☐ Mark this box if this form contains Restricted Information.				
MARYLAN CIRCUIT COU	JRT FOR			, MARYLANI
	-	City/0	County	,
Located at	Court Address		Telephone	
-1011-	Court Address		Case No.	
		vs.		
Plaintiff 1		Defend	dant 1	
Street Address		Street	Address	
City, State, Zip	Telephone	City, S	State, Zip	Telephone
E-mail		E-mai	1	
Plaintiff 2		Defend	dant 2	
Street Address		Street	Address	
City, State, Zip	Telephone	City, S	State, Zip	Telephone
E-mail		E-mai	1	
Based on the information p Custody Order (CC-DR-07 following child(ren):				
]	Name(s)		Date(s) of b	oirth
It is necessary for the court reasons:	to take physical custod	ly of the child	(ren) for at least one	of the following
☐ The child(ren) is/are	IMMEDIATELY likely	to suffer serio	ous physical harm for	the following reasons:
☐ The child(ren) is/ard				
	e likely to be removed t	rom Maryland	d:	
	e likely to be removed t	rom Maryland	d:	

	Case No:				
I/We solemnly affirm and verify under the best of my/our knowledge, information	solemnly affirm and verify under the penalties of perjury that the contents of this document are to est of my/our knowledge, information, and belief.				
Date	Signature of Plaintiff 1/Attorney	Attorney Number			
	Printed Name				
	Street Address City, State, Zip Telephone Number				
	E-mail	Fax			
Date	Signature of Plaintiff 2/Attorney	Attorney Number			
	Printed Name				
	Street Address				
	City, State, Zip				
	Telephone Number				
	E-mail	Fax			

to