

County of Adams

Courts' Self-Help Center – Packets

HOW TO REQUEST TRANSCRIPTS

This packet contains information, forms, and instructions on how to request transcripts for court proceedings related to courts of record in Adams County.

DISCLAIMER

Court staff is not able to give you legal advice or help you fill out/complete these forms. The information in this packet is not a substitute for professional legal advice. The Court assumes no responsibility and accepts no liability for actions taken by users of these documents, including reliance on their contents. If you want to obtain the services of an attorney but do not know whom to contact, please call the Adams County Court Administrator at 717-337-9846 or the Pennsylvania Lawyer Referral Service at 1-800-692-7375.

Packet Last Updated: March 20, 2017

HOW TO REQUEST TRANSCRIPTS

In this Packet:

- **Information and Instructions (consists of two pages)**
- **Transcript Request Form (consists of two pages)**
- **IFP Petition and Affidavit, and Verification (consists of four pages)**

INFORMATION AND INSTRUCTIONS

The Pennsylvania Rules of Judicial Administration 4000 series outlines the process by which a party can request and obtain transcripts related to any proceeding from a court of record. Generally speaking, this would involve hearings at the Court of Common Pleas level. Some transcripts may be restricted due to the type of court hearing and based upon whether the requestor is a party to the proceeding (for example, transcripts for certain juvenile hearings may not be available to a requestor). Local practice related to obtaining transcripts is further defined in the Adams County Rules of Judicial Administration.

All requests for transcripts require the completion of a Transcript Request Form. A requestor will need to file this with the appropriate filing office:

- For transcript requests related to criminal, delinquency, dependency or summary appeal matters at the Common Pleas level, the request will be filed at the Adams County Clerk of Courts Office
- For transcript requests related to Orphans' Court matters, the request will be filed at the Adams County Clerk of the Orphans' Courts Office
- For transcript requests related to civil matters at the Common Pleas level, the request will be filed at the Adams County Office of the Prothonotary
- For transcript requests related to domestic relations matter, the request will be filed at the Adams County Domestic Relations Section

You will not be required to pay a filing fee in order to file a Request for Transcript form. You must complete all four sections of page 1 of the Request for Transcript form and you must sign and date this form.

Additionally, if you believe you will not be able to afford the costs related to obtaining transcripts (for example, a paper copy of a new transcript starts at \$2.75 per page), you may seek consideration for reduced costs of transcripts at this time by filing for In Forma Pauperis (IFP) status.

In order to ask for IFP status, you must file a "Petition to Proceed In Forma Pauperis and Affidavit with Verification" with the Court, in which you give the Judge detailed information about your financial situation. A form Petition to Proceed In Forma Pauperis and Affidavit with Verification are attached to these instructions.

You should complete, sign, and date the Petition to Proceed In Forma Pauperis and Affidavit with Verification. Enter the exact caption number of the case you are seeking transcripts for. Indicate whether you are the plaintiff, defendant, or other in this action by checking the correct box. Make sure that all of the requested information, including the financial information, is complete. If it is not, your petition will be denied.

HOW TO REQUEST TRANSCRIPTS

After you have filed the request (and the In Forma Pauperis packet, if applicable), you must serve a copy of the request (and the In Forma Pauperis packet, if applicable) on the following:

- The Judge that presided over the hearing you are seeking a transcript for
 - The Court Reporter that was present for the hearing you are seeking a transcript for
 - The District Court Administrator or designee
 - Opposing counsel (or, if unrepresented, the opposing party)
- [See Pennsylvania Rules of Judicial Administration 4007(B)]

If you fail to serve those noted above, your request will not be processed. Please note that the filing office may make photocopies of these forms for you upon paying the filing office's copy fee. As you may not know who the Judge and/or Court Reporter were that presided over the hearing you are seeking a transcript for at the time you are making your request, the Adams County Court will permit you to serve the copies for the Judge, Court Reporter and District Court Administrator on the District Court Administrator/designee, which can be done by bringing those copies in person or mailing those copies to the Court Administrator's Office, Adams County Courthouse, 4th Floor, 117 Baltimore Street, Gettysburg, PA 17325.

A Judge will review the Request for Transcript form and, if submitted, the IFP documentation. The Judge will then enter an Order of Court to indicate how to proceed. This Order of Court will be sent to you by the filing office. If the Order directs you to leave a deposit for a transcript that has not been previously created, or to make payment in full for a copy of a previously-created transcript, you will need to make arrangements with the appropriate filing office to pay the costs before any work begins to produce the transcript. However, if you were granted IFP status with no financial obligation, the Court Reporter will immediately begin to work towards completing the request.

