

ATTENDANCE AT ORAL ARGUMENTJD-SC-6 Rev. 10-21
P.B. §§ 70-4, 71-4, 79a-11STATE OF CONNECTICUT
**SUPREME COURT
APPELLATE COURT**
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3. Fill out fully, indicating SC/AC docket number, name of case, and your name and address, including zip code.
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SC/AC docket number

Date of argument

Name of Case	Plaintiff	
	Defendant	
Counsel or Self-Represented Party Arguing the Case	Name of counsel or self-represented party (include title if appropriate)	Telephone number
	Address of counsel or self-represented party.	
For arguments conducted by videoconference	Provide a telephone number you can be reached at during the argument.	
E-mail	E-mail address	Note: Notice of release of decisions will be given by e-mail only to the e-mail address listed.
Accompanying Counsel	Name(s) (include title(s) if appropriate)	
Counsel or Self-Represented Party on Brief	Name(s) (include title(s) if appropriate)	

Representing: (Select all that apply)

- Appellant(s)
- Cross appellant(s)
- Appellee(s)
- Cross appellee(s)
- All plaintiffs
- The following plaintiff(s) only: _____
- All defendants
- The following defendant(s) only: _____
- Amicus Curiae
- The State of Connecticut
- Other: _____

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