UNITED STATES COURT OF APPEALS
FOR THE SECOND CIRCUIT

CIVIL APPEAL TRANSCRIPT INFORMATION (FORM D-P)
FOR PRO SE APPELLANTS

A PRO SE APPELLANT MUST FILE THE ORIGINAL OF THIS FORM WITH THE CLERK OF THE SECOND CIRCUIT IN ALL CIVIL APPEALS WITHIN 14 CALENDAR DAYS AFTER FILING A NOTICE OF APPEAL.

THIS SECTION MUST BE COMPLETED BY APPELLANT		
CASE TITLE	**DISTRICT**	**DOCKET NUMBER**
	JUDGE	**APPELLANT**
	COURT REPORTER	**PRO SE APPELLANT**

Check the applicable provision: ☐ **I am ordering a transcript.** ☐ **I am not ordering a transcript.** **Reason for not ordering a transcript:** ☐ **Copy is already available** ☐ **No transcribed proceedings** ☐ **Other (Specify in the space below):**	**PROVIDE A DESCRIPTION, INCLUDING DATES, OF THE PROCEEDINGS FOR WHICH A TRANSCRIPT IS REQUIRED (*i.e.*, oral argument, order from the bench, etc.)** **METHOD OF PAYMENT** ☐ **Funds** ☐ **CJA Voucher (CJA 21)**
INSTRUCTIONS TO COURT REPORTER: ☐ **PREPARE TRANSCRIPT OF PRE-TRIAL PROCEEDINGS** ☐ **PREPARE TRANSCRIPT OF TRIAL** ☐ **PREPARE TRANSCRIPT OF OTHER POST- TRIAL PROCEEDINGS** ☐ **OTHER (Specify in the space below):**	**DELIVER TRANSCRIPT TO: (APPELLANT'S NAME, ADDRESS, TELEPHONE)**

If a transcript is ordered, I certify that I have sent this form to the court reporter and have made satisfactory arrangements with the court reporter for payment of the cost of the transcript. *See* FRAP 10(b). I understand that unless I have already ordered the transcript, I shall order its preparation at the time required by FRAP and the Local Rules.

APPELLANT'S SIGNATURE	DATE

COURT REPORTER ACKNOWLEDGMENT: This section is to be completed by the court reporter. Return one copy to the Clerk of the Second Circuit.

DATE ORDER RECEIVED	ESTIMATED COMPLETION DATE	ESTIMATED NUMBER OF PAGES
SIGNATURE OF COURT REPORTER		DATE

Revised June, 2017