

\_\_\_\_\_  
[FIRM NAME PUT HERE]

|                         |       |   |       |
|-------------------------|-------|---|-------|
| <b>NOTICE OR ORDER:</b> | _____ | <b>DATE OF EBT:</b>                       | _____ |
| <b>LOCATION:</b>        | _____ | <b>TRANSCRIPT ORDERED:</b>                | _____ |
| <b>DEPONENT:</b>        | _____ | <b># OF EXHIBITS MARKED:</b>              | _____ |
| <b>DEFENDING:</b>       | _____ | <b>COURT REPORTER:</b>                    | _____ |
| <b>DISC ORDERED:</b>    | _____ | <b>COURT REPORTER PHONE #:</b>            | _____ |
| <b>(Mini-script)</b>    |       | <b>PERSON TAKING CUSTODY OF EXHIBITS:</b> | _____ |

| Exhibit No. | Description of Exhibit | Pages |
|-------------|------------------------|-------|
|             |                        |       |
|             |                        |       |
|             |                        |       |
|             |                        |       |
|             |                        |       |
|             |                        |       |
|             |                        |       |
|             |                        |       |
|             |                        |       |
|             |                        |       |
|             |                        |       |
|             |                        |       |
|             |                        |       |
|             |                        |       |
|             |                        |       |
|             |                        |       |
|             |                        |       |
|             |                        |       |
|             |                        |       |
|             |                        |       |
|             |                        |       |