

**Sample Form – Transcript Redaction Request**

E-file the Transcript Redaction Request on CM/ECF and provide a paper copy to the court reporter

UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF WASHINGTON

_____	)	
	)	Case No.: <u>CV-08-999-RHW</u>
Plaintiff(s),	)	
	)	<b>Transcript Redaction Request</b>
v.	)	
	)	
_____	)	
	)	
Defendant(s).	)	

Pursuant to Fed.R.Civ.P. 5.2/Fed.R.Crim.P. 49.1, Plaintiff/Defendant requests that the following personal identifiers be redacted from the transcript filed on April 12, 2008:

Redact the Social Security number on page 12, line 8 to read xxx-xx-1111;

Redact the Taxpayer identification number on page 32, line 5, to read xxxxxxx2233;

Redact the date of the individual’s birth on page 22, line 14, to read xx/xx/1952;

Redact the minor’s name on page 13, line 5, to read Lxxx Dxxxx;

Redact the financial account number on page 56, line 3, to read

XXXXXX-XXXXXX6622;

Redact the home address on page 44, line 2, to read

(city)\_\_\_\_\_ and (state)\_\_\_\_\_.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 2008.

s/Attorney's Name \_\_\_\_\_

Attorney's Name

### **CERTIFICATE OF SERVICE**

I hereby certify that on \_\_\_ (Date) \_\_\_, I electronically filed the foregoing with the Clerk of the Court using the CM/ECF System which will send notification of such filing to all registered user of said CM/ECF System, as indicated on the accompanying Notice of Electronic Filing, and I hereby certify that I have mailed by United States Postal Service the document to the following Court Reporter and non-CM/ECF participants:

Court Reporter: \_\_\_\_\_

Non-CM/ECF Participants: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

s/ Attorney's Name \_\_\_\_\_

Attorney's Name and Bar Number

Attorney for (Plaintiff/Defendant)

Law Firm Name

Law Firm Address

Law Firm Phone Number

Law Firm Fax Number

Attorney's Email Address