

AO 435 (Rev. 04/18)	ADMINISTRATIVE OFFICE OF THE UNITED STATES COURTS	<b>FOR COURT USE ONLY</b>
<b>TRANSCRIPT ORDER</b>		<b>DUE DATE:</b>

*Please Read Instructions:*

1. NAME <b>Matthew D. Cavanaugh</b>		2. PHONE NUMBER <b>(512) 236-2313</b>		3. DATE <b>6/5/2019</b>	
4. DELIVERY ADDRESS OR EMAIL <b>1401 McKinney Street, Suite 1900</b>			5. CITY <b>Houston</b>		7. ZIP CODE <b>77010</b>
8. CASE NUMBER <b>18-35672</b>		9. JUDGE <b>Jones</b>		DATES OF PROCEEDINGS	
			10. FROM <b>6/5/2019</b>		11. TO <b>6/5/2019</b>
12. CASE NAME <b>Westmoreland Coal Company, et al.</b>			LOCATION OF PROCEEDINGS		
			13. CITY <b>Houston</b>		14. STATE <b>TX</b>
15. ORDER FOR					
<input type="checkbox"/> APPEAL		<input type="checkbox"/> CRIMINAL		<input type="checkbox"/> CRIMINAL JUSTICE ACT	
<input type="checkbox"/> NON-APPEAL		<input type="checkbox"/> CIVIL		<input checked="" type="checkbox"/> BANKRUPTCY	
16. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)					

PORTIONS	DATE(S)	PORTION(S)	DATE(S)
<input type="checkbox"/> VOIR DIRE		<input type="checkbox"/> TESTIMONY (Specify Witness)	
<input type="checkbox"/> OPENING STATEMENT (Plaintiff)			
<input type="checkbox"/> OPENING STATEMENT (Defendant)			
<input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)		<input type="checkbox"/> PRE-TRIAL PROCEEDING (Specy)	
<input type="checkbox"/> CLOSING ARGUMENT (Defendant)			
<input type="checkbox"/> OPINION OF COURT			
<input type="checkbox"/> JURY INSTRUCTIONS		<input checked="" type="checkbox"/> OTHER (Specify)	<b>entire hearing</b>
<input type="checkbox"/> SENTENCING			
<input type="checkbox"/> BAIL HEARING			

17. ORDER					
CATEGORY	ORIGINAL <small>(Includes Certified Copy to Clerk for Records of the Court)</small>	FIRST COPY	ADDITIONAL COPIES	NO. OF PAGES ESTIMATE	COSTS
ORDINARY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
14-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
EXPEDITED	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
3-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
DAILY	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
HOURLY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
REALTIME	<input type="checkbox"/>	<input type="checkbox"/>			

CERTIFICATION (18. & 19.) By signing below, I certify that I will pay all charges (deposit plus additional).	ESTIMATE TOTAL	0.00
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18. SIGNATURE <b>/s/ Matthew D. Cavenuagh</b>			PROCESSED BY		
19. DATE <b>6/5/2019</b>			PHONE NUMBER		
TRANSCRIPT TO BE PREPARED BY <b>Judicial Transcribers of Texas</b>			COURT ADDRESS		
	DATE	BY			
ORDER RECEIVED					
DEPOSIT PAID			DEPOSIT PAID		
TRANSCRIPT ORDERED			TOTAL CHARGES <span style="float: right;">0.00</span>		
TRANSCRIPT RECEIVED			LESS DEPOSIT <span style="float: right;">0.00</span>		
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT			TOTAL REFUNDED		
PARTY RECEIVED TRANSCRIPT			TOTAL DUE <span style="float: right;">0.00</span>		