

**UNITED STATES DISTRICT COURT**  
for the  
Southern District of Indiana

<i>Plaintiff</i>	)	
v.	)	Case No.
<i>Defendant</i>	)	

**APPEARANCE OF COUNSEL**

To: The clerk of court and all parties of record

I am authorized to practice in this court and I appear in this case as counsel for:

\_\_\_\_\_ ,

in the capacity of:

- CJA Appointment
- Federal Community Defender
- Retained Attorney
- Other: \_\_\_\_\_ (Please specify.)

\_\_\_\_\_  
*Attorney's signature*

\_\_\_\_\_  
*Printed name and bar number*

Date: \_\_\_\_\_

\_\_\_\_\_  
*Address*

\_\_\_\_\_  
*E-mail address*

\_\_\_\_\_  
*Telephone number*

\_\_\_\_\_  
*FAX number*