

**IN THE COURT OF COMMON PLEAS OF MONTGOMERY COUNTY, PENNSYLVANIA
CRIMINAL ACTION**

COMMONWEALTH OF PENNSYLVANIA : CRIMINAL DOCKET NUMBER:
vs.

PRAECIPE TO ENTER APPEARANCE

TO THE JUDGES, COURT OF COMMON PLEAS:

Please enter my appearance for the above identified defendant.

Arraignment Date: _____

PRINT NAME AND ADDRESS OF ATTORNEY

Signature of Attorney for Defendant

Attorney I.D. Number (AOPC Number)

WAIVER OF ARRAIGNMENT

I, _____, hereby acknowledge that I have received notice of the date of my arraignment, and I understand that I may request copies of the "BILL(S) OF INFORMATION" which list the charge(s) against me that will be filed by the District Attorney.

It is my choice to enter a plea of "NOT GUILTY" and to waive my right to appear in court for a formal arraignment on the charge(s) against me.

I have consulted with my attorney and I am aware of my right to file a "REQUEST FOR A BILL OF PARTICULARS" within seven (7) days following the date of my arraignment, and not ordinarily later than that. I am aware that I have a right to file a "MOTION FOR PRETRIAL DISCOVERY AND INSPECTION" within fourteen (14) days following my arraignment date, and ordinarily not later than that. I am aware that I have a right to file various other motions under an "OMNIBUS PRETRIAL MOTION FOR RELIEF," and that such motions must be filed within thirty (30) days after my arraignment date. I am further aware that if I do not file these motions, in accordance with the "PENNSYLVANIA RULES OF CRIMINAL PROCEDURE," I may jeopardize my right to file them at a later date.

I am aware that my date of arraignment is _____ 20 _____.

(Date signed)

Signature of Defendant

(Date signed)

Signature of Attorney for Defendant

- | | |
|-----------------------------------|---------------------------|
| <input type="checkbox"/> Original | Clerk of Courts |
| <input type="checkbox"/> Copy | District Attorney |
| <input type="checkbox"/> Copy | Defendant/Defense Counsel |

(Revised 9/9/2011)