



**UNITED STATES BANKRUPTCY COURT**  
CENTRAL DISTRICT OF CALIFORNIA

**TRANSCRIPT ORDER FORM**

ORDER No. \_\_\_\_\_  
CHAPTER 11  
APPEAL?  Yes  No  
APPEAL No. CC-21-1245  
(if known)

(File this form on the related case docket)

Ordering Party's Name: Tania M. Moyron, Counsel to Appellant Attorney Bar# 235736

Law Firm: Dentons US LLP

Mailing Address: 601 South Figueroa Street, Suite 2500, Los Angeles, CA 90017

Person to Contact (If Judge-ordered: Transcriber to contact Procurement\*\*): Kathryn Howard

Telephone: ( 213 ) 892-4985 E-mail: kathryn.howard@dentons.com

Bankruptcy Case #: 2:18-bk-20151-ER Adversary Proceeding #/MP #: \_\_\_\_\_

Date of Hearing (complete a SEPARATE form for EACH hearing date): 10/19/21 Time: 10:00 a.m.

Debtor: In re Verity Health System of California, Inc.

Adversary Proceeding Name: \_\_\_\_\_ vs. \_\_\_\_\_

Hearing Judge: Ernest Robles Courtroom #: 1568

TRANSCRIBER: Ben Hyatt ALTERNATE: Briggs Reporting

(Select from the Court-approved list of Transcription Service Providers. This provider will contact you regarding payment)

**341(a) MEETING OF CREDITORS:** The Meeting of Creditors is recorded by the Trustee. **DO NOT USE THIS FORM.** For [341\(a\) Recording Request Procedures](#), visit the U.S. Trustee website [www.justice.gov/ust/r16](http://www.justice.gov/ust/r16)

**Transcript Type:** **NOTE:** The Court is not responsible for determining if a hearing has been previously transcribed. Check the case docket to determine if a filed transcript already exists or is being transcribed before filing this form.

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| <input type="checkbox"/> Ordinary (30 days)          | <input checked="" type="checkbox"/> Entire Hearing      |
| <input type="checkbox"/> 14 Days                     | <input type="checkbox"/> Ruling/Opinion of Judge only   |
| <input type="checkbox"/> Expedited (7 days)          | <input type="checkbox"/> Testimony of Witness _____     |
| <input checked="" type="checkbox"/> Daily (24 hours) | <input type="checkbox"/> Other* _____ (name of witness) |

\*Special Instructions: \_\_\_\_\_

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**TO BE COMPLETED BY THE COURT**

**Judge Ordered Transcript\*\*:** Clerk must **docket this form**; CM/ECF will automatically notify Procurement.

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Digital Recording (or Analog Tape Recording)

(Tape #: \_\_\_\_\_) Time Start (Index #): \_\_\_\_\_ Time End (Index #): \_\_\_\_\_ Time Start: \_\_\_\_\_ Time End: \_\_\_\_\_

(Tape #: \_\_\_\_\_) Time Start (Index #): \_\_\_\_\_ Time End (Index #): \_\_\_\_\_ Time Start: \_\_\_\_\_ Time End: \_\_\_\_\_

Court Recorder: \_\_\_\_\_ Division: \_\_\_\_\_ Processed by: \_\_\_\_\_

**\*\*TRANSCRIBER INSTRUCTIONS**

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