



SUPERIOR COURT     FAMILY COURT     DISTRICT COURT

Providence/Bristol County     Kent County     Washington County     Newport County

STATE OF RHODE ISLAND

v.

\_\_\_\_\_

Indictment File Number:

Complaint File Number:

Attorney Court Appointed     Yes     No

**ENTRY OF APPEARANCE**

I hereby enter my appearance for the Defendant \_\_\_\_\_,  
whose B.C.I. number is \_\_\_\_\_ and date of birth is \_\_\_\_\_.

\_\_\_\_\_  
Attorney for the Defendant/Respondent (Signature)

\_\_\_\_\_  
Attorney for the Defendant/Respondent (Print)

\_\_\_\_\_  
Rhode Island Bar Number

\_\_\_\_\_  
Address

\_\_\_\_\_  
Office Telephone Number

\_\_\_\_\_  
Cell Telephone Number

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Date

**CERTIFICATE OF MAILING**

I hereby certify that on the \_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_, I mailed a true copy of this  
Entry of Appearance by regular mail, postage prepaid to the Office of the Attorney General.

\_\_\_\_\_  
Signature of Person Certifying Mailing