

This form contains Restricted Information.



APPELLATE COURT OF MARYLAND
APPLICATION FOR COURT-FUNDED TRANSCRIPT(S)
IN CHILD ACCESS CASES ONLY

Circuit Court Case No. _____ Appellate Court Case No. _____

_____ vs. _____

MDEC: In most cases, you must file a Notice Regarding Restricted Information Pursuant to Rule 20-201.1 (Form MDJ-008) with this submission. You do not need to file such a Notice (Form MDJ-008) in Adoption, Emergency Mental Health Evaluation, Extreme Risk Protective Order (ERPO), Guardianship, Juvenile, or Gender Declaration cases, because these case-types are automatically protected from public access.

I, _____, am appealing this case and I want the court to pay for the relevant transcript(s) in my appeal. I meet the income eligibility requirements described below and my case involves custody or visitation of a child.

Affidavit of Eligibility

I am [] representing myself OR [] I have an attorney: _____.

I respectfully submit that:

- 1. There are _____ family members living in my household, including myself (do not include renters or temporary guests).
2. The total gross household income (before taxes) is \$ _____ (total income earned by all persons in the household) per [] WEEK [] MONTH [] YEAR.
3. The gross household income (before taxes) is from the following sources (list amounts before taxes) per [] WEEK [] MONTH [] YEAR:
[] Wages..... \$ _____
[] Commissions/Bonuses..... \$ _____
[] Social Security/SSI..... \$ _____
[] Retirement Income..... \$ _____
[] Unemployment Insurance..... \$ _____
[] Temporary Cash Assistance..... \$ _____
[] Alimony/Spousal Support..... \$ _____
[] Rent Received from Tenants..... \$ _____
[] Any Other Income (do not include food stamps/SNAP)..... \$ _____
4. I own the following property (do not list your home, one vehicle, and/or personal items in your home):
[] NONE
[] Real estate other than principal home..... Value: \$ _____
[] Other vehicles including boats..... Value: \$ _____
[] Bank accounts..... Balance: \$ _____
[] Stocks or other securities..... Value: \$ _____
[] Other property (describe): _____ Value: \$ _____
5. I owe the following debts:
[] NONE
[] Credit Card: _____ Amount Owed: \$ _____ Monthly Payment: \$ _____
[] Car Loan: _____ Amount Owed: \$ _____ Monthly Payment: \$ _____

Other Debt: _____ Amount Owed: \$ _____ Monthly Payment: \$ _____

I am appealing an order dated _____. (You must attach a copy of the order to this application.)

Number of Hearings Required to be Transcribed: _____

Dates of Hearings to Transcribe: _____

Transcript Cost Estimate*: _____

* Before submitting this form, the applicant must contact the court reporter liaison in the circuit court where the hearing was held for assistance in estimating the cost of the transcript and to obtain a copy of the audio file. **You must attach a copy of the estimate to this application.**

I understand that this application allows the Maryland Judiciary to determine my eligibility for court-funded transcripts, subject to the availability of funds for this purpose (which are not guaranteed). I solemnly affirm under the penalties of perjury that the contents of this document are true to the best of my knowledge, information, and belief.

_____ Applicant's Signature	_____ Telephone
_____ Applicant's Name	_____ Fax
_____ Address	_____ Email
_____ City, State, Zip	_____ Date

CERTIFICATE OF SERVICE

I certify that I served a copy of this Application for Court-Funded Transcript(s) upon the opposing party or parties by

first-class mail, postage prepaid hand delivery MDEC (e-service) on _____ :
Date

_____ Name	_____ Address
	_____ City, State, Zip
_____ Name	_____ Address
	_____ City, State, Zip
_____ Date	_____ Signature of Party Serving

NOTE: To be considered, you must attach the following to this Application: (1) the judgment or order from which you are appealing; (2) an estimate from the court reporter (or liaison) for the costs of the transcripts; and (3) unless you are filing into a restricted case type, a Notice Regarding Restricted Information Pursuant to Rule 20-201.1 (Form MDJ-008). Please ensure that your Application is otherwise complete. The Court will not reconsider a denied Application.



APPELLATE COURT OF MARYLAND

Circuit Court Case No. _____

Appellate Court Case No. _____

_____ vs. _____

ORDER REGARDING APPLICATION FOR COURT-FUNDED TRANSCRIPT(S)

Upon consideration of the appellant's Application for Court-Funded Transcript(s), and any accompanying documentation,

THE APPELLATE COURT OF MARYLAND FINDS:

The party named above:

- meets the financial eligibility guidelines of the Court-Funded Transcript Program.
- does NOT meet the financial eligibility guidelines of the Court-Funded Transcript Program.

The party named above:

- is unable by reason of poverty to pay the transcript costs.
- is NOT unable by reason of poverty to pay the transcript costs.

Other findings: _____

THE APPELLATE COURT OF MARYLAND ORDERS that the application is:

- GRANTED. The costs for the preparation of transcripts for the following hearing dates will be funded by the court: _____
- DENIED. You must ensure that any necessary transcripts for your appeal are ordered within ten (10) days of this order, or your appeal may be dismissed by the Court.
- DENIED AT THIS TIME. As of the date of this Order, the Court finds that it does not appear that transcripts are necessary for the appeal to proceed. This finding is subject to revision by the Court upon further information and the appellant may be ordered to obtain the transcripts.

Date

Gregory Wells, Chief Judge