

STATE OF INDIANA

SS: IN THE BARTHOLOMEW SUPERIOR COURT NO 2

COUNTY OF BARTHOLOMEW

CASE NO: 03D02-_____

Claimant(s)

vs

Defendant(s)

INDIVIDUAL APPEARANCE

This Appearance Form must be filed on behalf of every party in a civil case.

1. My Name is _____ and I am

Initiating (filing) _____

If you are the Claimant check

Responding (answering or defending) _____

Initiating; If you are Defendant

Intervening _____

check Responding.

in this case and am representing myself.

2. Contact information for receiving legal service of documents and case information is required by Court Rules: (NOTE: *If you are the Initiating party and this case, or a related case, involves a protection from abuse order, a workplace violence restraining order, or a no-contact order, you must provide an address for the purpose of legal service of documents but that address should not be one that exposes the whereabouts of a petitioner*)

THIS INFORMATION IS REQUIRED:

Address: _____

Email Address: _____

Phone: _____

OR, if in the related case, you have used the Attorney General Confidential address, you may check _____ Attorney General confidential address (contact the Attorney General 1-800-321-1907 or email address is confidential@atg.state.in.us)

3. This is a _____ case type as defined in administrative Rule 8(B)(3).
(Clerk will supply this information).

4. I will accept service by FAX at the following number _____

Signature - Self-Represented Party