In those instances where the Court Reporter is creating a new transcript, you will be contacted by the Court Reporter to let you know what the final balance due will be. You will need to make arrangements with the appropriate filing office and pay the balance before receiving the transcript. Once you have paid the balance, the filing office will notify Court Administration. The Court Reporter will then send you the transcript. If you were awarded IFP status with no financial obligation, the Court Reporter will send you the transcript once it has been completed.

In those instances where you are seeking copies of a previously-transcribed transcript, you will need to make payment as directed in the Court Order with the appropriate filing office. Once you have paid for the copies, the filing office will notify Court Administration. The Court Reporter will then send you the transcript. If you were awarded IFP status with no financial obligation, the Court Reporter will send you the copy.

You have the right to appeal the Judge's decision. An appeal can be complicated and may involve hiring an attorney.

Court personnel and county employees are not permitted to help you fill out these papers or give you legal advice.



Request for Transcript or Copy

_____ County

Pursuant to Pa.R.J.A. 4007(A), this form must be completed by any person requesting a transcript for any court proceeding. Additional requirements may be found in the local rules of court for each judicial district. Local rules may be found by following the appropriate link at: <http://www.pacourts.us/courts/courts-of-common-pleas/> If the cost of the transcript presents an economic hardship, there are reduced rates available to those who qualify. See Pa.R.J.A. 4007 (E). Copies of this request must be served in accordance with Pa.R.J.A. 4007(B). A deposit determined by local rule may be required.

I. Case Information				
Case Caption	Docket Number			
Presiding Judge	Courtroom			
Date(s) of Proceeding	Co-Defendant docket # (If applicable)			
Court Reporter Name (If available)				
Type of proceeding: (check the appropriate box)				
<input type="checkbox"/> Criminal <input type="checkbox"/> Civil <input type="checkbox"/> Family <input type="checkbox"/> Orphans' Court <input type="checkbox"/> Juvenile <input type="checkbox"/> Other: (specify) _____				
Is this transcript request associated with an appeal? <input type="checkbox"/> Yes <input type="checkbox"/> No Children's Fast Track <input type="checkbox"/> Yes <input type="checkbox"/> No				
II. Requestor Information				
I am Counsel for _____ <input type="checkbox"/> Self-Represented <input type="checkbox"/> Not a party to this action Court Appointed? <input type="checkbox"/> Yes <input type="checkbox"/> No Does this request qualify for a reduced rate pursuant to Rule 4007(E)? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please provide proof of authorization for a reduced rate or an affidavit required by Rule 4008(B)(4) requesting waiver of all or a portion of the costs.				
Name of requestor/Attorney ID Number (if applicable)				
Agency/Firm				
Street Address		City	State	Zip
Email		Phone	Fax	
III. Transcript Items Requested				
<input type="checkbox"/> Entire proceeding <input type="checkbox"/> Jury Voir Dire <input type="checkbox"/> Opening statements <input type="checkbox"/> Closing arguments <input type="checkbox"/> Jury Instructions				
<input type="checkbox"/> Testimony (specify each witness):				
<input type="checkbox"/> Pre/Post trial hearing (specify):				
<input type="checkbox"/> Other (specify):				
IV. Private Party Transcript Delivery and Cost				
For original transcript requests, please select from the following:				
Delivery Time:	<input type="checkbox"/> Ordinary	<input type="checkbox"/> Expedited	<input type="checkbox"/> Daily	<input type="checkbox"/> Same Day
Cost per page (electronic format)	\$2.50 per page	\$3.50 per page	\$4.50 per page	\$6.50 per page
Manner of Delivery:	<input type="checkbox"/> Electronic (PDF) format <input type="checkbox"/> Hard copy (add \$0.25 per page to page rates)			
Other (if offered, extra charges may apply): <input type="checkbox"/> Complex Litigation <input type="checkbox"/> Real Time Feed				
Special requests (if offered): <input type="checkbox"/> Minuscript/Condensed <input type="checkbox"/> ASCII <input type="checkbox"/> Include Word index <input type="checkbox"/> Other: _____				
Are you requesting a copy of an existing transcript? <input type="checkbox"/> Yes <input type="checkbox"/> No (For Photocopy rates, please see Rule 4008(D)).				

