Request for Transcript or Copy
Lehigh 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

Date(s) of Proceeding

Court Reporter Name (If available)

Case Type (check the appropriate box) ☐ Criminal ☐ Civil ☐ Family ☐ Orphans' Court ☐ Juvenile

Type of Proceeding: ☐ Suppression ☐ Argument ☐ Trial ☐ Plea ☐ Sentence

or "Other" (please specify):_____

PCRA ☐ Yes ☐ No

Is the Transcript Associated with an Appeal ☐ Yes ☐ No Children's Fast Track ☐ Yes ☐ No

Explain your need/reason for request:

II. Requestor Information

Name of Requestor/Attorney ID Number (if applicable): _____

I am ☐ Counsel for _____ ☐ Unrepresented ☐ Not a party to this action

Agency/Firm _____ Court Represented ☐ Yes ☐ No

Street Address:_____City:_____State:_____ Zip:_____

Email:_____ Phone:_____ Fax:_____

Does this request qualify for or include a petition for a reduced rate pursuant to Rule 4007(E)? ☐ Yes ☐ 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.

III. Transcript Items Requested

☐ Entire proceeding ☐ Jury Voir Dire ☐ Opening statements ☐ Closing arguments ☐ Jury Instructions

☐ Testimony (specify each witness):

☐ Pre/Post trial hearing (specify):

☐ Other (specify):

IV. Transcript Delivery and Cost

For original transcript requests, please select from the following:

Delivery Time:	☐ Ordinary	☐ Expedited	☐ Daily	☐ Same Day
Original Transcript	*+$2.50*	*+$3.50*	*+$4.50*	*+$6.50 (cost per page)*
Copy for Requester	*+$0.50*	*+$0.75*	*+$1.00*	*+$1.25 (cost per page)*

Note: Expedited, Daily and Same Day Requests are only available where provided by the judicial district or court reporter. Costs payable by requestor shall not exceed the rates prescribed in Pa.R.J.A 4008(A)(1) and (D)(1)

Requesting Governmental Agency Rate (if applicable): ☐ Yes ☐ No

Manner of Delivery: ☐ Electronic (PDF) format ☐ Hard copy (add $0.25 per page to page rates)

Other (if offered, extra charges may apply): ☐ Complex Litigation ☐ Real Time Feed

Special requests (if offered): ☐ Minuscript/Condensed ☐ ASCII ☐ Include Word index ☐ Other:

If Other, Please specify:_____

Are you requesting a copy of an existing transcript? ☐ Yes ☐ No (For Photocopy rates, please see Rule 4008(D)).

_____ _____

Requestor's Signature *Date*

Note: The first requestor of a transcript is obligated to pay for the original transcript, which is filed with the court, plus the copy rate if the requestor desires a personal copy (subject to any cost sharing with additional parties)/

IN THE COURT OF COMMON PLEAS OF LEHIGH COUNTY, PENNSYLVANIA
CRIMINAL DIVISION

Defendant:_____

RE: _____

Case No(s).:_____

Certificate of Service

I hereby certify that I am this day serving upon the persons and in the manner indicated below. The manner of service satisfies the requirements of Pa.R.Crim.P. 575.

Name:_____ Name:_____
(Print Name) (Signature)

Service by _____ as follows: Dated:_____
(Manner of Service)

TO: Clerk of Judicial Records – Criminal Division (Original Request for Transcript to be filed with Clerk)
455 W Hamilton Street, Room 122
Allentown, PA 18101
610-782-3077

Service by _____ as follows: Dated: _____
(Manner of Service)

TO: Presiding Judge
c/o Court Administration – Room 731
455 W Hamilton Street
Allentown, PA 18101
610-782-3014

Service by _____ as follows: Dated:_____
(Manner of Service)

TO: Court Transcription
c/o Court Administration – Room 731
455 W Hamilton Street
Allentown, PA 18101
610-782-3014

Certificate of Compliance

I certify that this filing complies with the provisions of the Public Access Policy of the Unified Judicial System of Pennsylvania: Case Records of the Appellate and Trial Courts that require filing confidential information and documents differently than non-confidential information and documents.

Submitted by: _____
Signature: _____
Name: _____
Attorney No. (If applicable):_____

(03/2022)