

# VIDEO ORDER FORM *(for up to 11 attorneys)*

Date: \_\_\_\_\_ Reporter: \_\_\_\_\_ Job No.: \_\_\_\_\_

Style: \_\_\_\_\_ Videographer: \_\_\_\_\_

Witness1: \_\_\_\_\_ Witness2: \_\_\_\_\_ Witness3: \_\_\_\_\_

**\*\*\* PLEASE LIST AN ATTORNEY FROM EACH FIRM, INCLUDING NON-ORDERING ONES! \*\*\***

Name: _____	Ordering Attorney	<input type="checkbox"/> DVD <input type="checkbox"/> MPEG-1 <input type="checkbox"/> Sync: Sanction / Trial Director / Summation / Vistionary <input type="checkbox"/> Call my paralegal/Secretary: _____ at _____
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Name: _____	Copy Attorney	<input type="checkbox"/> No Copy <input type="checkbox"/> DVD <input type="checkbox"/> MPEG-1 <input type="checkbox"/> Sync: Sanction / Trial Director / Summation / Vistionary <input type="checkbox"/> Call my paralegal/Secretary: _____ at _____
Signature: _____		

Name: _____	Copy Attorney	<input type="checkbox"/> No Copy <input type="checkbox"/> DVD <input type="checkbox"/> MPEG-1 <input type="checkbox"/> Sync: Sanction / Trial Director / Summation / Vistionary <input type="checkbox"/> Call my paralegal/Secretary: _____ at _____
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Signature: _____		

**PLEASE PROVIDE CONTACT INFO FOR ALL ATTORNEYS ON THIS ORDER FORM!!**

*(Staple business cards to another page, etc)*