

# ELEVENTH CIRCUIT TRANSCRIPT INFORMATION FORM

USCA11 Case: 21-12729 Date Filed: 08/16/2021 Page: 1 of 1

## PART I. TRANSCRIPT ORDER INFORMATION

*Appellant to complete and file with the District Court Clerk and the Court of Appeals Clerk within 14 days of the filing of the notice of appeal in all cases, including those in which there was no hearing or for which no transcript is ordered.*

Short Case Style: Norwegian Cruise Line Holdings Ltd., et al. vs State Surgeon General

District Court No.: 1:21-cv-22492-KMW Date Notice of Appeal Filed: 08/10/2021 Court of Appeals No.: 21-12729

(If Available)

CHOOSE ONE: ☐ No hearing ☐ No transcript is required for appeal purposes ☐ All necessary transcript(s) on file

☒ I AM ORDERING A TRANSCRIPT OF THE FOLLOWING PROCEEDINGS:

*Check appropriate box(es) and provide all information requested:*

	HEARING DATE(S)	JUDGE/MAGISTRATE	COURT REPORTER NAME(S)
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<input checked="" type="checkbox"/> Pre-Trial Proceedings	August 6, 2021	Judge Kathleen M. Williams	Patricia Sanders
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☐ Trial

☐ Sentence

☐ Plea

☐ Other

## METHOD OF PAYMENT:

☒ I CERTIFY THAT I HAVE CONTACTED THE COURT REPORTER(S) AND HAVE MADE SATISFACTORY ARRANGEMENTS WITH THE COURT REPORTER(S) FOR PAYING THE COST OF THE TRANSCRIPT.

☐ CRIMINAL JUSTICE ACT. My completed AUTH-24 requesting authorization for government payment of transcripts has been uploaded in eVoucher and is ready for submission to the magistrate judge or district judge [if appointed by the district court] or to the circuit judge [if ordered by or appointed by the circuit court]. [A transcript of the following proceedings will be provided ONLY IF SPECIFICALLY AUTHORIZED in Item 13 on the AUTH-24: Voir Dire; Opening and Closing Statements of Prosecution and Defense; Prosecution Rebuttal; Jury Instructions.]

Ordering Counsel/Party: Joseph O. Masterman, on behalf of Scott A. Rivkees, M.D., in his official capacity as State Surgeon General and Head of the Florida Department of Health

Name of Firm: Cooper & Kirk, PLLC

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E-mail: jmasterman@cooperkirk.com Phone No.: (202) 220-9600

*I certify that I have completed and filed PART I with the District Court Clerk and the Court of Appeals Clerk, sent a copy to the appropriate Court Reporter(s) if ordering a transcript, and served all parties.*

DATE: 08/16/2021 SIGNED: /s/Joseph O. Masterman Attorney for: Scott A. Rivkees, M.D., State Surgeon General

## PART II. COURT REPORTER ACKNOWLEDGMENT

*Court Reporter to complete and file with the District Court Clerk within 14 days of receipt. The Court Reporter shall send a copy to the Court of Appeals Clerk and to all parties.*

Date Transcript Order received: \_\_\_\_\_

☐ Satisfactory arrangements for paying the cost of the transcript were completed on: \_\_\_\_\_

☐ Satisfactory arrangements for paying the cost of the transcript have not been made.

No. of hearing days: \_\_\_\_\_ Estimated no. of transcript pages: \_\_\_\_\_ Estimated filing date: \_\_\_\_\_

DATE: \_\_\_\_\_ SIGNED: \_\_\_\_\_ Phone No.: \_\_\_\_\_

NOTE: The transcript is due to be filed within 30 days of the date satisfactory arrangements for paying the cost of the transcript were completed unless the Court Reporter obtains an extension of time to file the transcript. \_\_\_\_\_

## PART III. NOTIFICATION THAT TRANSCRIPT HAS BEEN FILED IN DISTRICT COURT

*Court Reporter to complete and file with the District Court Clerk on date of filing transcript in District Court. The Court Reporter shall send a copy to the Court of Appeals Clerk on the same date.*

This is to certify that the transcript has been completed and filed with the district court on (date): \_\_\_\_\_

Actual No. of Volumes and Hearing Dates: \_\_\_\_\_

Date: \_\_\_\_\_ Signature of Court Reporter: \_\_\_\_\_