

Mark this box if this form contains Restricted Information.

MARYLAND  CIRCUIT COURT  DISTRICT COURT OF MARYLAND FOR \_\_\_\_\_ City/County  
JUDICIARY Located at \_\_\_\_\_ Court Address Telephone \_\_\_\_\_

STATE OF MARYLAND OR Case No. \_\_\_\_\_  
\_\_\_\_\_  
Plaintiff vs. Defendant

**REQUEST TO ISSUE A BODY ATTACHMENT**

Unless you are filing into a restricted case type (Adoption, Emergency Evaluation, Extreme Risk Protective Order (ERPO), Guardianship, Juvenile, Gender Declaration), if this submission contains Restricted Information (confidential by statute, rule or court order) you must file a Notice Regarding Restricted Information Pursuant to Rule 20-201.1 (form MDJ-008) with this submission, and check the Restricted Information box on this form.

On \_\_\_\_\_ an order for body attachment was granted in the above-entitled case due to  
Date the defendant's failure to appear for  an examination in aid of enforcement  a show cause hearing  
 other \_\_\_\_\_  
 Defendant was personally served with the order to appear for the  examination in aid of enforcement  
 show cause hearing  other \_\_\_\_\_  
 Defendant signed for the above order, served by restricted delivery.

OR  
 Plaintiff provided affidavit that defendant is willfully evading service.  
The plaintiff requests the court issue a body attachment for contempt of court.

\_\_\_\_\_  
Date Signature of Plaintiff/Attorney/Attorney Number  
\_\_\_\_\_  
Address Printed Name  
\_\_\_\_\_  
City, State, Zip Telephone  
\_\_\_\_\_  
Fax E-mail

If the person is a witness, provide a description if known:  
Most current address \_\_\_\_\_ Driver's License \_\_\_\_\_  
State \_\_\_\_\_ Race \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_ Hair \_\_\_\_\_ Eyes \_\_\_\_\_ DOB \_\_\_\_\_  
FBI# \_\_\_\_\_ SID# \_\_\_\_\_ Complexion \_\_\_\_\_  
Tattoos, Marks, Scars \_\_\_\_\_ Other \_\_\_\_\_

**CERTIFICATE OF SERVICE**

I certify that I served a copy of this Request to Issue a Body Attachment on the following party by  
 mailing first-class mail, postage prepaid  hand delivery on \_\_\_\_\_ to:  
Date

\_\_\_\_\_  
Name Address  
\_\_\_\_\_  
City, State, Zip  
\_\_\_\_\_  
Name Address  
\_\_\_\_\_  
City, State, Zip  
\_\_\_\_\_  
Date Signature of Serving Party

**ORDER**

Upon consideration of the plaintiff's request, the request for body attachment is:  
 GRANTED - Body Attachment is to be issued.  
 DENIED \_\_\_\_\_

\_\_\_\_\_  
Date Judge ID Number