

**GAMING DISPUTES COURT OF APPEALS**  
*13 Crow Hill Road, Uncasville, CT 06382*  
*Clerk's Office (860) 862-6155*

**NOTICE OF TRANSCRIPT ORDER**

**TO: GAMING DISPUTES COURT**  
**13 Crow Hill Road**  
**Uncasville, CT 06382**

**TRANSCRIPT ORDER**

NAME OF CASE IN TRIAL COURT:

DOCKET NUMBER OF CASE IN TRIAL COURT:

HEARING DATE(S):

TRIAL COURT JUDGE:

PARTS OF PROCEEDING FOR WHICH TRANSCRIPT IS ORDERED:

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ALL PROCEEDINGS ON THE DATES LISTED ABOVE

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THE FOLLOWING PARTS OF THE PROCEEDINGS ON THE DATES LISTED ABOVE (*PROVIDE DETAILED STATEMENT*)

EXPEDITED DELIVERY REQUIRED? YES

NO

I HEREBY CERTIFY THAT SATISFACTORY ARRANGEMENTS FOR PAYMENT OF TRANSCRIPT COSTS HAVE BEEN MADE WITH THE REPORTER/TRANSCRIPTIONIST

(SIGNATURE)

PRINTED OR TYPED NAME OF TRANSCRIPTIONIST WITH  
WHICH ARRANGMENTMENTS HAVE BEEN MADE

(PRINTED OR TYPED NAME)

(FIRM)

(LAW FIRM)

(STREET ADDRESS)

(ADDRESS)

(CITY/STATE/ZIP CODE)

(TELEPHONE NUMBER)

(TELEPHONE NUMBER)

CERTIFICATION OF SERVICE

I HEREBY CERTIFY THAT A COPY HEREOF WAS SERVED BY U.S. MAIL, POSTAGE PREPAID IN ACCORDANCE WITH RULE 13A ON: \_\_\_\_\_,  
ON THE FOLLOWING:

\_\_\_\_\_  
APPELLANT OR COUNSEL SIGNATURE

**NOTE: AT THE TIME OF ORDERING, A PARTY MUST CERTIFY THAT SATISFACTORY ARRANGEMENTS WITH  
THE REPORT/TRANSCRIPTIONIST FOR PAYMENT OF THE COSTS OF THE TRANSCRIPT HAVE BEEN MADE.**