

MARYLAND DIVISION OF CORRECTION
REQUEST FOR DISPOSITION OF INTRASTATE DETAINERS

To: _____, State's Attorney: _____
(Jurisdiction)

_____, Court _____
(Jurisdiction)

and to all other prosecuting officers and courts of jurisdiction listed below from which indictments, warrants, information, or complaints are pending.

You are hereby notified that the undersigned is now imprisoned at:

_____ at _____
(Institution) (Address)

and hereby requests that a final disposition be made of the following indictments, warrants, information, or complaints now pending against me:

Failure to take action will result in the invalidation of the indictments, information, warrants or complaints.

I hereby agree that this request will operate as a request for final disposition of all untried indictments, warrants, information, or complaints on the basis of which detainees have been lodged against me. I also agree that this request shall constitute consent by me to the production of my body in any court where my presence may be required and a further consent to be returned to the institution in which I am now confined.

Please return this form to the sender if jurisdiction over this matter is held by another agency, court, or officer.

The Certificate of Inmate Status is attached.

The inmate must indicate below whether he/she has counsel or wishes the court to appoint counsel for purposes of any proceeding preliminary to trial. Failure to list the name and address of counsel will be construed to indicate that inmate's consent to the appointment of counsel by the appropriate court.

Inmate initial A or B:

_____ A. My counsel is _____
(Name)

Address: _____

_____ B. I request the court to appoint counsel.

Inmate's Signature

Inmate's Name and DOC/CL/SID

Distribution: Original: Inmate Case Record
Copy: Inmate
Copy: Office of the State's Attorney
Copy: Court of Jurisdiction