

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: 11/05/2013     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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\_\_\_\_\_     Date     By

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