



MEDICAL CLAIMS CONCILIATION PANEL
OFFICE OF ADMINISTRATIVE HEARINGS
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
STATE OF HAWAII

In the Matter of the Claim of)
)
)
)
 Claimant(s),)
)
 vs.)
)
)
 Respondent(s).)
 _____)

MCCP No. _____
EX PARTE MOTION FOR LEAVE
TO FILE AND RECEIVE
DOCUMENTS ELECTRONICALLY

**EX PARTE MOTION FOR LEAVE TO FILE
AND RECEIVE DOCUMENTS ELECTRONICALLY**

The undersigned party/attorney/legal representative hereby respectfully requests leave to file documents electronically with the Medical Claims Conciliation Panel, Office of Administrative Hearings, Department of Commerce and Consumer Affairs, State of Hawaii (“Medical Claims Conciliation Panel”), and to receive documents electronically from the MCCP.

In support of this request, I make the following declarations:

I will be filing documents with the MCCP via e-mail from the following e-mail address(es), and I accept responsibility for the authenticity of electronic submittals purporting to be from me, originating from the following email address(es):

1. _____ 2. _____

I authorize the MCCP to transmit documents and correspondence to me via e-mail at the following email address(es):

1. _____ 2. _____

I will serve hard copies of all documents and pleadings on all other parties unless otherwise directed by the M CCP.

I acknowledge that this Order shall be effective upon the date of issuance, and shall continue in effect until terminated by the M CCP, or upon written motion filed by me.

I declare under penalty of law that the foregoing is true and correct.

DATED: Honolulu, Hawai'i, _____.

ORDER

- [] The Ex Parte Motion For Leave To File And Receive Documents Electronically is hereby granted.
- [] The Ex Parte Motion For Leave To File And Receive Documents Electronically is hereby denied.

DATED: Honolulu, Hawai'i, _____.

SHERYL LEE A. NAGATA
Acting Senior Hearings Officer
Department of Commerce
and Consumer Affairs