

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar Number, and Address) <div style="text-align: center;">State Bar No.</div> <div style="display: flex; justify-content: space-between;"> TELEPHONE NO. FAX NO. (OPTIONAL) </div> <input type="checkbox"/> ATTORNEY FOR	<i>FOR COURT USE ONLY</i>
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LASSEN 2610 Riverside Drive, Susanville, CA 96130	
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT:	
REQUEST FOR COURTCALL TELEPHONIC APPEARANCE	CASE NUMBER: _____

HEARING DATE: _____ TIME: _____ DEPT: _____ JUDGE: _____ NATURE OF HEARING: _____
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1. _____ *[name of specific attorney appearing telephonically]* requests a CourtCall telephonic appearance at the above referenced proceeding and agrees to provisions of the Rule/Order/Procedure RE: CourtCall Telephonic Appearances.
2. Not less than five court days prior to hearing, a copy of this document was served on all other parties and faxed to CourtCall, LLC. Telephonic Appearance Program Administrator at (310) 743-1850 OR (888) 88-FAXIN.
3. The non-refundable CourtCall Appearance Fee in the sum of \$72 is paid as follows:
 - Check *(copy attached – write case # on check – and faxed to CourtCall at (310) 743-1850 OR (888) 88-FAXIN)* payable to Telephonic Hearing Account and original mailed to CourtCall, LLC. at 2158 W. 190th Street, Torrance, CA, 90504; telephone (310) 342-0888 or (888) 88-COURT
 - Charge to CourtCall Debit Account No: _____.
 - Charged to VISA, MasterCard, American Express or Discover – credit card payments must be made via phone by calling CourtCall at (310) 342-0888 or (888) 88-COURT
4. **Request Forms are usually processed within 24 hours. Call CourtCall if you do not receive a Confirmation from CourtCall on or before the court day preceding your CourtCall Appearance. WITHOUT A WRITTEN CONFIRMATION YOU ARE NOT ON THE COURTCALL CALENDAR!**

Date: _____ (TYPE OR PRINT NAME) _____ (SIGNATURE)