AO 435
(Rev. 04/11)

Administrative Office of the United States Courts

TRANSCRIPT ORDER

Please Read Instructions:

FOR COURT USE ONLY
DUE DATE:

1. NAME	2. PHONE NUMBER	3. DATE
Vincent P. Slusher	(469) 357-2571	12/21/2017

4. MAILING ADDRESS	5. CITY	6. STATE	7. ZIP CODE
1717 Main Street, Suite 5400	Dallas	Texas	75201

8. CASE NUMBER	9. JUDGE	DATES OF PROCEEDINGS	
17-bk-31646	Hon. Marvin Isgur	10. FROM 12/21/2017	11. TO 12/21/2017

12. CASE NAME	LOCATION OF PROCEEDINGS	
In re Montco Offshore, Inc., et al.	13. CITY Houston	14. STATE Texas

15. ORDER FOR

☐ APPEAL	☐ CRIMINAL	☐ CRIMINAL JUSTICE ACT	☒ BANKRUPTCY
☐ NON-APPEAL	☐ CIVIL	☐ IN FORMA PAUPERIS	☐ OTHER

16. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)

PORTIONS	DATE(S)	PORTION(S)	DATE(S)
☐ VOIR DIRE		☐ TESTIMONY (Specify Witness)	
☐ OPENING STATEMENT (Plaintiff)			
☐ OPENING STATEMENT (Defendant)			
☐ CLOSING ARGUMENT (Plaintiff)		☐ PRE-TRIAL PROCEEDING (Spcy)	
☐ CLOSING ARGUMENT (Defendant)			
☐ OPINION OF COURT			
☐ JURY INSTRUCTIONS		☒ OTHER (Specify)	
☐ SENTENCING		Entire proceedings	12/21/2017 @ 10:00 a.m.
☐ BAIL HEARING			& 4:30 p.m.

17. ORDER

CATEGORY	ORIGINAL (Includes Certified Copy to Clerk for Records of the Court)	FIRST COPY	ADDITIONAL COPIES	NO. OF PAGES ESTIMATE	COSTS
ORDINARY	☐	☐	NO. OF COPIES		
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DAILY	☒	☒	NO. OF COPIES 1		
HOURLY	☐	☐	NO. OF COPIES		
REALTIME	☐	☐			

CERTIFICATION (18. & 19.)
By signing below, I certify that I will pay all charges (deposit plus additional).

ESTIMATE TOTAL 0.00

18. SIGNATURE
/s/ Vincent P. Slusher

PROCESSED BY

19. DATE
12/21/2017

PHONE NUMBER

TRANSCRIPT TO BE PREPARED BY

COURT ADDRESS

	DATE	BY		
ORDER RECEIVED				
DEPOSIT PAID			DEPOSIT PAID	
TRANSCRIPT ORDERED			TOTAL CHARGES	0.00
TRANSCRIPT RECEIVED			LESS DEPOSIT	0.00
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT			TOTAL REFUNDED	
PARTY RECEIVED TRANSCRIPT			TOTAL DUE	0.00

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