

UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF MICHIGAN  
**TRANSCRIPT ORDER FORM**

111 First Street  
Bay City, MI 48708

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**Order Party: Name, Address and Telephone Number**

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**Case/Debtor Name: City of Detroit, Michigan**

Case Number: 13-53846

Chapter: 9

Hearing Judge Hon. Steven Rhodes

Bankruptcy  Adversary

Appeal Appeal No: \_\_\_\_\_

**Hearing Information** (A separate form must be completed for each hearing date requested.)

Date of Hearing: 10/25/2013 Time of Hearing: \_\_\_\_\_ Title of Hearing: Eligibility Trial

Please specify portion of hearing requested:  Original/Unredacted  Redacted  Copy (2<sup>nd</sup> Party)

Entire Hearing  Ruling/Opinion of Judge  Testimony of Witness  Other

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**Signature of Ordering Party:**

/s/Claude D. Montgomery Date: 12/10/2013

By signing, I certify that I will pay all charges upon completion of the transcript request.

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