

**ATTENDANCE AT
ORAL ARGUMENT**

JD-AC-2 Rev. 3-99 Pr. Bk. 62-8

STATE OF CONNECTICUT
APPELLATE COURT

INSTRUCTIONS TO PREPARER

1. Please complete all information requested and *PRINT LEGIBLY*.
2. This form does not constitute an appearance. If you wish to file a new appearance, please contact the Appellate Court clerk.
3. Fill out blue card, front and back, indicating Appellate Court docket number, name of case, and your name and address, including zip code.
4. Give both forms to clerk in Appellate Court room on date of argument.

APPELLATE COURT DOCKET NO.

DATE OF ARGUMENT

| | |
|---------------------------------|---|
| NAME OF CASE | PLAINTIFF |
| | DEFENDANT |
| COUNSEL ARGUING THE CASE | NAME OF COUNSEL (and title if appropriate) TELEPHONE NO. |
| | ADDRESS |
| ACCOMPANYING COUNSEL | NAME(S) (and title(s) if appropriate) |
| COUNSEL ON BRIEF | NAME(S) (and title(s) if appropriate) |

REPRESENTING: ("X" all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Appellant(s) | <input type="checkbox"/> Cross Appellant(s) |
| <input type="checkbox"/> Appellee(s) | <input type="checkbox"/> Cross Appellee(s) |
| <input type="checkbox"/> all plaintiffs | <input type="checkbox"/> the named plaintiff only |
| <input type="checkbox"/> the following plaintiff(s) only: _____ | |
| _____ | |
| <input type="checkbox"/> all defendants | <input type="checkbox"/> the named defendant only |
| <input type="checkbox"/> the following defendant(s) only: _____ | |
| _____ | |
| <input type="checkbox"/> Amicus Curiae | <input type="checkbox"/> Pro Hac Vice |
| <input type="checkbox"/> The State of Connecticut | <input type="checkbox"/> Other: _____ |