

STATE OF INDIANA)
)SS:
COUNTY OF ELKHART)

IN THE ELKHART SUPERIOR COURT 5
CASE NO: _____

IN RE THE _____

Petitioner/Plaintiff

Respondent/Defendant

APPEARANCE BY SELF-REPRESENTED PERSON IN CIVIL CASE

This Appearance Form must be filed by every party in a civil case.

1. My name is: _____ and I am representing myself in this case.
2. My address and contact information that I agree to receive service of documents and case Information is:
Address: _____
City, State, Zip Code: _____
My phone number is: _____
My Email address is: _____

OR, if in the related case, you have used the Attorney General Confidential address, you may check the box below:

Attorney General confidential address (contact the Attorney General at 1-800-321-1907 or email address is confidential@stg.state.in.us.)

3. There are related cases Yes No (*If yes, please indicate below.*)

Caption and Case number of Related cases: (PO, JC,JP,DR, MI)

Caption: _____ Case Number: _____

Caption: _____ Case Number: _____

Caption: _____ Case Number: _____

/s/ _____
Self-Represented Party

CERTIFICATE OF SERVICE

I hereby certify that I sent a copy of this Appearance by first class mail to: _____,

The opposing attorney, or the opposing party, if not represented by an attorney at the following address:

_____ on the _____ day
of _____, 20_____

/s/ _____
Signature