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|--|--------------------|-------|---------|
| Name: Address: City, State, Zip Code: Telephone Number: | For court use only | | |
| <p>Superior Court of California County of San Francisco 400 McAllister Street San Francisco, CA 94102</p> | | | |
| Petitioner: | | | |
| Respondent: | | | |
| Other Parent: | | | |
| <p>Application and Declaration for Telephonic Appearance</p> | | | |
| Hearing Date: | Time: | Dept: | Case #: |

APPLICATION AND DECLARATION FOR TELEPHONIC APPEARANCE

1. I am the Petitioner Respondent Other Parent in this case. I am requesting that the Court allow me to appear by telephone to testify regarding my case.
2. I request that the Court allow me to appear by phone at the above court hearing at the following telephone number: _____ . **This number accepts collect calls, and I will be available at this number between 9:00 a.m. and 12:00 p.m. on the day of the hearing.**
3. I need to appear by telephone for the following reasons: (Check all that apply)
 - I am not a California resident. I reside in the state of _____.
 - I work outside of the state of California. I work in _____.
 - I live outside of the nine bay area counties (Alameda, Contra Costa, Marin, Napa, San Mateo, San Francisco, Santa Clara, Solano, Sonoma). I live in _____ county.
 - I am incarcerated at _____ jail/prison and will be incarcerated at the time of the court hearing.
 - Other Extraordinary Circumstances:

4. I agree to be responsible for the costs and arrangements of this telephonic appearance if it is ordered by the Court.
5. If my request to appear by telephone is granted, the court may notify me at the following telephone number: _____. This number accepts collect calls and messages.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

DATE: _____

Print Name

Signature

| | | |
|---|--------------------|---------|
| Name: Address: City, State, Zip Code: Telephone Number: | For court use only | |
| Superior Court of California County of San Francisco 400 McAllister Street San Francisco, CA 94102 | | |
| Petitioner: | | |
| Respondent: | | |
| Other Parent: | | |
| Declaration Regarding Notice of Application for Telephonic Appearance | | |
| Hearing Date: | Time: | Dept: |
| | | Case #: |

I, the undersigned, declare:

1. I gave notice of the ex parte Application for Telephonic Appearance:

a. TO: Petitioner Petitioner's Attorney
 Respondent Respondent's Attorney
 Other Parent: _____
 Other: _____

b. HOW AND WHEN:

By a telephone call at _____ a.m. p.m. on _____ (date).

By personally informing at _____ a.m. p.m. on _____ (date).

By giving copy of the Application and Declaration for Telephonic Appearance by:

Personal delivery at _____ a.m. p.m. on _____ (date).

Overnight mail/other overnight carrier, sent at _____ a.m. p.m. on _____ (date).

Fax transmission at _____ a.m. p.m. on
 _____ (date).

OTHER:

2. At the time of the notice I informed him/her that the application for ex-parte orders contained requests for the following orders: Request to appear by a phone at my court hearing or mediation appointment.
3. I have received the following response: _____

I declare under penalty of perjury that the foregoing is true and correct.

Date:

Print Name

Signature