

6. Petitioner believes that he/she is being deprived of his/her freedom illegally. Petitioner believes that his/her confinement is illegal because: _____

(Attach additional sheets as necessary).

7. **Notice to Petitioner.** Pursuant to Md. Rule 15-1104, an individual or group filing a petition is entitled to court-appointed counsel, **at no cost to you**, to represent them, unless you waive your right to court-appointed counsel or have retained private counsel, at your own cost.

WHEREFORE, Petitioner respectfully requests that this Court (check all boxes that apply):

1. Petitioner (**check only one**):

- Requests the Court appoint counsel to represent Petitioner in this matter;
- Declines court-appointed counsel and will represent myself; or
- Retained private counsel at his/her own cost.

2. Petitioner further requests (**check only one**):

- To appear by telephone; or
- To appear via Zoom (you must have the internet and the ability to download computer applications).

3. Petitioner further requests:

- The Court enter an Order scheduling a hearing on this Petition to Contest An Order of Isolation or Quarantine for the Secretary of Health, the County Health Officer or their designee to show by what legal authority they have quarantined and thus confined Petitioner.

**I solemnly affirm under the penalties of perjury that the contents of the forgoing
Petition to Contest An Order of Isolation or Quarantine are true to the best of my
knowledge, information, and belief.**

Date

Signature

Printed Name

Mailing Address

Email

Telephone Number

Cell Phone Number

If you are currently represented by counsel, please have counsel date and sign.

Date

Signature

Printed Name

Mailing Address

Email

Telephone Number

Cell Phone Number

PROOF OF SERVICE

I, the undersigned, declare:

1. **I am (check only one):**

- Attorney for Petitioner (Name): _____
- Adult Person (age 18 or older) Other than Petitioner (Name): _____

2. **Server's Declaration:** I have provided a copy of this Petition to Contest An Order of Isolation or Quarantine to the Maryland Attorney General's Office by:

- Email to:** mary.bearden@maryland.gov (please attach a copy of the email transmission and all attachments)

I solemnly affirm under the penalties of perjury that a copy of the petition was served in the matter stated above and that the foregoing Proof of Service is true and correct to the best of my knowledge, information, and belief.

Date

Signature

Printed Name

Mailing Address

Email Address