

Docket No: _____

Return Date: _____

(First Named Plaintiff)

vs.

(First Named Defendant)

(Date)

PLEASE ENTER THE APPEARANCE OF:

(Name of Individual Attorney or Pro Se Party)

(Complete Mailing Address including Firm Name, if any)

Attorney or Pro Se Party Telephone Number _____

in the above entitled case for

- ☐ The Plaintiff
- ☐ The Plaintiffs
- ☐ The following plaintiff only: _____
- ☐ The Defendant
- ☐ The Defendants
- ☐ The following defendant only: _____

Signed: _____
(Individual Attorney or Pro Se Party)

(Print or Type Name of Attorney or Pro Se Party)

Note: If other counsel have already appeared for the party or parties indicated above, state whether this appearance is:

- ☐ In lieu of appearance of attorney _____ already on file
- ☐ In addition to appearance already on file (Give Name)

Certification for "in lieu of appearances:"

I hereby certify that a copy of the above was mailed/delivered to the counsel or pro se party whose appearance is replaced:

SIGNED (Attorney or pro se party)

X

NAME OF EACH PARTY SERVED

DATE COPIES MAILED/DELIVERED:

ADDRESS AT WHICH SERVICE WAS MADE