

**IN THE COURT OF SPECIAL APPEALS**

No. \_\_\_\_\_, September Term, \_\_\_\_\_

v.

\_\_\_\_\_  
**Appellant**

\_\_\_\_\_  
**Appellee**

**INFORMAL BRIEF OF THE APPELLEE**

**Please refer to the Guidelines for Informal Briefs provided with this form for instructions on how to fill out this form.**

1. **Respond to the issue or issues raised by the appellant.** Either in the following space or on additional pages attached to this informal brief (no more than 15 pages total), respond to the issues raised by the appellant, identify the facts relating to those issues, and identify your argument in support of the resolution of those issues. When referencing facts, identify where the facts can be located in the record (in other words, exhibits, transcripts, pleadings, orders, decisions, etc.). You may cite case law, statutes, or other authorities, but you are not required to do so. You may attach any relevant documents from the record.

(SEE NEXT PAGE)

**Issue 1.**

**Supporting Facts and Argument:**

**Issue 2.**

**Supporting Facts and Argument:**

**Issue 3.**

**Supporting Facts and Argument:**

2. **Relief Requested.** Identify the action you would like the Court of Special Appeals to take (reverse the judgment, vacate the judgment, remand the case to the circuit court, etc.):

3. **Related Cases or Appeals.** Identify all prior appeals from this circuit court case or any related case. Provide the case name, case number, and the outcome of the appeal.

\_\_\_\_\_  
Signature

**CERTIFICATE OF SERVICE**

I certify that on \_\_\_\_\_ I served a complete copy of this Informal Brief on all parties by mailing it to the address shown below:

\_\_\_\_\_  
Signature

*Please note: If the Certificate of Service is not completed, this filing will not be accepted. If you do not serve the other party or parties in this case, this filing may be stricken and the appeal dismissed.*

**IF YOU ARE AN INMATE IN A CORRECTIONAL FACILITY FILL OUT THIS CERTIFICATE**

**CERTIFICATE OF FILING (Md. Rule 1-322)**

I, \_\_\_\_\_ (name), certify that (1) I am involuntarily confined in \_\_\_\_\_ (name of facility); I have no direct access to the U.S. Postal Service or to a permitted means of electronically filing the attached pleading or paper; (3) on \_\_\_\_\_ (date) at approximately \_\_\_\_\_ (time) I personally deposited the attached pleading or paper for mailing in a receptacle designated by the facility for outgoing mail or delivered it to an employee of the facility authorized by the facility to collect outgoing mail; and (4) the item was in mailable form and had the correct postage on it.

I solemnly affirm this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, under the penalty of perjury and upon personal knowledge that the foregoing statements are true.

\_\_\_\_\_  
Signature