


(Exhibit B)

DISTRICT COURT OF WASHINGTON  
COUNTY OF WAHAKIYAKUM

_____ Plaintiff/Petitioner, vs. _____ Defendant/Respondent.	CASE NO.: _____  <b>REQUEST TO APPEAR REMOTELY</b> 
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Party requesting to appear remotely: \_\_\_\_\_

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

Phone Number \_\_\_\_\_ Email: \_\_\_\_\_

Nature of Hearing: \_\_\_\_\_

Reason for Remote Appearance Request: \_\_\_\_\_

**Submit your request to District Court for approval: [districtcourt@co.wahkiakum.wa.us](mailto:districtcourt@co.wahkiakum.wa.us)**

If approved, the non-refundable fee for these arrangements and the cost of the call is \$25.00 per party and must be paid to District Court one day prior to the hearing. District Court accepts credit/debit cards.

**\*\*The fee to appear remotely is waived for all parties appearing on civil protection orders for which fees are not charged, indigent persons and attorneys representing indigent parties (proof of indigency required).**

*Please Note: Those participating remotely do not receive priority, so it will sometimes be necessary to wait for the entire calendar—just as though you were in the courtroom waiting for the case to be called.*

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

Print Name: \_\_\_\_\_

<b>Court Admin</b>	
Approved By: _____	Date: _____
<b>Clerk</b>	
Payment Rcvd By: _____	Amount Received:\$ _____

Request to Appear Remotely

**WAHAKIYAKUM DISTRICT COURT**  
MAIL: P.O. Box 144  
LOCATION: 64 Main Street, Cathlamet WA 98612  
(360) 795-3461