

**STATE PUBLIC DEFENDER**  
**REQUEST FOR TRANSCRIPTION OF RECORDINGS**

Transcription Needed:	<input type="checkbox"/> Audio	<input type="checkbox"/> Video	<input type="checkbox"/> Other: _____
Date Needed: _____			

Case Caption: \_\_\_\_\_

**Court Reporter:**

Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_

Court Case #: \_\_\_\_\_

SPD File #: \_\_\_\_\_

**Send transcripts to:**

Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_

<b>Negotiated Rates:</b> \$_____ per page \$_____ per hour \$_____ mailing/delivery Notes: _____	Attorney Type <input type="checkbox"/> SPD Staff <input type="checkbox"/> Private Bar
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**I request that you prepare and transmit transcription of the following recording.**

\_\_\_\_\_  
\_\_\_\_\_

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Effective April 1, 2024 transcript invoices** for pending circuit court cases and appellate cases, where the requesting counsel is either an SPD staff attorney or SPD private bar, must be submitted electronically. An electronic copy of this request will be a required attachment. Do not mail hard copies.

- **State-employed court reporters** must submit invoices electronically at <http://link.wisprd.gov/transcriptsub>.
- **Retired and Freelance court reports** must email invoices to [SPDFiscalUnit@opd.wi.gov](mailto:SPDFiscalUnit@opd.wi.gov).

I certify that the attached invoice requests payment for the transcription requested at the agreed upon rates and no others.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
*Court Reporter or other transcriber*

**A digital copy of this request form must accompany your invoice.**