



## VIDEOGRAPHER WORKSHEET

Date of Deposition	
Scheduled Start Time	
Name of Videographer/Company	
Special Requests	<input type="checkbox"/> Zoom on Location <input type="checkbox"/> Monitor Setup <input type="checkbox"/> Laptop Setup <input type="checkbox"/> Exhibits Shown on Location on Zoom <input type="checkbox"/> Remote Zoom <input type="checkbox"/> Remote Zoom Managing Exhibits <input type="checkbox"/> PiP in Post <input type="checkbox"/> OTHER: _____
Rush Order Info: <small>(Please Highlight info if Rush Production is requested)</small>	

Mileage <i>(If billable)</i>	
Travel Time <i>(If billable)</i>	
Parking	
Lunch Break <i>(Length of Time)</i>	

Reporter Name & Email	
Case Name	

### ATTORNEYS

TAKING ATTORNEY	Name	Represents: <small>(highlight or circle)</small>
Address		Copy Order: <input type="checkbox"/> Sealed Original Only <input type="checkbox"/> MP4 <input type="checkbox"/> Sync

ATTORNEY	Name	Represents: <small>(highlight or circle)</small>
Address		Copy Order: <input type="checkbox"/> MP4 <input type="checkbox"/> Sync

ATTORNEY	Name	Represents: (highlight or circle)
Address		Copy Order: <input type="checkbox"/> MP4 <input type="checkbox"/> Sync

ATTORNEY	Name	Represents: (highlight or circle)
Address		Copy Order: <input type="checkbox"/> MP4 <input type="checkbox"/> Sync

*(If more attorneys are present, please add in notes with copy order)*

## DEPONENTS

Name:	Start Time:	End Time:	Runtimes:
Name:	Start Time:	End Time:	Runtimes:
Name:	Start Time:	End Time:	Runtimes:
Name:	Start Time:	End Time:	Runtimes:
Name:	Start Time:	End Time:	Runtimes:
Name:	Start Time:	End Time:	Runtimes:
Comments or Notes:			

**Phone: 770-554-1633**

**Send Videos to: [admin@legaltechservice.com](mailto:admin@legaltechservice.com)**