

TYPE OR PRINT WITH BALL POINT PEN — PRESS HARD

NOTICE OF ASSIGNMENT OF COUNSEL	ASSIGNMENT NUMBER C	Commonwealth of Massachusetts Committee for Public Counsel Services 44 Bromfield St., Boston MA 02108 Telephone: 617-482-6212
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DATE OF ASSIGNMENT	NAME OF ASSIGNING JUDGE
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COURT DIVISION	<input type="checkbox"/> JURY SESSION (Check Here)
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NAME OF PERSON FOR WHOM COUNSEL ASSIGNED (Last Name, First Name)

Juvenile (J) Adult (A) _____ Number of Child Clients

DOCKET NO.	ENTER CPCS CODE OR CHAPTER & SECTION WITH DESCRIPTION			
	CPCS CODE	CHAPTER	SECTION	DESCRIPTION
A				
B				
C				
D				
E				
F				

COMPLETE THIS SECTION FOR CHILDREN AND FAMILY LAW CASES

Person Represented:

Mother Father Guardian/Custodian

Name(s) of Additional Child Client(s):

Last Name	First Name
2 _____	_____
3 _____	_____
4 _____	_____
5 _____	_____
6 _____	_____

POST TRIAL / APPEALS
Purpose of Assignment

Appeals Court or SJC (A) Revise and Revoke (R)

Sentence Appeal (S) New Trial Motion (N)

Probation Surrender (P) Other (O)

STATUS PENDING
NEXT COURT APPEARANCE

Released

Not Released

Bail \$ _____ No Bail _____

Serving Other Sentence

Committed

Outpatient

Community

Not Applicable

NEXT COURT DATE / /

INDIGENCY DETERMINATION

The court has found the above-named person

Indigent or Indigent but able to contribute \$ _____

The attorney or organization listed below is assigned to represent this person in this action.

FOR:

Bench or Jury Trial (T) Pre-Trial (P)

Probable Cause (C) Other (O)

CHECK ONE OF THE FOLLOWING:

CPCS Staff Office

Local Office # _____
(See reverse side for address and telephone number.)

Senior Law Student under Rule 3.03

_____ Name of Program

Attorney to be named by CPCS for Appeals Court/SJC/Murder Cases/
Rule 30 Motions/SDP /Civil Commitment Send to: **CPCS**
44 Bromfield St.
Boston, MA 02108

Private Counsel

PLEASE PRINT BBO# _____

REQUIRED

NAME FIRST MIDDLE LAST

STREET

CITY

STATE ZIP

TELEPHONE

CRIMINAL CASE INFORMATION CONTACT: BAR ADVOCATE PROGRAM NO: _____
(SEE REVERSE SIDE FOR ADDRESS AND TELEPHONE NUMBER.)

Assignment For Purpose of Bail Hearing, Bail Review or Arraignment Only

AUTHORIZED SIGNATURE

PRINT NAME

INSTRUCTIONS TO THE COURT

1. Forward white copy to Committee for Public Counsel Services, 44 Bromfield St., Boston, MA 02108
2. Retain green copy for court file.
3. Remaining copies are color coded as follows: pink—client, blue—bar advocate program, goldenrod—attorney.