



COURT OF APPEALS COURT OF SPECIAL APPEALS

CIRCUIT COURT DISTRICT COURT FOR _____

City/County

Located at _____ Court Address Case No. _____

STATE OF MARYLAND

vs.

Defendant

**NOTICE OF ENTRY OF APPEARANCE
FOR VICTIM OR VICTIM'S REPRESENTATIVE
(Md. Rules 1-326(d) and 20-109(b))**

Please enter my appearance for _____, the victim victim's representative.
Name

Please grant me access per the Maryland Rules to all case records in the action, other than case records that are sealed or shielded under the Rules in Title 16, Chapter 900, or subject to a protective order.

Signature _____ Attorney (CPF) Number _____ Address _____
Date _____ City, State, Zip _____
Printed Name _____ Telephone Number _____
Firm Name _____ E-mail _____ Fax _____

Victim Attorney Number, if known: _____

NOTICE TO CLERK: DO NOT enter the Attorney Number (formerly CPF ID No.) into the case management system. If the attorney for the victim provides the "Victim Attorney Number," please enter that number.

CERTIFICATE OF SERVICE

I certify that I served a copy of this notice upon the following party or parties by hand delivery

mailing first-class mail, postage prepaid on _____ Date _____ to:

Name Address

City, State, Zip

Name Address

City, State, Zip

Date Signature of Party Serving/Attorney