

**TRANSCRIPT ORDER FORM**

DEFENDANT'S NAME \_\_\_\_\_ DATE OF TRANSCRIPT ORDER \_\_\_\_\_

INFORMATION/TICKET NUMBER(S) \_\_\_\_\_ DATE OF COURT PROCEEDING(S) \_\_\_\_\_

NAME OF ORDERING PARTY \_\_\_\_\_

ADDRESS \_\_\_\_\_

TELEPHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

**Note:** Transcript payments for an appeal application must be received in this office in accordance with Ontario Regulations 722/94 and 723/94.

 Appeal – Original + 2 Copies (Required)

 Personal/Other \_\_\_\_\_

 Fees for Court Transcripts O.Reg 145/22 – <https://www.ontario.ca/laws/regulation/r22145>

DIGITAL <input checked="" type="checkbox"/>	TYPE	PRODUCTION	SERVICE FEES
	Original	Per production guidelines: w/in 30 days	\$6.30/page OR \$25.00 whichever is greater
		Expedite: w/in 5 business days)	\$8.80/page OR \$25.00 whichever is greater
		Within 24 hours	\$11.75/page OR \$25.00 whichever is greater
	Certified Copy	Same day request	No charge
		Subsequent request(s)	\$25.00
PAPER <input checked="" type="checkbox"/>	TYPE	PRODUCTION	SERVICE FEES
	Original	Per production guidelines: w/in 30 days	\$7.10 OR \$25.00 whichever is greater
		Expedite: w/in 5 business days)	\$9.60 OR \$25.00 whichever is greater
		Within 24 hours	\$12.55 OR \$25.00 whichever is greater
	Certified Copy	Same day request	No charge
		Subsequent request(s)	\$0.80/page OR \$25.00 whichever is greater

**In the event I wish to cancel this order, I will do so by written communication to the court office and undertake to pay the fee for work completed.** \_\_\_\_\_

(initial here)

**\*\*\$50 Deposit or 50% of estimated service (required)\*\***

 Cheque/Money Order  
 Payable to 'Municipality of Chatham-Kent'

 Visa

 Mastercard

 Card Number: \_\_\_\_\_  
 Card Expiry: \_\_\_\_\_  
 Cardholder Signature: \_\_\_\_\_

Please send by regular mail, by email at [ckpoc@chatham-kent.ca](mailto:ckpoc@chatham-kent.ca) or fax to 519-352-7979.