



GOVERNMENT OF THE  
VIRGIN ISLANDS OF THE UNITED STATES

# PUBLIC EMPLOYEES RELATIONS BOARD

P. O. BOX 25435, GALLOWS BAY, ST. CROIX, USVI 00824-1435  
340-773-5580 (STX) 340-773-4780 (STX FAX) 340-775-4190 (STT) 340-714-7044 (STT FAX)

## TRANSCRIPT REQUEST FORM

[This form is required when requesting Transcripts, and it must be submitted in the respective District.]

THE **APPELLANT / PETITIONER / CHARGING PARTY / RESPONDENT (S)** (circle one) HEREBY ORDERS A TRANSCRIPT OF THE PROCEEDINGS, AS DESCRIBED BELOW:

Date: \_\_\_\_\_

Case No. \_\_\_\_\_

Case Type: \_\_\_\_\_  
(GSA -§530 or §531, Charge, UC, RC, DC, Other)

Caption: \_\_\_\_\_

Date (s) of Hearing: \_\_\_\_\_

Name and Address of the Party Requesting the Transcript (s): \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Number of Transcripts Requested: \_\_\_\_\_

Expedited Request: \_\_\_\_\_ Yes \_\_\_\_\_ No

If Expedited Transcript requested, please note any deadlines affected by this request:

Would you like transcript(s) to be:

Mailed: \_\_\_\_\_

Emailed: \_\_\_\_\_

Picked Up From St. Thomas Office: \_\_\_\_\_

Picked Up From St. Croix Office: \_\_\_\_\_

**PERB WILL SEND YOU AN ESTIMATED INVOICE. A DEPOSIT IS REQUIRED. BALANCE WILL BE DUE UPON RECEIPT.  
PLEASE MAKE CHECKS PAYABLE TO: PUBLIC EMPLOYEES RELATIONS BOARD.**

### FOR OFFICE USE ONLY

Number of Transcripts Prepared: \_\_\_\_\_

Prepared by: \_\_\_\_\_

Date: \_\_\_\_\_

Total Cost of Transcript(s): \_\_\_\_\_