Requestor's Signature

Date

Docket Number: _____

Case Caption: _____

Name of Requestor: _____

Date of Request: _____

V. For court use only		<input type="checkbox"/> Hard copy requested (apply adjusted rate)		
Cost estimate				
<input type="checkbox"/> Ordinary, county paid	\$	x pages	= \$	
<input type="checkbox"/> Ordinary, private paid	\$	x pages	= \$	
<input type="checkbox"/> Expedited	\$	x pages	= \$	
<input type="checkbox"/> Daily	\$	x pages	= \$	
<input type="checkbox"/> Same Day	\$	x pages	= \$	
<input type="checkbox"/> Other: _____	\$	x pages	= \$	
<input type="checkbox"/> Photocopy	\$	x pages	= \$	
Additional charges: <input type="checkbox"/> Complex Litigation <input type="checkbox"/> Real Time Feed			\$	
<i>Are costs waived or reduced?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No			Subtotal	\$
			Less deposit	- \$
			Balance due	= \$
Transcript to be prepared by:		Date of deposit:	Date assigned:	Date due:
Date balance received:	Check/M.O. number:	Date transcript sent to requesting part(ies):		

**IN THE COURT OF COMMON PLEAS FOR ADAMS COUNTY, PENNSYLVANIA
CIVIL ACTION - LAW**

Name	PLAINTIFF	:	
		:	
	vs.	:	CASE NO. _____
		:	
		:	
Name	DEFENDANT 1	:	
		:	
	and (if applicable)	:	
		:	
		:	
Name	DEFENDANT 2	:	

PETITION TO PROCEED IN FORMA PAUPERIS and AFFIDAVIT

1. I am the plaintiff, defendant, or other in the above matter and because of my financial condition am unable to pay the fees and costs of prosecuting or defending this action or proceeding.

Check if only filing for consideration of economic hardship related to obtaining a transcript.

2. I am unable to obtain funds from anyone, including my family and associates, to pay the costs of litigation.

3. I represent that the information below relating to my ability to pay the fees and costs is true and correct:

a) My name and address are as follows:

Name: _____

Address: _____

b) Employment:

If you are presently employed, state the following:

Employer: _____

Address: _____

Gross salary or wages per month: _____

Type of work: _____

If you are presently unemployed, state the following:

Date of last employment: _____

Former employer: _____

Gross salary or wages per month: _____

Type of work: _____

c) Other income within the past twelve months (list amount and source):

Business or profession: _____

Other self-employment: _____

Interest: _____

Dividends: _____

Pension and annuities: _____

Social security benefits: _____

Support payments: _____

Disability payments: _____

Unemployment compensation and supplemental benefits: _____

Workers' compensation: _____

Public assistance: _____

Other income: _____

d) Other contributions to household support:

Name of wife/husband: _____

If your wife/husband is employed, state the following:

Employer: _____

Gross salary or wages per month: _____

Type of work: _____

Contributions from children: _____

Contributions from parents: _____

Other contributions: _____

e) Property owned:

Cash: _____

Checking account: _____

Savings account: _____

Certificates of deposit: _____

Real estate (including home): _____

Motor vehicle:

Make _____ Year _____

Cost _____ Amount owed _____

Stocks and bonds: _____

Other: _____

f) Debts and obligations:

My regular monthly living expenses are \$ _____ as follows:

Mortgage/rent: _____ Loans: _____

Electricity: _____ Heating: _____

Water/sewer: _____ Food: _____

Transportation: _____ Clothing: _____

Medical: _____ Other (specify): _____

g) Persons in my household dependent upon me for support (name, age, relationship):

	<u>Name</u>	<u>Age</u>	<u>Relationship</u>
Wife/husband:	_____	_____	_____
Children:	_____	_____	_____
	_____	_____	_____
Other Persons:	_____	_____	_____
	_____	_____	_____

4. I understand that I have a continuing obligation to inform the court of improvement in my financial circumstances which would permit me to pay the costs incurred herein.

5. I verify that the statements made in this affidavit are true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa.C.S. § 4904, relating to unsworn falsification to authorities.

WHEREFORE, I hereby request that the Court permit me to proceed in forma pauperis.

Date: _____ Signature: _____
Petitioner

VERIFICATION

I verify that I am the petitioner in the present action and that the facts and statements contained in the above Petition to Proceed In Forma Pauperis and Affidavit are true and correct to the best of my knowledge. I understand that any false statements would subject me to the penalties of 18 Pa.C.S. § 4904, relating to unsworn falsification to authorities.

Date: _____ Signature: _____
Petitioner