

UNITED STATES DISTRICT COURT FOR THE DISTRICT OF MONTANA

TRANSCRIPT ORDER FORM

Use one form per court reporter

****Please read instructions on next page****

1. ATTORNEY NAME Christopher T. Sweeney		2. PHONE NUMBER 406-248-7731		3. EMAIL ADDRESS (for transcript delivery) christopher.sweeney@moultonbellingham.com			
4. MAILING ADDRESS (including law firm name, if applicable) Moulton Bellingham PC 27 North 27th Street, Suite 1900 P O Box 2559 Billings, MT 59103-2559		5. NAME & ROLE OF PARTY REPRESENTED: If not a party, use non-party request form. Defendant Watch Tower Bible & Tract Society of Pennsylvania					
		6. CASE NAME Caekaert et al v. Watch Tower Bible & Tract Sociert of New York					
		7. DISTRICT COURT CASE NUMBER CV-20-52-BLG-SPW					
8. COURT REPORTER NAME: Use a separate form for each court reporter. Kim Marchwick		9. COURT OF APPEALS CASE NUMBER (if applicable)					
10. THIS TRANSCRIPT ORDER IS FOR:							
<input type="radio"/> APPEAL <input checked="" type="radio"/> NON-APPEAL		<input type="checkbox"/> CJA		<input type="checkbox"/> IN FORMA PAUPERIS (court order attached)			
11. TRANSCRIPT REQUESTED: For each transcript requested, please specify the date of the proceeding, the proceeding or partial proceeding requested, the transcript format, and the delivery time. Financial arrangements must be made with the court reporter before transcript is prepared.							
DATE	PROCEEDING If requesting a partial proceeding, specify portion (e.g., witness or time).	PAPER Full Size	PAPER A-Z Word Index	E-MAIL PDF	E-MAIL ASCII	E-MAIL A-Z Word Index	DELIVERY TIME
4/5/2022	Hearing on Pltfs' Motion for Sanctions	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	30-day
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30-day
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30-day
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30-day
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30-day
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		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30-day
12. ADDITIONAL COMMENTS, INSTRUCTIONS, QUESTIONS, ETC:							
13. SIGNATURE /s/ Christopher T. Sweeney				14. DATE 9-27-22			