## SUPREME COURT AUTHORIZATION AND VOUCHER FOR PAYMENT OF TRANSCRIPT

1. CIR/DIST/ DIV. CODE	2. PERSON	REPRESENTED			3. VOUCHER NUMBER			
4.				5. APPEALS DKT./DEF	. NUMBER	6. OTHER DK	Γ. NUMBER	
7. IN CASE/MATTER OF (Case Name	, [	8. PAYMENT CATEGORY       9. TYPE PERSON REPRESENTED       10. REPRESE         Direct Appeal       Adult Appellant       Appellee         Other       Juvenile       Other				NTATION TYPE		
11. OFFENSE(S) CHARGED (Cite V.	I. Code, Title	& Section) If more than o	ne offense, list (up to	five) major offenses charge	ed, according to seve	rity of offense.		
REQUEST AND AUTHORIZATION FOR TRANSCRIPT								
12 PROCEEDING IN WHICH TRAN	SCRIPTS IS	TO BE USED (Describe	briefly)					
13. PROCEEDING TO BE TRANSC argument, defense argument, pr	RIBED (Des osecution reb	cribe specifically), Note: Touttal, voir dire or jury instr	The trial transcripts a ructions, unless speci	re not to include prosecution fically authorized by the Country of the Country o	on opening statemer urt (see Item 14).	nt, defense openir	g statement, prosecution	
14. SPECIAL AUTHORIZATIONS							JUDGE'S INITIALS	
A. Apportioned % of transcript with (Give case name and defendant)								
B. 🗆 Expedited 🔹 Daily 👘 Hourly Transcript 🔅 Realtime Unedited Transcript								
C.  Prosecution Opening Statement Prosecution Argument Prosecution Rebuttal								
Defense Opening Statement         Defense Argument         Voir Dire         Jury Instructions           D. In this multi-defendant case, commercial duplication Of transcripts will impede the delivery Of accelerated transcript services to								
persons proceeding under the Criminal Justice Act. 15. ATTORNEY'S STATEMENT 16. COURT ORDER								
As the attorney for the person represented who is managed above, I hereby affirm that the transcript requested is necessary for adequate representation. 1, therefore, request authorization to obtain the transcript services at the expense of the Virgin Islands pursuant to the applicable laws and Court Rules.								
Signature of Attorney Date Signature of Presiding Judge or By Orde						lge or By Order of	the Court	
Printed Name Telephone Number:					Date of Order Nunc Pro Tunc Date			
Panel Attorney Retained Pro-Se Legal Organization								
CLAIM FOR SERVICES -								
17. COURT REPORTER/TRANSCRIBER STATUS     18 PAYEE'S     MAILING ADDRESS       Official     Contract     Transcriber     Other								
19. SOCIAL SECURITY NUMBER	Telephone Number:							
20. TRANSCRIPT			NO. OF PAGES	RATE PER PAGE	SUB-TOTAL	LESS AMOUN		
Original		PAGE NUMBERS				AFFORTION	.0	
Сору								
Expense (Itemize)				1 1		1		
	TOTAL AMOUNT CLAIMED:							
21. CLAIMANT'S CERTIFICATION I hereby certify that the above clai for these services.			ct, and that I have not	t sought or received paymer	t (compensation or a	<i>nything o</i> f value) f	om any other source	
Signature of Claimant/Payee Date								
22. CERTIFICATION OF ATTORNE	Y OR CLER			ERTIFICATION red and that the transcript	was received.			
Signature of Attorney or Clerk Date								
APPROVED FOR PAYMENT - COURT USE ONLY								
23. APPROVED FOR PAYMENT 24. AMOUNT APPROVED								
Signature of Judge or Clerk of Court Date								