Name	
Address	
Address	
City, State, Zip	
7,1	
Phone	
Email	
I am the [] Attorney for the State of Utah [] Attorney for the Defendant	
In the District C	ourt of Utah
Judicial District _	County
Court Address	,
State of Utah	Request to Schedule a Court
State of Staff	Reporter
V.	(Capital Case)
Defendant	Case Number
Bolondant	Case Hamber
	Judge
I request that the court schedule a certified co	•
verbatim record of court hearings and other pr	oceedings ordered by the court.
Signature I	
Date Printed Nam	e
This request is:	
[] Approved [] Not approved	
Judge's signature may instead appear at the top of the	first page of this document.
•	
Signature ▶	
Date	
Judge	9

Certificate of Service

I certify that I filed with the court and served a copy of this Request to Schedule a Court Reporter (Capital Case) on the following people.

Person's Name	Method of Service	Served at this Address	Served on this Date
	[] Mail		
	[] Hand Delivery [] E-filed		
	[] Email (Person agreed to service by email.)		
	[] Left at business (With person in charge		
	or in receptacle for deliveries.)		
	[] Left at home (With person of suitable age and discretion residing there.)		
	[] Mail		
	[] Hand Delivery		
	[] E-filed		
	[] Email (Person agreed to service by email.)		
	[] Left at business (With person in charge or in receptacle for deliveries.)		
	[] Left at home (With person of suitable		
	age and discretion residing there.)		
	[] Mail		
	[] Hand Delivery		
	[] E-filed		
	[] Email (Person agreed to service by email.)		
	[] Left at business (With person in charge or in receptacle for deliveries.)		
	[] Left at home (With person of suitable		
	age and discretion residing there.)		

	Signature ►
Date	
	Printed Name