

SERVICES AND CHARGES FOR TRANSCRIPTION

NAME:	
BUSINESS NAME:	
ADDRESS	
TELEPHONE: Voice:	Fax:

Bond: I am not bonded. I am bonded in the amount of \$_____

Transcription and Other Services Described:

Charges:

Service	Turn-Around Time			
	1 Day	3 Days	7 Days	30 Days
Transcript of Videotape	\$ /page	\$ /page	\$ /page	\$ /page
	\$ /hour	\$ /hour	\$ /hour	\$ /hour
Indigent Rate	\$ /page	\$ /page	\$ /page	\$ /page
Transcript of Audiotape	\$ /page	\$ /page	\$ /page	\$ /page
	\$ /hour	\$ /hour	\$ /hour	\$ /hour
Transcript of Digital Recording	\$ /page	\$ /page	\$ /page	\$ /page
	\$ /hour	\$ /hour	\$ /hour	\$ /hour
Other:	\$ /page	\$ /page	\$ /page	\$ /page
	\$ /hour	\$ /hour	\$ /hour	\$ /hour

Additional Information:

Submitted by:

SIGNATURE: _____ DATE: _____