

BTXN 191 (rev. 12/24)

AUDIO / TRANSCRIPT ORDER

1. ORDER REQUEST: ☐ AUDIO ☒ TRANSCRIPT		2. DATE OF ORDER: 10/16/2025																			
3. NAME: Daniel Northrop		4. PHONE NUMBER: 214-295-8058		5. EMAIL ADDRESS: dnorthrop@mwe.com																	
6. MAILING ADDRESS: McDermott Will & Schulte LLP 2801 North Harwood Street Suite 2600		7. CITY: Dallas		8. STATE: TX	9. ZIP CODE: 75201																
10. CASE NUMBER: 25-33487-mvl7	11. CASE NAME: In re Tricolor Holdings, LLC, et al.	12. JUDICIAL OFFICIAL: Hon. Michelle V. Larson		13. DATE OF PROCEEDING: FROM: / /10/15/2025																	
14. ORDER: <table><tr><td>ORDINARY</td><td>7 DAY EXPEDITED</td><td>DAILY</td><td>HOURLY</td></tr><tr><td>☐</td><td>☒</td><td>☐</td><td>☐</td></tr><tr><td colspan="2">14 DAY EXPEDITED</td><td colspan="2">3 DAY EXPEDITED</td></tr><tr><td colspan="2">☐</td><td colspan="2">☐</td></tr></table>						ORDINARY	7 DAY EXPEDITED	DAILY	HOURLY	☐	☒	☐	☐	14 DAY EXPEDITED		3 DAY EXPEDITED		☐		☐	
ORDINARY	7 DAY EXPEDITED	DAILY	HOURLY																		
☐	☒	☐	☐																		
14 DAY EXPEDITED		3 DAY EXPEDITED																			
☐		☐																			
15. AUDIO/TRANSCRIPT REQUESTED Specify portion(s) and date(s) of proceeding(s):																					
PORTION(S)																					
☒ Entire Hearing	October 15, 2025																				
☐ Court Ruling																					
☐ Witness Testimony																					
☐ Other: (Specify)																					
CERTIFICATION By signing 16. & 17, I certify that I will pay all charges (deposit plus additional as specified by the assigned transcriber).		16. SIGNATURE: /s/ Daniel Northrop																			
		17. DATE: October 15, 2025																			



2533487251015000000000012