

REPORTER / FIRM: _____

CASE NAME: _____

DATE: _____ **JOB#:** _____ **WITNESS:** _____

EXHIBIT INSTRUCTIONS:

Attach Original Exhibits: Y N

If NOT Attaching Original Exhibits, Provide Return Name and Address

Deposition Exhibit Numbers (ex: 1-10): _____

Number of Printed Exhibit Copies: _____ (include additional copy if NOT attaching originals)

SPECIAL INSTRUCTIONS (RUSH, color, oversize, CD/USB duplication, flags, etc.):

***** **OFFICE USE ONLY BELOW** *****

EXHIBIT PRODUCTION

- ____ Exhibit Check
- ____ Entered in to RB/Tracking
- ____ Checked for Scanned TA
- ____ Scanned _____ Extracted _____ Uploaded
- ____ Priority Assigned
- ____ Counted, Copied, Printed
- ____ Transcript/Exhibit link (create PDF-LE)
- ____ RB Track Noted
- ____ Delivered to Video Production if DVT
- ____ Dropped on Exhibits Table

To Alliance (date &time): _____

From Alliance (date & time): _____

NOTES:

Exhibit Numbers (ex: 1-10)	
Total No of Exhibit pages:	
No. of Color pages:	
No. of B & W pages:	
No. of Dup. Originals:	
No. of Tabs:	
Bound Separately?	Y N
How many Original Covers/Binders:	
How many Copy Covers/Binders?	
Plastic Inserts:	
CD /DVD/USBs:	