

**IN THE COURT OF COMMON PLEAS
COUNTY OF CHESTER, PENNSYLVANIA**

COMMONWEALTH OF PENNSYLVANIA : CRIMINAL DIVISION
VS. : CASE # _____
: OTN # _____
: CHARGE(S) _____
: _____
: _____
: _____
Home Phone # _____ Work Phone # _____

PRAECIPE TO ENTER APPEARANCE

Enter my appearance for the above defendant.

Attorney for Defendant Date

ATTORNEY INFORMATION
(Type or Print)

Name & Address

Phone # Attorney I.D. #

**ACKNOWLEDGMENT OF NOTICE OF PRESENTMENT OF INFORMATION TO
THE COURT OF COMMON PLEAS AND WAIVER OF ARRAIGNMENT**

I hereby acknowledge that I have received notice of the presentment of the Information(s) of the above-captioned criminal charges to the Court of Common Pleas of Chester County, Pennsylvania. After having conferred with counsel of my choice and after having been advised by him of my right to be arraigned on any and all Information(s) in this matter, I hereby waive my right to be so arraigned and plead: **CIRCLE ONE** -- [not guilty] [stand mute].

*Attorney for Defendant Date *Defendant Date

(* THIS WAIVER MUST CONTAIN ORIGINAL SIGNATURES OF DEFENDANT AND ATTORNEY)