\_

**Appearances**

<input checked="" type="checkbox"/> Firm Name Attorney Present – Original or Copy (Plaintiff/Defendant) Email	Rush Delivery	E-Tran		Hard Copy		No Copy	Telephonic	Room Charge (office use)	
		Rough	E-Tran	Full-Size	Conds				
<input checked="" type="checkbox"/>									
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<input checked="" type="checkbox"/>									
<b>Totals (Office Use Only)</b>									

**ADDITIONAL INFORMATION**


Invoice #	Date Billed:	ASCII:
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**Appearances**

✓ Firm Name Attorney Present – Original or Copy (Plaintiff/Defendant) Email	Rush Delivery	E-Tran		Hard Copy		No Copy	Telephonic	Room Charge (office use)
		Rough	E-Tran	Full- Size	Conds			
✓								
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**REMINDERS**

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