

From: [samuel brown](#)
To: [Court Of Appeals Filings](#)
Subject: Fwd: Transcript
Date: Tuesday, March 25, 2025 4:40:51 AM

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----- Forwarded message -----

From: Coath, Cordelia <ccoath@sccourts.org>
Date: Mon, Mar 24, 2025 at 4:28 PM
Subject: RE: Transcript
To: samuel brown <samuelcarlosbrown1984@gmail.com>
CC: Transcripts <transcripts@sccourts.org>

Good afternoon.

Your transcript request has been received by our office. You should receive communication from a transcriptionist within 5 days with an estimated cost for production. Going forward we have a new way of ordering transcripts. Pursuant to Rule 207 and 607 of the South Carolina Appellate Court, on January 2, 2025, SC Courts launched the new transcript request portal. In order to obtain a transcript, please submit your request through the Transcript Portal request link found at the following link:

<https://www.sccourts.org/courts/court-officials/court-reporters/obtain-a-transcript/>

Please let me know if you have any further questions.

Thank you.

Court Reporter Section

From: samuel brown <samuelcarlosbrown1984@gmail.com>
Sent: Monday, March 24, 2025 1:34 PM
To: Coath, Cordelia <ccoath@sccourts.org>
Subject: Transcript

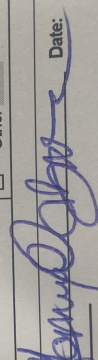
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SOUTH CAROLINA JUDICIAL BRANCH

TRANSCRIPT REQUEST FORM

Pursuant to Rule 207 and 607 of the South Carolina Appellate Court Rules, the transcribed paper copy is the official record of court proceedings. You may request a transcript by completing this form and emailing it to the Court Reporter Transcriptionist and to South Carolina Court Administration at transcripts@scacs.org or DCRP were used to capture the record, please indicate below and send the form to transcripts@scacs.org.

| | |
|---|---|
| Requestor's Information | |
| Full Name Samuel | Phone Number 803 543 0712 |
| Law Firm/Agency | Mailing Address 335 Horse neck rd, Swansea Sc 29180 |
| Email Address Samuelcartosbrown1984@gmail.com | |
| Is the requestor a party in the case? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If no, does the requestor represent a party? <input type="checkbox"/> Yes <input type="checkbox"/> No. If yes, name of party appellant | |
| Transcript Information | |
| Docket Number 2023sp00-6441 | Full Case Caption (i.e. State v. John Doe or John Smith v. Jane Smith) Samuel Brown v. Tommy Truesdale & Melody Truesdale |
| Date(s) of Proceeding | County Richland |
| Presiding Judge Daniel Coble | Appeal pending <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Opposing Counsel(s) (name and email address) | Special Circumstances is the hearing to be transcribed one of the following: <input type="checkbox"/> Termination of parental rights <input type="checkbox"/> Adoption <input type="checkbox"/> Any actions involving child custody/visitation. |
| Court Reporter(s) | Delivery Timeframe (check Rule 607 for current page rates) <input type="checkbox"/> Quote <input type="checkbox"/> Rough Draft <input type="checkbox"/> Overnight delivery <input type="checkbox"/> Daily delivery <input type="checkbox"/> Expedited delivery (7 days) Due on before: <input type="checkbox"/> Regular delivery (60 days) |
| Portion of proceeding to be transcribed <input checked="" type="checkbox"/> Entire hearing <input type="checkbox"/> Voir dire by juror <input type="checkbox"/> Jury selection <input type="checkbox"/> Plaintiff's opening statement <input type="checkbox"/> Defendant's opening statement <input type="checkbox"/> Plaintiff's closing arguments <input type="checkbox"/> Defendant's closing arguments <input type="checkbox"/> Entire direct examination <input type="checkbox"/> Entire cross examination <input type="checkbox"/> Entire redirect <input type="checkbox"/> Examination of witness (W) by attorney (A) | Delivery Method (additional fees may apply) <input checked="" type="checkbox"/> PDF / Email <input type="checkbox"/> Hard Copy/Priority Mail (\$50 + shipping) <input type="checkbox"/> PDF & Hard Copy/Priority Mail (\$50 + shipping) |
| W: _____ A: _____ | Responsible Payor <input type="checkbox"/> Private / Self <input type="checkbox"/> Court Appointed Counsel <input type="checkbox"/> Appeals Attorney <input type="checkbox"/> Email <input type="checkbox"/> Other |
| Next Hearing Date | Date: _____ |
| Requestor's Signature:  Date: _____ (Typed name will serve as signature) | |

NOTE: Requests will be processed pursuant to Rule 207 and 607 of the SCACR. Rule 607(h) governs the fees for transcripts, which are not provided for free or at reduced rates to any party, regardless of indigent status. Please promptly submit your payment in the method of payment requested, in order for the transcript to be produced. In some cases, a deposit may be required before the transcript can be placed in the production queue. You may also request a quote before deciding to order. **If you need to cancel the transcript request for any reason, you are responsible for paying for the pages of the transcript that have already been completed at the time of the cancellation.**

If you are ordering a transcript pursuant to Rule 207(a)(1), SCACR, you must contemporaneously furnish a

SCCA 600 (03.2023)

CONFIDENTIALITY NOTICE This message is intended only for the addressee and may contain information that is confidential. If you are not the intended recipient, do not read, copy, retain, or disseminate this message or any attachment. If you have received this message in error, please contact the sender immediately and delete all copies of the message and any attachments.