

UNITED STATES DISTRICT COURT FOR THE DISTRICT OF MONTANA

TRANSCRIPT ORDER FORM

Use one form per court reporter

****Please read instructions on next page****

1. ATTORNEY NAME Ryan Shaffer	2. PHONE NUMBER (406) 543-6929	3. EMAIL ADDRESS (for transcript delivery) ryan@mss-lawfirm.com
4. MAILING ADDRESS (including law firm name, if applicable) Meyer, Shaffer & Stepan, PLLP 430 Ryman Street Missoula, MT 59802	5. NAME & ROLE OF PARTY REPRESENTED: If not a party, use non-party request form. Tracy Caekaert and Camillia Mapley, Plaintiffs	
	6. CASE NAME Caekaert et. al v. Watchtower Bible and Tract Society of New York, Inc., et. al	
	7. DISTRICT COURT CASE NUMBER CV-20-52-BLG-SPW	
8. COURT REPORTER NAME: Use a separate form for each court reporter. Rich Mattson	9. COURT OF APPEALS CASE NUMBER (if applicable)	

10. THIS TRANSCRIPT ORDER IS FOR:

<input type="radio"/> APPEAL	<input checked="" type="radio"/> NON-APPEAL	<input type="checkbox"/> CJA	<input type="checkbox"/> IN FORMA PAUPERIS (court order attached)
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11. TRANSCRIPT REQUESTED: For each transcript requested, please specify the date of the proceeding, the proceeding or partial proceeding requested, the transcript format, and the delivery time. Financial arrangements must be made with the court reporter before transcript is prepared.

DATE	PROCEEDING If requesting a partial proceeding, specify portion (e.g., witness or time).	PAPER Full Size	PAPER A-Z Word Index	E-MAIL PDF	E-MAIL ASCII	E-MAIL A-Z Word Index	DELIVERY TIME
6/23/2021	Motion Hearing	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	30-day
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30-day
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30-day
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30-day
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30-day
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30-day
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30-day

12. ADDITIONAL COMMENTS, INSTRUCTIONS, QUESTIONS, ETC:

13. SIGNATURE /s/ Ryan R. Shaffer	14. DATE 7/24/2023
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