The forms are in bilingual format for your convenience, but must be completed and filed with the court in English. 为了提供便利,表格用双语格式提供;但是,向法院提交的表 格必须用英语填写。

MARYLAND	□ CIRCUIT	ORPHANS' COURT FO	OR	, MARYLANI	
TOICIAR			City/Count	y	
	巡回法院	孤儿法庭	城市/县	马里兰州	
	Located at Case No Court Address				
	地址	法院地址	案件编号		
In the 关于	Matter of				
	Name of Minor of 未成年人或声称	r Alleged Disabled Person 残疾人姓名			
	AFFIDAVIT O	F ATTEMPTS TO CONTA INTERESTED PI (Md. Rule 10-20 尝试联系、寻找和识别利 (马里兰州规则 10-	ERSONS 03 (c)) 害关系人宣誓书	D IDENTIFY	
I,				, am: (check one)	
	a party 当事人				
	a person intereste 上述事项利害关	d in the above-captioned mat 系人	ter		
	an attorney. 律师。				
	of	elieve that the persons listed	_	terested in the estate	
	本人有理由认为	下方所列人士在以下遗产中	中享有厉害关系:		
(Provi-	de any information	vou have)			

<u>Name</u> <u>姓名</u>	<u>Relationship</u> <u>关系</u>	Addresses <u>地址</u>
I have made a good faith effort to co本人真诚努力通过下列方式联系上	-	by the following means:
I solemnly affirm under the pen the best of my knowledge, informati	on, and belief.	
本人在承担伪证处罚的前提下	· 郑里佣认据本人个人所知的	信,此义忤内谷具实。
Signature 签名		Date 日期
亚 和		山 7 切