

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	Phone
Hearing Dates	AM Start	PM Start	Hearing Dates	AM Start	PM Start
Fee and Expenses					
Start Date (Including Travel Days)			End Date (Including Travel Days)		
$\$75/\text{half day (Appearance Fee)} \times \text{ ______ (number of } \frac{1}{2} \text{ days)} =$				Total Fee: \$ _____	
Estimated Expenses					
Describe					Amount
Taxi					\$
Rental Vehicle					\$
Private Vehicle					$\$.38 \times \text{ ______ miles} =$ \$
Breakfast					$\$9.00/\text{day} \times \text{ ______ days} =$ \$
Lunch					$\$11.00/\text{day} \times \text{ ______ days} =$ \$
Dinner					$\$16.00/\text{day} \times \text{ ______ days} =$ \$
					\$
					\$
					\$
					\$

Date Court Reporter Date Trial Court Executive

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