

U.S. Department of Justice

Office of the United States Trustee Eastern District of Michigan

211 West Fort Street, Suite 700 Detroit, Michigan 48226 (313) 226-7999

REQUEST FOR TRANSCRIPT OF §341 MEETING OF CREDITORS

NOTE: THE ITE	EMS WIT	H *** MUST BE FILLED OUT IN	N ORDER FOR YOUR REQ	UEST TO BE PROCESSED
*** CASE NAME			*** CASE #	
*** CHAPTER _	k 	*** §341 HEARING DATE(S)		
TIME(S) TRUSTEE				JUDGE
PLEASE SEL	ECT FR	OM THE FOLLOWING (1	or more):	
	_ TRA	NSCRIPT - (E-MAILED COPY)	: \$3.60 /PAGE.	
*		IUM TRANSCRIPT COST IS \$50 THE TRANSCRIBER RECEIVES		
	EXPEDITED - (E-MAILED COPY): \$5.00/PAGE.			
*	❖ PROCESSING TIME IS <u>3-7</u> DAYS FROM THE TIME THE TRANSCRIBER RECEIVES THE REQUEST FROM OUR OFFICE.			
	_ CER	TIFIED SEALED COURT CO	PY – ADDITIONAL \$15.00	FOR MAILING.
TRANSCRIPT REQUEST WILL BE PROCESSED BY:				
CHRISTINE A. FELTS - Certified Court Reporter				
cfelts0986@aol.com				
		(248	3) 742-1141	
FELTS", IN THE ENCLOSED. PL	AMOUN EASE DO	BE ACCOMPANIED BY A CHEC IT OF \$50.00 . THE REQUEST O NOT SEND REQUESTS DIREC LY FROM THE TRANSCRIBER I	WILL NOT BE PROCESS TLY TO THE TRANSCRIE	ED UNLESS THE PAYMENT IS BER. YOU WILL RECEIVE A
REQUESTING F	PARTY			
FIRM NAME				
ADDRESS				
TELEPHONE		E-	MAIL	
Official UST U	se Only			
Date Received Request: _		Date Sent to Trai	nscriber:	Processed By: