ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar Number and Address)			FOR COURT USE ONLY
TEL	EPHONE NO.:	FAX NO. (Optional):	
E-M	AIL ADDRESS (Optional):		
ATT	ORNEY FOR (Name):		
su	PERIOR COURT OF CALIFOR		
□ UKIAH Courthouse       □ TEN MILE Branch Court         100 North State Street       700 South Franklin Street         Ukiah, CA 95482       Fort Bragg, CA		700 South Franklin Street	
In t	he matter of:		
	minor		
REQUEST FOR SPECIAL TRANSCRIPT AND ORDER			CASE NUMBER:
1.	l,	stina transcript)	the applicant,
			proceeding
		(type of hearing: detention, adjudication, review, etc.	· · · · · · · · · · · · · · · · · · ·
	heard in the Juvenile department on	, the Honorable	presiding.  (judicial officer's name)
2.	The proceeding was reported by Court F	Reporter(s):	
3.	The request is being made for the follow		
4.	The transcript shall be prepared at the expense of □ the court □ the applicant □ other party:		
	☐ I, the Applicant, further request that the transcript be prepared in an expedited manner (within 10 court days). Justification:		
Date	:	Applicant's Rela	ationship to Minor:
(TYPE	/PE OR PRINT NAME OF APPLICANT) (SIGNATU		TURE OF APPLICANT)
		ORDER	
IT IS	HEREBY ORDERED that Court Report	ter(s)	prepare an
original and copy(s) of the transcript of the			proceeding heard
in the Juvenile department on, the Honorable			presiding.
	s of said transcript are to be borne by □ are to be distributed to the Applicant and		ty:
	-	-	nty District Attorney   Juvenile Probation  Other:
IT IS			at □ expedited □ regular rates.
		(date)	
Data			
Date:			or Court