

Sample for Reference Purposes Only. Forms have bilingual format for your convenience, but must be completed and filed with the court in English. 表格样本, 仅供参考. 为了提供便利, 表格采用双语格式, 但向法院提交的表格必须用英语填写。



巡回法庭 马里兰州地方法院

City/County
市/县

Located at
地址

Telephone
电话

Court Address
法院地址

Case No.
案件编号

STATE OF MARYLAND OR
马里兰州或

Plaintiff
原告

vs.
诉

Defendant
被告

PETITION TO SEAL OR OTHERWISE LIMIT INSPECTION OF A CASE RECORD
《密封或以其他方式限制查看案件记录的请愿》

(Md. Rule 16-934(b)(1)(A))

《马里兰州规则》第 16-934(b)(1)(A) 条

NOTICE TO CLERK: You must deny inspection of the case record, including this petition, for a period not to exceed five business days, including the filing date. Rule 16-934(c). Immediately upon docketing, this petition is to be delivered to a judge for consideration. Rule 16-934(c)(2).

致书记员的通知: 在不超过五个工作日(含本提交日)的期限内, 您必须拒绝查看案件记录, 包括本请愿。第 16-934(c) 条规则。一旦立案, 本请愿将立即送交一名法官审议。第 16-934(c)(2) 条规则。

I petition, under Md. Rule 16-934(b)(1)(A), and on the grounds and authorities stated below, to seal or otherwise limit inspection of the following records, or parts of records, that are not otherwise shielded from inspection under the Rules or other applicable law.

本人根据《马里兰州规则》第 16-934(b)(1)(A) 条, 并基于下文所述理由和授权, 请求密封或以其他方式限制查看《马里兰州规则》或其他适用法律禁止查阅的下列记录或其中一部分。

My name is _____, and I am a party to this action. a person who is the subject of or is specifically identified in the case.

我的名字是_____, 我是 本次诉讼的一方当事人。 案件的主体或被明确识别身份的人。

The specific records or parts of records that should not be subject to public inspection are:

不应被公众查阅的具体记录或其中一部分如下:

The specific facts why these records or parts of records should be prevented or limited from public inspection are:

阻止或限制公众查阅这些记录或其中一部分的具体原因包括:

I do do not believe that immediate, substantial and irreparable harm will result to me or the person I am seeking relief on behalf of if these records, or parts of records, are not immediately sealed, or immediately made unavailable for public inspection, before a full adversary hearing can be held. If I believe such harm will result, the specific reasons for my belief are: _____

我 认为 不认为, 在召开全面对质听证之前, 不立即密封或禁止公众查阅这些记录或其中一部分, 将会对我或我为其寻求救济的人造成直接、重大和不可弥补的损害。如果我认为将会造成此类伤害, 我这样认为的具体原因是: _____

AFFIDAVIT
宣誓书

I solemnly affirm under the penalties of perjury that the contents of this document are true to the best of my knowledge, information, and belief.

本人郑重确认, 据本人所知所信, 此文件内容真实。如有不实甘受伪证罪之判罚。

Date 日期
Printed Name 正楷姓名
*Address *地址
*City, State, Zip *州、城市、邮编

Signature 签名	Attorney Number 律师编号
*Telephone Number *电话号码	
*Fax *传真	
*E-mail *邮箱	

Please attach any additional pages that you need. (NOTE: You must be specific in your identification of information to be sealed, including identifying specifically which documents or portions thereof you believe should be sealed. You also must be specific in stating your reasons why you believe the case record, part of a case record, or information contained in a case record is confidential and not subject to inspection.)

请附上所需的附加页。(注意：您必须具体说明需要密封的信息，包括具体说明您认为哪些文件或文件的哪些部分应当密封。您还必须具体陈述为什么您认为案件记录、部分案件记录或案件记录中包含的信息是保密信息、不当允许查看的原因。)

CERTIFICATE OF SERVICE

送达证明

I certify that I served a copy of this petition upon all parties to the action and each identifiable person who is the subject of the case record by mailing first-class mail, postage prepaid hand delivery, on _____ to:

我确认，我已通过以下方式将本请愿的一份副本送达诉讼各方和作为本案主体的每一个可识别身份的个人：用邮资预付的一类邮件邮寄 专人递送，送达日期 _____，收件人：_____

Name 姓名
Name 姓名
Date 日期

Address 地址
City, State, Zip 城市、州、邮政编码
Address 地址
City, State, Zip 城市、州、邮政编码
Signature of Party Serving 送达方签名

*You can redact or remove your address and/or contact information on the copy served to the other party(ies).
*您可以在送达至对方当事人处的副本上遮挡或删除您的地址和/或电话号码。

NOTICE TO ALL PERSONS: Unless someone requests a hearing, this petition will be decided by a judge without a hearing.
致所有当事人的通知： 除非有人要求召开听证，否则本请愿将由法官在未召开听证的情况下作出决定。