

# Request for Transcript

## Section 1: Claim/Account information

Claim/Account #:

## Section 2: Applicant contact information

Name of Applicant (or Representative)

Street

Apartment, Suite, Unit Number or PO Box #

City/Town

Province

Postal Code

Home Phone

Work Phone

Cell Phone

Fax Number

Alternate Phone

Email Address

**If the contact information changes, you must update the Appeals Commission immediately.**

## Section 3: Appellant contact information

Name of Appellant:

Hearing Date:

## Section 4: Transcription service information

Swann Hallberg & Associates is the approved transcription company

Swann Hallberg & Associates  
Tel: 780-448-9490  
Email: swannhallberg@gmail.com

## Section 5: Application permission

I give permission to Swann Hallberg & Associates above to produce and deliver a copy of the completed transcript to the Appeals Commission at my expense.

I will make payment arrangements directly with the transcription company. I agree that I am responsible for the cost of preparing the transcript and for the costs of the transcripts produced.

I acknowledge and agree that the Appeals Commission may share the transcript with any of the parties or any Body with authority to review Appeals Commission decisions.

Signature

Date (DD/MM/YYYY)

Print the name of the person signing: \_\_\_\_\_

**You can file this form by:**

- **submitting it online through our website;**
- **e-mail addressed to [AC.AppealsCommission@gov.ab.ca](mailto:AC.AppealsCommission@gov.ab.ca);**
- **mail;**
- **fax; or**
- **courier or personal delivery to one of our two offices.**

**Edmonton**

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Fax: 780-412-8701

**Calgary**

Appeals Commission for Alberta Workers' Compensation  
2300, 801 – 6<sup>th</sup> Avenue SW  
Calgary AB T2P 3W2  
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Fax: 403-508-8822

You can view our web site at: [www.appealscommission.ab.ca](http://www.appealscommission.ab.ca)

**Collection, Use and Disclosure of Personal Information:**

- The personal information that you are being asked to provide is collected under the authority of section 33(c), and managed in accordance with the *Freedom of Information and Protection of Privacy Act*.
- The information will be used for the purpose of processing your request for a hearing with the Appeals Commission for Alberta Workers' Compensation.
- It is important that every party to the appeal knows the case that is to be heard and has an opportunity to respond.
- Because of this, we share all documents related to the appeal with all other parties to the appeal and the Workers' Compensation Board.
- The information you provide may also be used for quality assurance and training purposes.
- If you have any questions regarding the collection, use or disclosure of your personal information, please contact the Appeals Commission.

For Appeals Commission  
Use Only