

**TRANSCRIPT INVOICE FOR
NON-BILLABLE TRANSCRIPTS**

JD-ES-350 Rev. 1-22
P.A. 21-104 § 42

STATE OF CONNECTICUT
SUPERIOR COURT
www.jud.ct.gov



Instructions

- Complete this form for all non-billable transcripts.
- **Type or print** when filling out the form.
- Fill in the number of pages or copies.
- In cases with multiple docket numbers, please choose one docket number to represent the entire transcript.
- Only one case per invoice.
- In large cases with several volumes or dates, you may choose one date to represent the entire transcript or submit individual invoices for each hearing date.
- Each employee must certify that the information is accurate for the work performed by that employee.
- Send the completed form to Court Transcript Services.

Employee name

Transcripts ordered by (Name and title)

Case name

Docket number

Hearing held before:

Judicial District

Hearing date

Date ordered

Date delivered

Number of Pages: _____

☐ Regular

☐ Fee waiver granted

☐ Standard Expedited

☐ Felony Sentencing Transcript

☐ Next Day Expedited

☐ Sex Offender Registry

☐ Next Morning Expedited

☐ Original

☐ Copy

Employee certification

Date signed