

**IN THE COURT OF COMMON PLEAS
COURT 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. #

**ACKNOWLEDGEMENT 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 of the Defendant Date * Defendant Date
(*THIS WAVIER MUST CONTAIN ORIGINAL SIGNATURES OF DEFENDANT AND ATTORNEY)