UNITED STATES DISTRICT COURT
CENTRAL DISTRICT OF CALIFORNIA

TRANSCRIPT ORDER FORM

Please use one form per court reporter per case, and contact court reporter directly immediately after e-filing form. ***(Additional instructions on next page.)***

COURT USE ONLY
DUE DATE:

1a. Contact Person for this Order	Janelle Cotton	2a. Contact Phone Number	415-362-6666	3a. Contact E-mail Address	jcotton@durietangri.com
1b. Attorney Name (if different)	Adam Brausa	2b. Attorney Phone Number	415-362-6666	3b. Attorney E-mail Address	abrausa@durietangri.com

4. MAILING ADDRESS (INCLUDE LAW FIRM NAME, IF APPLICABLE)

Durie Tangri LLP
217 Leidesdorff Street
San Francisco, CA 94111

5. Name & Role of Party Represented: Defendants Genenetech, Inc. and City of Hope

6. Case Name: Sanofi-Aventis U.S., et al. v. Genentech, Inc. and City of Hope

7a. District Court Case Number: 2:15-cv-05685

7b. Appeals Court Case Number:

8. INDICATE WHETHER PROCEEDING WAS (*choose only one per form*):

☒ DIGITALLY RECORDED ☐ TRANSCRIBED BY A COURT REPORTER; NAME OF COURT REPORTER: CS 3/30/2016

9. THIS TRANSCRIPT ORDER IS FOR: ☐ Appeal ☐ Non-Appeal ☐ Criminal ☒ Civil ☐ CJA ☐ USA ☐ FPD ☐ In forma pauperis (Court order for transcripts must be attached)

10. TRANSCRIPT(S) REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested, format(s), and delivery type):

You MUST check the docket to see if the transcript has already been filed, and if so, provide the "Release of Transcript Restriction" date in column c, below.

a. HEARING(S) OR PORTIONS OF HEARINGS (*Attach additional pages if necessary. If sealed, a court order releasing transcript to the ordering party must be attached here or emailed to transcripts_cacd@cacd.uscourts.gov.*)			b. SELECT FORMAT(S) (*CM/ECF access included with purchase of transcript.*)						c. RELEASE OF TRANS. RESTRICTION DATE	d. DELIVERY TYPE
DATE	JUDGE (name)	PROCEEDING TYPE / PORTION If requesting less than full hearing, specify portion (e.g., witness or time). CJA orders: indicate if openings, closings, voir dire, or instructions requested.	PDF (email)	TEXT / ASCII (email)	PAPER	CONDEN-SED (email)	CM/ECF ACCESS (web)	WORD INDEXING	(*Provide release date of efiled transcript, or check to certify none yet on file.*)	(*One per line, but check with court reporter before choosing any type but "ordinary."*)
03/30/2016	Rosenberg		◉	◉	○	○	○	○	○	DAILY (Next day)
			○	○	○	○	○	○	○	
			○	○	○	○	○	○	○	
			○	○	○	○	○	○	○	
			○	○	○	○	○	○	○	

11. ADDITIONAL COMMENTS, INSTRUCTIONS, QUESTIONS, ETC. *CJA Orders: Explain necessity of non-appeal orders & special authorizations to be requested in Section 14 of CJA-24 Voucher (attach add'l pages if needed).*

12. ORDER & CERTIFICATION. By signing below, I certify that I will pay all charges (deposit plus additional), or, where applicable, promptly take all necessary steps to secure payment under the Criminal Justice Act.

Date: March 31, 2016 Signature: /s/ Adam R. Brausa