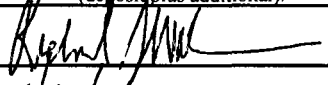


AO 435 (Rev. 04/18)	ADMINISTRATIVE OFFICE OF THE UNITED STATES COURTS	<b>FOR COURT USE ONLY</b>	
<b>TRANSCRIPT ORDER</b>		<b>DUE DATE:</b>	
<i>Please Read Instructions:</i>			
1. NAME <b>RICHARD J. WILNER</b>	2. PHONE NUMBER <b>917 952 8023</b>	3. DATE <b>4/16/19</b>	
4. DELIVERY ADDRESS OR EMAIL <b>RJWILNER@GMAIL.COM</b>	5. CITY <b>New York</b>	6. STATE <b>NY</b>	
		7. ZIP CODE <b>10036</b>	
8. CASE NUMBER <b>18-35672</b>	9. JUDGE <b>Jones</b>	DATES OF PROCEEDINGS	
		10. FROM <b>4-16-19</b>	11. TO <b>4-16-19</b>
12. CASE NAME <b>Westmoreland</b>		LOCATION OF PROCEEDINGS	
		13. CITY <b>Houston</b>	14. STATE <b>TX</b>
15. ORDER FOR			
<input type="checkbox"/> APPEAL	<input type="checkbox"/> CRIMINAL	<input type="checkbox"/> CRIMINAL JUSTICE ACT	<input checked="" type="checkbox"/> BANKRUPTCY
<input type="checkbox"/> NON-APPEAL	<input type="checkbox"/> CIVIL	<input type="checkbox"/> IN FORMA PAUPERIS	<input type="checkbox"/> OTHER
16. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)			
PORTIONS	DATE(S)	PORTION(S)	DATE(S)
<input type="checkbox"/> VOIR DIRE		<input type="checkbox"/> TESTIMONY (Specify Witness)	
<input type="checkbox"/> OPENING STATEMENT (Plaintiff)			
<input type="checkbox"/> OPENING STATEMENT (Defendant)			
<input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)		<input type="checkbox"/> PRE-TRIAL PROCEEDING (Specy)	
<input type="checkbox"/> CLOSING ARGUMENT (Defendant)			
<input type="checkbox"/> OPINION OF COURT			
<input type="checkbox"/> JURY INSTRUCTIONS		<input checked="" type="checkbox"/> OTHER (Specify)	<b>ENTIRE HEARING</b>
<input type="checkbox"/> SENTENCING			
<input type="checkbox"/> BAIL HEARING			
17. ORDER			
CATEGORY	ORIGINAL <small>(Includes Certified Copy to Clerk for Records of the Court)</small>	FIRST COPY	ADDITIONAL COPIES
			NO. OF COPIES
ORDINARY	<input type="checkbox"/>	<input type="checkbox"/>	
14-Day	<input type="checkbox"/>	<input type="checkbox"/>	
EXPEDITED	<input type="checkbox"/>	<input type="checkbox"/>	
3-Day	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
DAILY	<input type="checkbox"/>	<input type="checkbox"/>	
HOURLY	<input type="checkbox"/>	<input type="checkbox"/>	
REALTIME	<input type="checkbox"/>	<input type="checkbox"/>	
CERTIFICATION (18. & 19.) By signing below, I certify that I will pay all charges (deposit plus additional).			ESTIMATE TOTAL
			<b>0.00</b>
18. SIGNATURE 		PROCESSED BY	
19. DATE <b>4/16/19</b>		PHONE NUMBER	
TRANSCRIPT TO BE PREPARED BY		COURT ADDRESS	
	DATE	BY	
ORDER RECEIVED			
DEPOSIT PAID		DEPOSIT PAID	
TRANSCRIPT ORDERED		TOTAL CHARGES	
		<b>0.00</b>	
TRANSCRIPT RECEIVED		LESS DEPOSIT	
		<b>0.00</b>	
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT		TOTAL REFUNDED	
		<b>0.00</b>	
PARTY RECEIVED TRANSCRIPT		TOTAL DUE	
		<b>0.00</b>	