

IN THE CIRCUIT COURT OF THE STATE OF OREGON  
FOR THE COUNTY OF \_\_\_\_\_

Case No: \_\_\_\_\_

\_\_\_\_\_  
Petitioner/Plaintiff

v.

\_\_\_\_\_  
Respondent/Defendant

**MOTION FOR PHONE  
APPEARANCE**

I request the Court allow \_\_\_\_\_ to appear telephonically for

Hearing Type: \_\_\_\_\_

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

Courtroom / Location: \_\_\_\_\_

The motion is based upon the fact that:

the person currently resides \_\_\_\_\_ miles from the court/facility:

Address: \_\_\_\_\_

State of: \_\_\_\_\_, and would suffer considerable financial hardship if required to physically attend this scheduled hearing.

OTHER: \*(attach additional pages if necessary): \_\_\_\_\_

Position of Opposing party regarding telephonic appearance of the above person(s):

Objects       Does not object

The party appearing by phone shall provide any documentation to the court that may be necessary for viewing prior to this scheduled court proceeding and shall pay the standard copy charge per page for materials that must be printed by the court. The party shall also pay all costs associated with the telephonic appearance.

Note: Additional court rules may also apply, including but not limited to UTCR 5.100.

DATED: \_\_\_\_\_

\_\_\_\_\_  
Signature of Party Filing Motion

Printed Name: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

\_\_\_\_\_

Bar # (if Attorney): \_\_\_\_\_

**Certificate of Service**

I, the undersigned person/attorney, hereby certify that on *(date)* \_\_\_\_\_, I served the documents listed here on the persons indicated below:

Documents served:

Persons/Addresses where served:

|                          |   |                |
|--------------------------|---|----------------|
| <input type="checkbox"/> | Umatilla County District Attorney – Pendleton<br>216 SE 4 <sup>th</sup> St, Pendleton, OR 97801 | (541) 278-6270 |
| <input type="checkbox"/> | Umatilla County District Attorney – Hermiston<br>915 SE Columbia Drive, Hermiston OR 97838,     | (541) 667-3081 |
| <input type="checkbox"/> | Morrow County District Attorney – Heppner<br>100 Court Street, PO Box 664, Heppner OR 97836     | (541) 676-5626 |
| <input type="checkbox"/> | Other (Fill in information below)   |                |

Name \_\_\_\_\_

Company (if applicable) \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

- by:  Personal Service by delivery of a true copy to the person to be served.  
 Delivery by leaving it at the person's office with the person's clerk or person apparently in charge or, if there is no one in charge, leaving it in a conspicuous place.  
 First Class Mail by depositing a true copy of the foregoing documents with the United States Postal Service with the appropriate postage.

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Signature of Server

Case Number: \_\_\_\_\_