

Instructions: You must fill out this form completely, legibly, and accurately. Failure to fill in your name, accurate case numbers, contact information, provide a specific telephone number for the telephonic hearing, and/or properly sign the document in the multiple areas required, may cause this document to be rejected for filing with the Court and to be returned to you. Please Note: The terms "case number", "cause number", "notice number", "ticket number", and "citation number" may be used interchangeably to refer to the court number assigned to your case.

Spokane Municipal Court
County of Spokane, State of Washington

CITY OF SPOKANE,
Plaintiff,

vs

Defendant.

Case No:

**REQUEST FOR LEAVE TO
APPEAR TELEPHONICALLY
AT HEARING ON MOTION**

COMES NOW the above-named defendant and hereby requests the Court to grant the defendant leave to appear telephonically at the hearing on defendant's motion either currently set for _____, or filed herewith.

In making such request, the defendant understands that he or she will be required to be continuously available at a specified telephone number from 2:30 PM to 5:00 PM on the date set for hearing. The defendant further understands that if the Court calls the number provided by the defendant within said two and one-half hour window and the defendant fails to answer for any reason, it will automatically result in the defendant's motion being stricken from the docket.

DECLARATION

COMES NOW the declarant, who is also the defendant in the in the above-captioned matter(s), and makes the following declaration in support of the declarant's request to appear telephonically:

I presently live outside of Spokane, County, Washington and maintain no residences within the County. My current physical and mailing addresses are as follows:

Physical address: _____ Mailing address: _____
(If different than physical address)

The telephone number where the Court can reach me from 2:30 PM to 5:00 PM on the date set for hearing is: **(Phone number required)**

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

Signed at _____ on _____
City State Date

Defendant's/Declarant's Signature Defendant's/Declarant's Printed Name

By typing my name in a signature field and clicking "Submit", I agree that my typed name will be the electronic representation of my signature for all purposes, including legally binding agreements, declarations of fact under penalty of perjury, and acknowledgment of receipt of information and/or documents, just the same as a pen and paper signature.