



DISTRICT COURT OF MARYLAND FOR _____

Located at _____ City/County _____

Court Address _____ Telephone _____

Case No. _____

Date: _____

Petitioner _____

PETITION FOR DISBURSEMENT OF SEIZED ANIMAL(S) PROCEEDING FUNDS OR TERMINATION OF ORDERED PAYMENTS (Criminal Law § 10-615.1)

I am _____, an agent of the seizing agency and I request that the court order:

the disbursement of funds collected by the clerk of the court for the care of the seized animal(s) to: _____ starting _____ on a weekly bi-weekly monthly basis.

the one time disbursement of funds in the amount of \$ _____ to _____

termination of payment for reasonable care of the seized animal(s) and all unused funds retained by the clerk of the court be returned to _____

because: _____ Name of party ordered to pay for cost of care for animal(s)

- the owner of the animal(s) has surrendered all rights to the animal(s).
- the animal(s) has/have been forfeited to _____ under §§ 10-615(e), 10-105.1(g)(4), or 10-105.1(l) of the Criminal Law Article.
- the animal(s) has/have died or been euthanized.

Date Petitioner/Petitioner's Attorney Signature Attorney Number

Fax Printed Name

E-mail Street Address

Telephone City, State, Zip

CERTIFICATE OF SERVICE

I certify that the following party, parties, or attorney(s) were served with a copy of this Petition for Disbursement of Seized Animal(s) Proceeding Funds or Termination of Ordered Payments as indicated:

Person served (note if attorney): _____

Address of the person served: _____

Service method: first-class mail on _____, hand delivery on _____
Date Date

service on registered user via MDEC system on the effective date of filing.

Person served (note if attorney): _____

Address of the person served: _____

Service method: first-class mail on _____, hand delivery on _____
Date Date

service on registered user via MDEC system on the effective date of filing.

Date Signature Attorney Number

For additional person(s) served, please attach completed form CC-DC-128 (Certificate of Service).