

IN THE _____ COURT OF _____ COUNTY, NEBRASKA

Case #. _____
APPEARANCES:

For the Plaintiff:

Name

Bar Number and Firm Name (attorneys only)

Street Address/P.O. Box Number

City/State/ZIP Code

Phone E-mail Address

Plaintiff

vs.

For the Defendant:

Name

Bar Number and Firm Name (attorneys only)

Street Address/P.O. Box Number

City/State/ZIP Code

Phone E-mail Address

Defendant

CERTIFICATE OF TRANSCRIPT

I, _____, Clerk of the _____ County Court, certify that the attached are true and accurate copies of the pleadings filed in this case. (Index attached).

The notice of appeal was filed on _____.

The District Court filing fee in the amount of \$_____ was paid on _____, or

A poverty affidavit (copy attached) was filed on _____.

I further certify that the following costs (have) (have not) been paid:

Filing Fee	\$ _____	NSC Education Fee	\$ _____	Services Fees	\$ _____
LEIF	\$ _____	Dispute Resolution Fee	\$ _____	Witness Fees	\$ _____
Judges Retirement	\$ _____	Indigent Defense Fee	\$ _____	Transcript Fees	\$ _____
Automation Fee	\$ _____	Uniform Data Analysis Fee	\$ _____	Bill of Exceptions	\$ _____
		Legal Services Fee	\$ _____	Other	\$ _____
TOTAL					\$ _____

Date: _____ By the Court: _____

(Seal) _____ Clerk _____