

COMMONWEALTH OF PENNSYLVANIA

GOVERNOR'S OFFICE

PENNSYLVANIA HUMAN RELATIONS COMMISSION

In the matter of:

Case No.:

NOTICE OF APPEARANCE

Please enter my appearance in the above captioned matter on behalf of:

I am authorized to accept service on behalf of said participant in this matter.

(CHECK ONE)

- [] On the basis of this notice, I request a copy of each document hereafter issued to my client by the Pennsylvania Human Relations Commission in this matter.
- [] I am already receiving or have access to a copy of each document issued to my client by the Pennsylvania Human Relations Commission in this matter (alone, or in a consolidated proceeding) and do not, on the basis of this notice, require an additional copy.

Signature

Name (Printed)

P.O. Address

City, State, and Zip Code

Telephone (including area code)

Date