

**SCCID**

SOUTH CAROLINA COMMISSION ON INDIGENT DEFENSE

**COURT REPORTERS' REQUEST FOR PAYMENT FOR TRANSCRIPT IN CRIMINAL INDIGENCY CASE**

**TO: SC COMMISSION ON INDIGENT DEFENSE**  
 PO BOX 11589  
 COLUMBIA, SC 29211-1589

SIGNATURE OF APPROVING OFFICIAL AT APPELLATE DEFENSE:

FORWARD THIS SIGNED AND COMPLETED FORM ALONG WITH THE REQUESTED TRANSCRIPT TO THE SC COMMISSION ON INDIGENT DEFENSE, APPELLATE DIVISION. THE SC COMMISSION ON INDIGENT DEFENSE, APPELLATE DIVISION WILL APPROVE THIS REQUEST FOR PAYMENT AND FORWARD THE REQUEST TO THE S.C. COMMISSION ON INDIGENT DEFENSE FOR PAYMENT. ALL QUESTIONS REGARDING PAYMENT SHOULD BE MADE TO THE S.C. COMMISSION ON INDIGENT DEFENSE, P.O. BOX 11433, COLUMBIA, SC 29211-1433, PHONE: 803.734.1343, e-mail: executive@sccid.sc.gov.

CASE NAME:

CRIMINAL CASE (INDICTMENT) NO.(s):

DATE TRANSCRIPT REQUESTED BY APPELLATE DEFENSE:

DATE TRANSCRIPT PROVIDED TO APPELLATE DEFENSE:

**PLEASE NOTE THAT THE DEFENSE OF INDIGENTS FUND WILL REIMBURSE THE REQUESTING PARTY FOR EITHER THE ORIGINAL TRANSCRIPT OR ONE COPY, BUT NOT FOR BOTH.**

RULE 607 (H)(1), SCACR, PROVIDES THAT IN ALL CRIMINAL INDIGENCY CASES, INCLUDING POST-CONVICTION AND SEXUAL VIOLENT PREDATOR PROCEEDINGS, THE FEE FOR THE ORIGINAL TRANSCRIPT IS THREE DOLLARS AND TWENTY-FIVE CENTS (\$3.25) PER PAGE AND THE FEE FOR A COPY OF THE TRANSCRIPT IS SEVENTY-FIVE CENTS (.75 ) PER PAGE.

PURSUANT TO THE REQUEST OF THE S.C. COMMISSION ON INDIGENT DEFENSE, APPELLATE DIVISION, THE TRANSCRIPT IN THE ABOVE MATTER WAS PROVIDED TO THAT OFFICE. REIMBURSEMENT IN THE FOLLOWING AMOUNT IS HEREBY REQUESTED:

ORIGINAL TRANSCRIPT OF \_\_\_\_\_ PAGES: \$ \_\_\_\_\_

COPY OF ORIGINAL TRANSCRIPT OF \_\_\_\_\_ PAGES: \$ \_\_\_\_\_

OTHER (Please specify): \_\_\_\_\_ : \$ \_\_\_\_\_

**TOTAL PAYMENT REQUESTED:**

\$

PRINTED OR TYPED NAME OF COURT REPORTER:

SIGNATURE OF COURT REPORTER:

ADDRESS:

A SC VENDOR IDENTIFICATION NUMBER, WHICH IS ISSUED BY THE SC COMPTROLLER GENERAL'S OFFICE, AND IS NEITHER A FEDERAL EMPLOYER IDENTIFICATION NUMBER NOR AN INDIVIDUAL SOCIAL SECURITY NUMBER, IS REQUIRED FOR PAYMENT PROCESSING. (SCCID DOES NOT REQUIRE A FEI OR SSN)

IF YOU DO NOT HAVE A SC VENDOR ID NUMBER, APPLY HERE:

<https://webprod.cio.sc.gov/SCVendorWeb/mainNewFrame.do>

PHONE NUMBER:

NOTE: ONCE YOU APPLY FOR A SC VENDOR ID, THE SC COMPTROLLER GENERAL'S OFFICE REQUIRES A 72-HOUR WAITING PERIOD TO VERIFY YOUR ID NUMBER. ADDITIONAL LINKS AND INFORMATION MAY BE FOUND AT:

<http://sccid.sc.gov/register.cfm>

EMAIL ADDRESS:

VENDOR ID NUMBER:

SCCID USE ONLY:

SCCID FILE NUMBER:

DOCUMENT NUMBER: