ATTORNEY OR PARTY WITHOUT ATTORNEY STATE BAR:	FOR COURT USE ONLY
NAME: FIRM NAME:	
STREET ADDRESS:	
CITY AND ZIP CODE: E-MAIL ADDRESS:	
ATTORNEY FOR (NAME):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN FRANCISCO	
STREET ADDRESS:	
MAILING ADDRESS: 400 MCALLISTER STREET, ROOM 103 CITY AND ZIP CODE: SAN FRANCISCO, CA 94102	
BRANCH NAME:	
PLAINTIFF/PETITIONER:	
PLAINTIFF/PETITIONER.	
DEFENDANT/RESPONDENT:	
REQUEST FOR COURT REPORTING	CASE NUMBER:
OR ELECTRONIC RECORDING	
Requesting Party:	
Date Fee Waiver Granted:	
Data of Dragondings.	
Date of Proceedings:	
Estimated length of trial – I estimate that the trial will take (check one):	
	al will take ( <i>Check One</i> ).
a. days (specify number)	
□ b. hours (specify if estimated trial is less than one day)	
Time (for hearings):	Pepartment:
Explanation of Procedure	
1. In view of the Jameson v. Desta decision, this request is for fee waiver recipients	
who desire a verbatim record of a trial court proceeding.	
2. Requesting Party must notify the court in writing by filing this form.	
3. This form must be received within the following time perimeters:	
a. Unlawful Detainer Matters – five (5) days before the trial court proceeding.	
b. Civil and Probate – two (2) weeks before the trial court proceeding.	
4. Failure to make the request within the required time perimeters listed above may	
result in the court's inability to honor your request in a timely matter, on the day	
of your hearing.	
<ol><li>Party must lodge a courtesy copy of the request per LRSF 2.7(b).</li></ol>	
Data	
Date:	
Printed Name S	ignature of Party or Attorney
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