

IN THE CIRCUIT COURT FOR _____
(County/Baltimore City)

LOCATED AT _____
(Address of the Courthouse)

STATE OF MARYLAND

*

*

vs.

*

Case No. _____

*

*

(Defendant's Name)

* * * * *

MOTION TO SHIELD

Pursuant Maryland Rule 16-1009 and other applicable provisions of Maryland law, I,

_____ demand my rights as a crime victim,
(Victim's Name)

representative, or witness as follows:

1. Right to Seal Inspection of the Case Record: Pursuant to Maryland Rule 16-1009, I request that the Court limit the inspection of the court record as not to include my personal address and telephone number to protect my confidentiality, safety, and for other reasons as will be set forth at a hearing on this motion.
2. General Rights: I request this Court to ensure that I am provided all of the specifically enumerated rights provided to me under Article 47 of the Maryland Declaration of Rights as well as any and all rights for victims procured under Maryland Law.

WHEREFORE, I, _____, respectfully request:
(victim's name)

1. That the Court ensure that my rights are not violated.

2. That the Court hold a hearing as needed to protect my rights and that my personal address and telephone number be shielded until such hearing takes place;
3. That my personal information not be included in the court file and not be distributed in an electronic form; and
4. For such further relief in the interest of justice and this Honorable Court deem just and proper.

Victim - Printed Name	Victim - Signature
Address	
Date	Telephone

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that on this _____ day of _____, 2005, a copy of the forgoing
(date) (month)

Motion to Shield was sent via US Mail, first class, postage prepaid to :

_____, Assistant State's Attorney, at
(Assistant State's Attorney's Name)

_____, and to the Attorney for the Defendant,
(Assistant State's Attorney's Address)

_____, at _____.
(Defendant's Attorney's Name) (Defendant's Attorney's Address)

(Victim's Name)