

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

111 First Street  
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**Order Party: Name, Address and Telephone Number**

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City, State, Zip New York, New York 10020  
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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: 11/07/2013 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

Special Instructions: Official Final Transcript by email---Rush, As soon as Possible !

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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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\_\_\_\_\_  
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Order Received: \_\_\_\_\_

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