



DISTRICT COURT OF MARYLAND FOR

Located at

Court Address

City/County

Case No.

vs.

Plaintiff/Petitioner

Defendant/Respondent

CIVIL APPEAL/REQUEST FOR TRANSCRIPT (APPL) (TRSC)

To the Clerk:

Please note an appeal in the case referenced above for: [] trial decision dated

[] outcome of motion hearing dated [] denial of motion dated

Appellant is the in the said case:

- Appellant options: District Court cost of \$10, Advance circuit court filing fee, Domestic violence case \$0, Maryland Second Chance Act Shielding \$115, Application for Expungement of Police Records \$115, Other \$165, Waiver of costs, Maryland Legal Aid, My claim exceeds \$5,000.

NOTE: On appeal, a transcript of the District Court proceeding is required when the claim amount exceeds \$5,000 exclusive of interest, costs, and attorney's fees. The cost is \$3 per page for an original transcript and one copy. A deposit of \$75 is required when the transcript is requested. You will be billed for the balance. The appeal will not be forwarded until all costs, including the cost of the transcript, have been paid in full.

Form fields for Date, Telephone Number, Fax, E-mail, Signature of Appellant/Attorney/Attorney Code, Attorney Number, Printed Name, Address, City, State, Zip.

CERTIFICATE OF SERVICE

I certify that I served a copy of this motion upon the following party or parties by [] mailing first-class mail, postage prepaid [] hand delivery, on to:

Form fields for Date, Name, Address, City, State, Zip, Signature of Party Serving.