

APPEARANCE OF COUNSEL

Trial Court of Massachusetts District Court Department

CASE NAME:

DOCKET NUMBER: _____

v.

_____ DISTRICT COURT

To the Clerk-Magistrate:

Please enter my appearance as attorney for _____

in the above numbered court action.

ATTORNEY NAME

B.B.O. NUMBER (Required)

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ATTORNEY FIRM

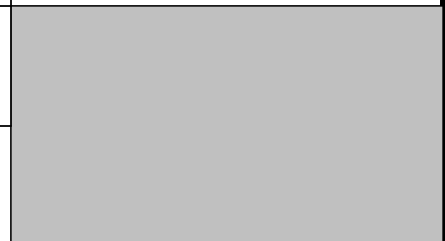
TELEPHONE NUMBER

STREET ADDRESS

CITY / TOWN

STATE

ZIP CODE



X _____

SIGNATURE OF ATTORNEY

_____ DATE