

Transcription Waiver Form

- I filed exceptions and requested Argument Court in PACSES Case ID _____.
- The support hearing officer recorded the hearing held on / / _____.
- I understand that I have a right to request a transcription of the recorded support proceedings.
- I am waiving my right to have the recorded support proceedings transcribed.
- I understand that the court may dismiss my exceptions due to the lack of a transcription of the support proceedings.

Party/Counsel Name _____

Party/Counsel Signature _____ Date _____

DRS Worker ID # _____