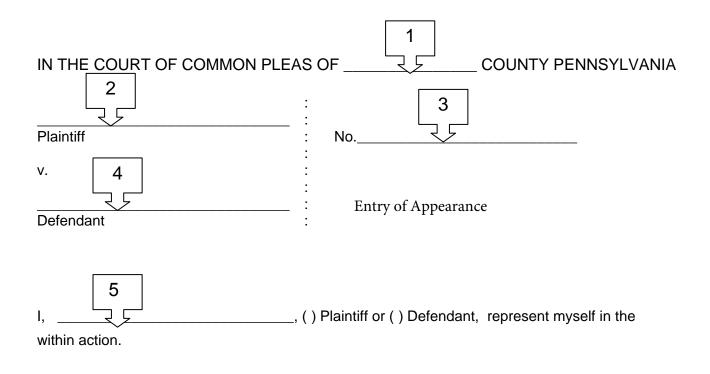
Self-Represented Party Entry of Appearance (Assessment Appeals)

## Self-Represented Party Entry of Appearance

The numbers on these instructions correspond with the numbers in the boxes on the form. Use the form with the boxes to guide you through filling out the blank form.

- Box 1. Print the name of the county in which the case is filed.
- Box 2: Print the name of plaintiff exactly as is appears on the Complaint.
- Box 3. Print the docket number that the office where legal pleadings are filed wrote on Complaint at the time of filing.
- Box 4: Print the name of the defendant exactly as is appears on the Complaint.
- Box 5: Print your name and check whether you are the plaintiff or the defendant.
- Box 6: Complete this section with an address and telephone so that you receive court papers, either from the court or from another party. This address does not need to be your home address.

This form must be filed, and a copy sent to all parties and attorneys.



I understand that I am under a continuing obligation to provide current contact information to the court, to other self-represented parties, and to attorneys of record.

Print Name	
Signature	Telephone number
Address	Fax number
City, State, Zip Code	Date

IN THE COURT OF COMM	ION PLEAS OF	COUNTY PENNSYLVANIA
Plaintiff	: 	
٧.		
Defendant	Entry of A	ppearance
I, within action.	,()Plaintiff or()I	Defendant, represent myself in the

I understand that I am under a continuing obligation to provide current contact information to the court, to other self-represented parties, and to attorneys of record.

 Print Name

 Signature
 Telephone number

 Address
 Fax number

 City, State, Zip Code
 Date

THE PARTY FILING THIS ENTRY OF APPEARANCE MUST PROVIDE NOTICE BY SENDING A COPY TO ALL PARTIES AND ATTORNEYS.