



Kings County Superior Court Procedure and forms regarding telephonic appearances in child support cases

PURPOSE OF REQUEST:

If you want to request to appear by telephone in a Department of Child Support case, you must obtain approval by the court. The mandatory ***Request for Telephone Appearance (Governmental)*** ([form FL-679](#)) must be completed and filed with the court to request a telephone appearance. This request must be served to all parties **prior to** filing it with the court at **least 12 court days before** the hearing.

Who can make this request?

A party, an attorney, a witness, a parent who has not been joined to the action, or a representative of a local child support agency or government agency who wishes to appear by telephone at a hearing must file a request with the court.

NOTICING ALL INTERESTED PARTIES:

Who can perform the service?

After you complete pages 1 and 2 of ***Request for Telephone Appearance (Governmental)*** ([form FL-679](#)), someone at least 18 years of age and NOT a party to the case is to notify all interested parties of the request for telephonic appearance.

What is served?

Make a copy of the ***Request for Telephone Appearance*** ([form FL-679](#)) for **each party** to be noticed. Serve all (3) three pages of this form.

If there are financial issues to be decided, complete and serve ***Income and Expense Declaration*** ([form FL-150](#)). A separate Proof of Service is required for this form. Attached is the local Proof of Service form to utilize. Complete the appropriate boxes and submit with the ***Income and Expense Declaration*** ([form FL-150](#)).

Who is served with this request?

This request must be served on the other parties, the local child support agency, and attorneys (anyone else who has an interest in the case). Service must be by personal delivery, fax, express mail, or other means reasonably calculated to ensure delivery by the close of the next court day.

The ***Kings County Department of Child Support Services*** can be noticed in person or by mail as follows:

Mailing address: P.O. Box 1289, Hanford, CA 93232
Physical address: 525 Third Street, Hanford, CA 93230

FILING PAPERWORK WITH THE COURT:



Once completed, where do I file my Request?

File the completed Request for Telephone Appearance ([form FL-679](#)) with the:

Kings County Superior Court.
1426 South Drive, Hanford, CA 93230
Attention: Family Support



How do I know if my Request is granted?

Once the Judicial Officer reviews your Request, the clerk will notify you via telephone (at the number listed on your Request) whether your Request was granted or denied.

THE FOLLOWING FORMS ARE INCLUDED IN THIS PACKET:

Form name and number:	Last revised on:	# of pages
<input type="checkbox"/> Request for Telephone Appearance (FL 679)	01-01-08	3
<input type="checkbox"/> Income and Expense Declaration (FL 150)	01-01-07	4
<input type="checkbox"/> Proof of Service (local form) -utilized for the Income and Expense Declaration	06-10-08	1

Instructions on Request for Telephone Appearance (FL-679)

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This form is only utilized on Family Support cases.

Place your name, address, and telephone number in this area.

If this area is not completed for you, place the County, and Court address here.

Place the name of the Petitioner, Respondent, and Other Parent (if applicable) here. Note this information can be retrieved from your paperwork.

Place the hearing date, time and department here.

#1- This area tells the court information on who is making this request.

#2- This area tells the court the telephone number you would like to appear from on the hearing date.

#3- This area tells the court why you are making this request. Check all boxes that apply to you.

#4 a, b, and c:

#4a- This area tells the court your request is being made at least 12 court days before the hearing date.

#4b- If there are financial issues to be decided, check this box and complete form, [FL155](#).

#4c- check if you have complied with all the requirements for other supporting proof.

#5- Please read, before signing this form.

FL-679	
FOR COURT USE ONLY	
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	
TELEPHONE NO.:	
E-MAIL ADDRESS (Optional):	
ATTORNEY FOR (Name):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF	
STREET ADDRESS:	
MAILING ADDRESS:	
CITY AND ZIP CODE:	
BRANCH NAME:	
PETITIONER/PLAINTIFF:	
RESPONDENT/DEFENDANT:	
OTHER PARENT:	
REQUEST FOR TELEPHONE APPEARANCE	
CASE NUMBER:	
HEARING DATE:	TIME:
DEPT., ROOM, OR DIVISION:	
NOTICE: See form FL-679-INFO, Information Sheet—Request for Telephone Appearance, for deadlines for filing this request, filing any opposition, and service.	
1. I, (name): _____, am the	
<input type="checkbox"/> petitioner/plaintiff <input type="checkbox"/> respondent/defendant <input type="checkbox"/> other parent <input type="checkbox"/> attorney for (name): _____	
<input type="checkbox"/> local child support agency (LCSA) representative <input type="checkbox"/> other (specify): _____ in this case.	
If there are domestic violence or other confidentiality issues in this case and you do not want your home or work phone number made publicly available, provide another phone number in item 2 below. You will need to participate from this phone number, unless other options are available under local rules or procedures. Check with your court clerk.	
2. I ask the court to allow <input type="checkbox"/> me <input type="checkbox"/> _____ to appear from telephone number () set on (date) _____ (time) _____ in Department _____ of the above-named court.	
3. I would like the court to consider the following information in making its decision whether to allow a telephone appearance (check all that apply). (Note: The court can still deny your request, even though boxes are checked.)	
a. <input type="checkbox"/> I live or work outside the state of California in (specify location): _____	
b. <input type="checkbox"/> I live in _____ County in California, which is _____ miles from the above courthouse where the hearing is set.	
c. <input type="checkbox"/> I am disabled.	
d. <input type="checkbox"/> I am asking not to appear personally because of domestic violence.	
e. <input type="checkbox"/> I will be incarcerated or confined in (specify): _____ prison, jail, or other institution at the time of the hearing.	
f. <input type="checkbox"/> The LCSA makes this request on behalf of _____ (insert reason for request at g)	
g. <input type="checkbox"/> Other (specify): _____	
4. a. <input type="checkbox"/> I have filed this request at least 12 court days before the hearing and have served or will serve all parties (the local child support agency and other parent) and attorneys, if any, with this form by personal delivery, fax, express mail, or other reasonable means to ensure delivery by _____	
b. <input type="checkbox"/> If there are financial issues to be decided, I have completed the Financial Statement (Simplified) (form FL-155) by _____ hearing. (Read page 2 of form FL-155)	
c. <input type="checkbox"/> I have complied with all requirements of _____	
5. I agree to be responsible for the costs and arrange for the telephone appearance request is made by an LCSA on behalf of _____ telephone appearance as may be required by the _____	
6. <input type="checkbox"/> Number of pages attached: _____	
I declare under penalty of perjury under the laws of the State of California that the foregoing and all attachments are true and correct.	
Date: _____	(TYPE OR PRINT NAME)
_____	(SIGNATURE)
REQUEST FOR TELEPHONE APPEARANCE (Governmental)	
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Family Code, § 4251; Cal. Rules of Court, rules 3.870, 3.1304, 3.1308, 5.324 www.courtinfo.ca.gov	

Remember...this is the telephone number the court will call you at to let you know if your hearing has been granted or denied.

In order for your request be processed in a timely manner, it is important that you place your case number on this document.

#6- If you are attaching (stapling) any supporting documents to this form: check this box, count the number of pages and place the number here.

After completing this page: date, print your name and sign the bottom of this form.

