

HEARING OFFICE

NOTICE OF REQUEST FOR TRANSCRIPT

Record on Appeal - Pursuant to Rule 27.4

This form is to be completed by a party who requests a copy of an official transcript of the record. A party requesting an official transcript is responsible for all transcription fees incurred, pursuant to Rule 27.4. The Clerk for the Board of Supervisors may complete this form to obtain an official or unofficial transcript of the record. Upon such a request, an official transcript shall be prepared at the County's expense or an unofficial transcript will be prepared by the Clerk of the Hearing Office at no expense.

Today's Date:	Complaint Number:
Respondent's Name:	Date of Hearing:
Requesting Party: (Print Name) I understand that I will incur the costs for transcription of the record by an official transcription agency. The Clerk shall send a copy of the audiotape to the court reporting agency of my choice. I request to use the services of: and agreed to be billed directly by the court reporting agency.	
Requesting Party's Address:	
Clerk of the Board of Supervisors: (Name)	 Unofficial Copy (Prepared by Hearing Office Clerk) Official Copy (Paid for at County Expense)
VERIFICATION: I hereby request the record be transcribed according to the terms provided herewith. I acknowledge and agree that I am responsible for all fees incurred.	
Requesting Party: (Print Name)	Date:
Signature:	Phone:

The Hearing Office may choose the transcription agency if the requestor has not designated one.

I certify that a copy of the official audiotape was mailed/hand-delivered to the court reporting agency listed herein this ______ day of ______, 2011.

By: _____

Hearing Office Clerk

Contact the Hearing Office at 520-866-6244 or 520-866-6292 for additional information or access the Pinal County Civil Hearing Office Rules of Procedure online at www.pinalcountyaz.gov

31 N Pinal, Florence, AZ 85132, P.O. Box 1326, FLORENCE, AZ 85132 520/866-6244 or 866-6292 FAX 520/866-6267