



# PENSION EVALUATORS® AT TROYAN, INC.®

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## EXPERT TELEPHONIC DEPOSITION REQUEST FORM

I would like to schedule an expert witness for the case below. The main issue requiring deposition relates to:

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ATTORNEY:

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CLIENT:

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JUDGE:

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COURT:

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ADDRESS:

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COURT

CHAMBERS

PHONE NUMBER:

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DATE:

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TIME:

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FEE:

For Rates and Further Details Please Contact the Firm  
[info@pension-evaluators.com](mailto:info@pension-evaluators.com) or toll free 1-800-221-0706

I have verified the date, time and location for the deposition of **Pension Evaluators® at Troyan, Inc.®** expert witness for the above noted case and have read and accept the costs and responsibilities provided.

SIGN:

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PRINT:

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DATE:

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