

BTXN 119 (rev. 03/19)

AUDIO / TRANSCRIPT ORDER

1. ORDER REQUEST: <input type="checkbox"/> DUPLICATE OF AUDIO <input type="checkbox"/> CD Recordings Only		<input checked="" type="checkbox"/> TRANSCRIPT		2. DATE OF ORDER: 9/29/2025		FOR COURT USE ONLY DUE DATE:	
3. NAME: Melanie Holmes				4. PHONE NUMBER: 972-755-7105		5. EMAIL ADDRESS: mholmes@haywardfirm.com	
6. MAILING ADDRESS: 10501 N. Central Expy., Ste. 106				7. CITY: Dallas		8. STATE: TX	9. ZIP CODE: 75231
10. CASE NUMBER: 25-03055		11. CASE NAME: Highland v. Daugherty		12. JUDICIAL OFFICIAL: Jernigan		13. DATE OF PROCEEDING: FROM: 09 / 04 / 2025	
14. ORDER FOR:		<input type="checkbox"/> APPEAL		<input type="checkbox"/> BANKRUPTCY		<input checked="" type="checkbox"/> OTHER Adv. Proceeding	
15. ORDER:							
ORDINARY 7 DAY EXPEDITED DAILY HOURLY							
A.		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
		<input checked="" type="checkbox"/>					
14 DAY EXPEDITED 3 DAY EXPEDITED							
<input type="checkbox"/>				<input type="checkbox"/>			
16. AUDIO/TRANSCRIPT REQUESTED Specify portion(s) and date(s) of proceeding(s):							
PORTION(S)				PORTION(S)			
<input checked="" type="checkbox"/> ENTIRE HEARING				<input type="checkbox"/> TESTIMONY (SPECIFY WITNESS)			
<input type="checkbox"/> OPENING STATEMENT (PLAINTIFF)							
<input type="checkbox"/> OPENING STATEMENT (DEFENDANT)							
<input type="checkbox"/> CLOSING ARGUMENT (PLAINTIFF)				<input type="checkbox"/> VOIR DIRE			
<input type="checkbox"/> CLOSING ARGUMENT (DEFENDANT)				<input type="checkbox"/> OTHER (SPECIFY)			
<input type="checkbox"/> COURT RULING ONLY							
CERTIFICATION By signing 17. & 18, I certify that I will pay all charges (deposit plus additional as specified by the assigned transcriber).				17. SIGNATURE: /s/ Melanie Holmes			
				18. DATE: 9/29/2025			
COURT USE ONLY							
A. PROCESSED BY:				B. TRANSCRIPT TO BE PREPARED BY:			
PHONE NUMBER:				ADDRESS:			
EMAIL ADDRESS:				TELEPHONE: EMAIL ADDRESS:			
C. PARTY RECEIVED AUDIO:		DATE:		BY:		\$31 FEE PAID:	

DISTRIBUTION:

COURT COPY

ORDER RECEIPT

ORDER COPY



193405425093000000000001