APPEARANCE
JD-CL-12 Rev. 12-21
P.B. §§ 3-1 through 3-12, 10-13, 25-6A, 25a-2, 25a-3

This form is available in other language(s).

STATE OF CONNECTICUT
SUPERIOR COURT
www.jud.ct.gov

There are instructions and important notices on page 2 (the back) of this form. Read page 2 before filling out this form.

☒ *I am filing this appearance to let the court and all attorneys and self-represented parties of record know that I have changed my address. My new address is below.*

Return date *(For Civil/Family cases)*: 11/23/2021
Docket Number: LLI-CV21-5014019-S

Name of case *(Full name of first Plaintiff v. Full name of first Defendant) Note: In Criminal/Motor Vehicles cases, the Plaintiff is The State of Connecticut*
Goodwin, Jon A. v Milot Junior, Raymond J. et al

☐ Housing Session ☒ Judicial District ☐ Geographic Area ___
Address of court *(Number, street, town and zip code)*: 50 Field Street, Torrington, Ct 06790
Scheduled court date *(Criminal/Motor Vehicle cases only)*:

Enter the Appearance of

Name *(Your name or name of official, firm, professional corporation, or individual attorney)*: Jon A. Goodwin
Juris number *(For attorney/law firm)*:
Mailing address: 34 Franklin Ave., STE 687-2690
Post Office box number:
Telephone number *(Area code first)*: 212372480[illegible]
City/town: Pinedale | State: WY | Zip code: 82941 | Fax number: 2123720982
E-mail address: jgoodwin@protonmail.ch

in the case named above for: *(Select one of the following parties. See descriptions/notes on page 2 of this form.)*

PLAINTIFF
☒ The Plaintiff.
☐ All Plaintiffs.
☐ The following Plaintiff(s) only: _____

DEFENDANT
☐ The Defendant.
☐ All Defendants.
☐ The following Defendant(s) only: _____

☐ **Other** *(Specify)*: _____

☐ This is a **Family Matters** case (such as divorce, custody, or child support). My appearance is for: *(Select one or both)*
☐ matters in the Family Division of the Superior Court ☐ Title IV-D Child Support matters

☐ This is a **Criminal/Motor Vehicle** case, and I am filing this appearance as ☐ a Public Defender or ☐ Assigned Counsel (Special Public Defender)
☐ This appearance is for the purpose of a bail hearing only.
☐ This appearance is for the purpose of alternative arraignment proceedings only.

If an appearance by other counsel or self-represented party is on file for this party/parties, select one option below:

1. ☐ This appearance is in place of the appearance of: _____
Name and Juris Number (if applicable) to be replaced

2. ☐ This appearance is in addition to an appearance already on file.

OFFICE OF THE CLERK
SUPERIOR COURT
2024 MAR 26 P 4:15
JUDICIAL DISTRICT OF
CHIEF CLERK'S
STATE OF CONNECTICUT

I agree that documents can be delivered (served) to me electronically in this case. (Practice Book Sec. 10-13) ☐ Yes ☐ No

Signed *(Individual attorney or self-represented party)*: Jon A Goodwin
Name of person signing at left *(Print or type)*: Jon A. Goodwin
Date signed: 3/26/2024

Certification

I certify that a copy of this document was or will immediately be mailed or delivered electronically or non-electronically on *(date)* 3/26/24 to all attorneys and self-represented parties of record and that written consent for electronic delivery was received from all attorneys and self-represented parties of record who received or will immediately be receiving electronic delivery.

Name and address of each party and attorney that copy was or will be mailed or delivered to*

Cont: Levy Salerno, PO Box 239, Torrington CT 06790
Dannaher Lagnese PC, Capitol Place, Ste 700, 21 Oak St
Hartford, CT 06106

*If necessary, attach additional sheet or sheets with name and address which the copy was or will be mailed or delivered to.

Signed *(Signature of filer)*: Jon A Goodwin
Print or type name of person signing: Jon A. Goodwin
Date signed: 3/26/24

FOR COURT USE ONLY

Print Form

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