AO 435 (Rev. 10/23) ADMINISTRATIVE OFFICE OF

TRANSCRIPT ORDER

Please Read Instructions:

DUE DATE:

1. NAME	2. PHONE NUMBER	3. DATE	
Gregory G. Hesse	(214) 468-3335	10/20/2025	
4. DELIVERY ADDRESS OR EMAIL	**5. CITY**	**6. STATE**	**7. ZIP CODE**
ghesse@hunton.com; kbailey@hunton.com	Dallas	TX	75202

8. CASE NUMBER	9. JUDGE	DATES OF PROCEEDINGS	
25-33487-mvl7	Michelle V. Larson	10. FROM 10/15/2025	11. TO 10/15/2025
12. CASE NAME		LOCATION OF PROCEEDINGS	
Tricolor Holdings, LLC		13. CITY Dallas	14. STATE TX

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 Proceeding	
☐ BAIL HEARING			

17. ORDER

CATEGORY	ORIGINAL (Includes Certified Copy to Clerk for Records of the Court)	FIRST COPY	ADDITIONAL COPIES	NO. OF PAGES ESTIMATE	COSTS
30-Day	☐	☐	NO. OF COPIES		
14-Day	☐	☐	NO. OF COPIES		
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3-Day	☐	☐	NO. OF COPIES		
Next-Day	☐	☒	NO. OF COPIES		
2-Hour	☐	☐	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/ Gregory G. Hesse

PROCESSED BY

19. DATE 10/20/2025

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	

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