

**COURT OF SPECIAL APPEALS OF MARYLAND**  
**361 Rowe Blvd., Second Floor, Annapolis, MD 21401**  
**www.mdcourts.gov/cosappeals**  
**410-260-1450**

**CIVIL APPEAL INFORMATION REPORT** (Md. Rules 8-205 & 8-206)

Appeal No. \_\_\_\_\_  
(To be filled in by Clerk, Court of Special Appeals)

**Instructions:** There is no fee to file this form. Within 10 calendar days of filing an appeal the appellant (the person filing the appeal) must deliver, by mail or in person, a complete and signed form to the address listed above. A copy must also be served by mail or delivery to all other parties or their attorneys. **FAILURE TO FILE THE FORM ON TIME OR TO CORRECT ANY ERRORS IN THE TIME SPECIFIED MAY RESULT IN DISMISSAL OF THE APPEAL.** The non-appealing party may, but is not required to, file a responding Civil Appeal Information Report. This form is not required for cases regarding Child(ren) In Need of Assistance or Supervision, termination of parental rights, juvenile delinquency, criminal convictions, habeas corpus, coram nobis, post-conviction, violation of probation, appeals by prisoners relating to their confinement, and cases where an application for leave to appeal is allowed by law. Attach copies of all requested documents to the original and all copies of the form. Use extra pages if needed.

**COMPLETE THE FOLLOWING:**

**1. Case Identification:**

Case name: \_\_\_\_\_ V \_\_\_\_\_

Case Number: \_\_\_\_\_, Circuit Court for \_\_\_\_\_ County

Judge: \_\_\_\_\_

**2. Identification of parties and their attorneys:**

**Appellant's Name:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone (home, cell & work): \_\_\_\_\_

E-mail: \_\_\_\_\_

**Appellant's Attorney:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Appellee's Name:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone (home, cell & work): \_\_\_\_\_

E-mail: \_\_\_\_\_

**Appellee's Attorney:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

**3. CASE INFORMATION:**

**a. Type of case:**

- |  |  |
|--|--|
| <input type="checkbox"/> CONTRACT              | <input type="checkbox"/> CUSTODY               |
| <input type="checkbox"/> DIVORCE               | <input type="checkbox"/> ESTATE                |
| <input type="checkbox"/> FORECLOSURE           | <input type="checkbox"/> WORKERS' COMPENSATION |
| <input type="checkbox"/> PERSONAL INJURY       | <input type="checkbox"/> REAL ESTATE           |
| <input type="checkbox"/> DECLARATORY JUDGMENT  | <input type="checkbox"/> ADMINISTRATIVE APPEAL |
| <input type="checkbox"/> OTHER (Specify) _____ |  |

**b. Is this an appeal from an order granting a  motion to dismiss or  motion for summary judgment?  YES  NO If yes, was there a hearing?  YES  NO**

**c. Dates & duration of any trial or hearing (days/hours):** \_\_\_\_\_  
\_\_\_\_\_

**d. Were any post-judgment motions filed under Rule 2-532 (Judgment Notwithstanding the Verdict), 2-533 (New Trial), or 2-534 (Alter or Amend)?  YES  NO If yes state:**

Date Motion Was Filed: \_\_\_\_\_  
Date of Ruling on Motion: \_\_\_\_\_  
Decision on the Motion: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**e. Do the judgments, orders, or rulings end the entire case against all parties?  YES  NO  
If no, explain why the case is appealable under Rule 2-602 or Courts Article Sections 12-301 or 12-303:** \_\_\_\_\_  
\_\_\_\_\_

**f. Was *in banc* review requested under Rule 2-551?  YES  NO  
If "yes," who filed for *in banc* review:** \_\_\_\_\_

**4. Appeal**

**a. Date appeal was filed:** \_\_\_\_\_

**b. Is this an appeal from an order about adoption, termination of parental rights, guardianship of the person, custody or visitation?  YES  NO**

**c. Was this matter previously appealed?  YES  NO**  
Appeal No. \_\_\_\_\_, Sept. Term, \_\_\_\_\_  
Appeal No. \_\_\_\_\_, Sept. Term, \_\_\_\_\_

**d. Are there any related cases or appeals pending? If so, identify the case:**

Case name: \_\_\_\_\_ Case No.: \_\_\_\_\_ Court: \_\_\_\_\_  
Case name: \_\_\_\_\_ Case No.: \_\_\_\_\_ Court: \_\_\_\_\_

5. **Issues on appeal.** (*Information disclosed does not limit the scope of appeal. Rule 8-205(f).*)

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6. **Mediation &/or Pre-Hearing Conference** - *For questions regarding mediation or pre-hearing conferences please call the ADR Division at 410-260-3717. Information about the appellate mediation program is also available at [www.mdcourts.gov/cosappeals/mediation](http://www.mdcourts.gov/cosappeals/mediation).*

a. Describe the history and present status of settlement negotiations:

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b. Was this case previously submitted to any Alternative Dispute Resolution process (arbitration, mediation, settlement conference, etc.)?  Yes  No. If so, please describe? \_\_\_\_\_

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c. Could this case benefit from mediation before briefs are filed?  YES  NO

d. Could this case benefit from a Pre-Hearing Conference (Rule 8-206)?  YES  NO

*(Information disclosed in this answer is subject to the confidentiality provision of Rule 8-205(f)).*

7. **IMPORTANT - ATTACH A COPY OF: (1) CIRCUIT COURT DOCKET ENTRIES, (2) THE JUDGMENT APPEALED FROM, AND (3) THE NOTICE OF APPEAL.**

*(For questions about your appeal please call the Clerk's Office at 410-260-1450 or see [www.mdcourts.gov/cosappeals](http://www.mdcourts.gov/cosappeals))*

**CERTIFICATE OF SERVICE**

I certify that on the date stated below a copy of the foregoing Report was mailed, postage prepaid to:

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DATE

SIGNATURE