STATE OF HA FAMILY COU FIRST CIRC	JRT	CASE ID/NUMBER				
PROPOSED ORDER REGARDING REQUEST FOR AUDIO RECORDING OF FAMILY COURT PROCEEDING(S)						
CASE NAME						
				Represented	d □Plaintiff/Petitioner □Defendant/Respondent □Plaintiff/Petitioner □Defendant/Respondent	
			Address  City, State			
Requestor's relationship to proceeding(s):			Telephone	Number	Fax Number	
			E-Mail Add	dress		
For NON-JEFS Users: I request that I be provided with a filed copy of the attached in the following manner:					g manner:	
	I have submitted, herewith (how many) self-addressed, postage prepaid envelope(s).  (I understand that the Court WILL NOT supplement cost of postage.)					
[	I will return to PICK UP a copy from HO'OKELE, the FAMILY COURT SERVICE CENTER in [ ] Kapolei [ ] Honolulu when notified by the Court and/or the following person is Authorized to pick up the document on my behalf with photo ID:					
ON OWN  I will PRINT, at my own expense, a copy from the Judiciary, State of Hawai'i, website - eCourt*Kōkua (https://www.courts.state.hi.us) (Estimated cost: \$3.00 per document, or 10 cents per page, whichever is greater. Certified copy is \$2.00 additional per document.) Note: Confidential Cases are not accessible on eCourt Kōkua.						
For JEFS Users: I acknowledge that I am responsible for printing any copies I need or requesting copies from the Court.						
Date	Yo	our Signature		Print Your	Name	
FC Adm 12/8/23				₽G-AC	-508 (06/2025) WE PROPOSED COVER SHEET	

**FOR JEFS USERS:** 

Document Category: Order
Document Type: Proposed Order \_\_\_\_

& RG-AC-508 (06/2025) WF

PROPOSED COVER SHEET DOCKET CODE: PROD 1F-P-1054B

STATE OF HAVE FAMILY COU FIRST CIRCU	IRT	CASE ID/NUMBER						
ORDER [ ] GRANTING [ ] DENYING REQUEST FOR AUDIO RECORDING OF FAMILY COURT PROCEEDING(S)								
CASE NAME								
				Requestor is the	esented □ □	□Defenda	nt/Respondent	
				[ ] Attorney fo		∃Plaintiff/l ∃Defenda	Petitioner int/Respondent	
				Requestor's Nar	me			
				Address				
Di anna stanta nalationa	-1-1 4 mm			City, State, Zip (	Code			
Requestor's relationship to proceeding(s):				Telephone Number Fax Number				
				E-Mail Address				
ORDER  [ ] Request for Audio Recording of Proceeding(s) is granted and FURTHER DISSEMINATION IS PROHIBITED.  [ ] Request for Audio Recording of Proceeding(s) is denied.								
Dates of Proceeding(s)		rpe of Proceeding ial, title of motion, etc.)	Por	tion of Proceeding CD is being Requ			Name of Presiding Judge	
DATE		JUDGE'S SIGNATUR	RE			•		
Kapolei, Hawaii		Print Judge's Name	:					

ACKNOWLEDGMENT AND RECEIPT					
Date request received:	Estimated completion date:				
Court Reporter's Signature:					
FC Adm 12/8/23	Page 2 of 2 pages	Order Regarding Request for Audio			



If you need an accommodation for a disability when participating in a court program, service, or activity, please contact the ADA Coordinator as far in advance as possible to allow time to provide an accommodation: Call the ADA Coordinator of the First Circuit Family Court Office at (808)954-8200, fax (808)954-8308, or send an e-mail to adarequest@courts.hawaii.gov. The ADA Coordinator will work to provide, but cannot guarantee your requested auxiliary aid, service, or accommodation.

Recording of Family Court Proceeding(s)

1F-P-1054B

Please call the Family Court Service Center at (808)954-8290 if you have any questions about forms or procedures.