

Attachment B – Scheduling Terms and Conditions

Court Reporter					
Name			E-Mail		
Vendor Number		Home Base Address		Phone Number	
Schedule					
Case Name State v. _____		Case Number		Courthouse Address	
Judge		Clerk		Clerk E-Mail _____@utcourts.gov	
Hearing Dates		AM Start	PM Start	Hearing Dates	AM Start
Fee and Expenses					
Start Date (Including Travel Days)			End Date (Including Travel Days)		
$\$100/\text{half day (Appearance Fee)} \times \text{_____ (number of } \frac{1}{2} \text{ days)} =$				Total Fee: \$ _____	
Estimated Expenses					
Describe					Amount
Taxi					\$ _____
Rental Vehicle					\$ _____
Private Vehicle					$\$54 \times \text{_____ miles} =$ \$ _____
Breakfast					$\$10.00/\text{day} \times \text{_____ days} =$ \$ _____
Lunch					$\$14.00/\text{day} \times \text{_____ days} =$ \$ _____
Dinner					$\$17.00/\text{day} \times \text{_____ days} =$ \$ _____
					\$ _____
					\$ _____
					\$ _____
					\$ _____

Date

Court Reporter

Date

Trial Court Executive

Distribution: Court Reporter, Trial Court Executive, District Court Administrator, AOC Finance