

WAIVER OF APPEARANCE FORM

The court may require you to appear in some cases.

STATE OF NORTH CAROLINA

IN THE GENERAL COURT OF JUSTICE
SUPERIOR & DISTRICT COURT DIVISIONS

COUNTY OF _____

FILE NO. _____

STATE OF NORTH CAROLINA

)

vs.

)

WAIVER OF APPEARANCE

)

)

)

I, _____, knowingly and voluntarily waive my right to appear at any court proceeding related to the above captioned case(s) against me and hereby appoint McCoppin & Associates Attorneys At Law, P.A. to act on my behalf and to enter such plea or pleas as it may deem appropriate or to represent me at trial in my absence. Further, I knowingly and voluntarily waive my right to a trial by jury, to confront and cross-examine witnesses and to testify in this matter. I understand that if my attorney appeals my case(s) to superior court and later remands my appeal, I will accept my district court judgment as final and abide by its terms.

Sworn to and subscribed before me,
this ___ day of _____, _____.

Signature _____
Print Name _____
Address _____

Notary Public

Telephone _____

My commission expires:

CREDIT CARD AUTHORIZATION

I authorize you to debit my Visa or Master Card account for Attorney Fees and Court Expenses in the amount of \$_____ + \$5.10 service charge.

Card # _____ - _____ - _____ - _____

Card Verification Code "CVC" _____

Expiration Date: ____ / ____

Signature _____

Print Name _____

Address _____

Telephone _____

Cary Office

Telephone (919) 481-0011 Toll Free (877) 481-0011 Fax (919) 461-4949
1250 S.E. Maynard Road., Suite 202
Cary, North Carolina 27511

Greenville Office

Telephone (252) 375-3598 Toll Free (877) 481-0011
Physical Address: 123 W. Third Street Greenville, North Carolina 27835
Mailing Address: P.O. Box 1931 Greenville, North Carolina 27835