NAME, ADDRESS, AND TELEPHONE NUMBER OF ATTORNEY OR PARTY WITHOUT ATTORNEY:	STATE BAR NUMBER	Reserved for Ci	lerk's File Stamp
ATTORNEY FOR (Name):			
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES			
COURTHOUSE ADDRESS:			
PLAINTIFF:			
DEFENDANT:			
JUDICIAL OFFICER:		TRIAL/HEARING/ DATE	DEPT.
REQUEST FOR COURT REPORTING SERVICES BY A PARTY WITH FEE WAIVER		CASE NUMBER:	
			. 0.115
I,, a person	who has received a fee v	vaiver pursuant	to California
lles of Court, rule 3.55(7), on (date waiver granted), request an		uest an	
official court reporter to record a verbatim record of the	proceedings at the trial	or hearing set f	orth above.
A copy of the fee waiver is attached.			
Date: Signature:			

This form must be timely filed at least **10 calendar days** before the date set for the trial or hearing. Requests submitted without the fee waiver or not timely filed at least 10 calendar days before the date set for the trial or hearing will not be honored. The clerk will notify the party as soon as possible if no official court reporter will be available. Given the general unavailability of official court reporters, final notice of the availability of a court reporter may not be known until the day of the trial or hearing.