

# National Reporting Service

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E-mail: [Scheduling@nationalreportingservice.com](mailto:Scheduling@nationalreportingservice.com)

## Court Reporter Payment Agreement

**Date Needed:** \_\_\_\_\_

**Style of Case:** \_\_\_\_\_

**Case No.** \_\_\_\_\_

**Judge/Witness:** \_\_\_\_\_

**Location:** \_\_\_\_\_

**Job Type: (Circle one)**

Deposition    Hearing    Trial    Meeting

**Name of Ordering Party: (Please print):** \_\_\_\_\_

**Firm/Attorney:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**By signing this agreement I represent that I am authorized by the above-stated law firm to enter into this agreement and that National Reporting Service is relying upon my representation that the law firm will timely pay all costs associated with services rendered. Past due balance in excess of 30 days shall bear interest at the maximum rate allowable by law. The law firm agrees to pay all costs of collection, including reasonable attorney's fees and court costs.**

**Authorized Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_