

Supreme Court of the United States

ARGUMENT FORM

TO: Counsel of Record in Case(s) for Argument

Please complete all applicable sections of this form and return to Merits Cases Clerk: dmcnerney@supremecourt.gov or (f) 202-479-3204.

A Case No(s): Date of Argument:

Case Caption: v. (Petitioner(s) or Appellant(s) Respondent(s) or Appellee(s))

Arguing Counsel: Date of Birth:

Admitted to Bar of this Court? Yes No If no, allowed to argue pro hac vice? Yes No

Appointed by this Court? Yes No If yes, are you under C. J. A.? Yes No

NOTE: Phonetic Pronunciation of name: Mr. Ms.

Federal or State Title, if any:

Address:

City and State: Zip:

Telephone: E-Mail:

Name of Party(ies) for who counsel will argue:

NOTE: Phonetic Pronunciation of Party(ies):

B DIVIDED ARGUMENT: Complete this section if your time for argument has been divided or a motion for such is pending. Name of party(ies) for whom counsel will argue: Minutes: (Name of counsel to argue FIRST) Name of party(ies) for whom counsel will argue: Minutes: (Name of counsel to argue SECOND)

C Names of counsel, who must be members of the Bar of the Supreme Court, to be seated with arguing counsel at Counsel table. NOTE: If your time for argument has been divided the 4 seats at Counsel Table are to be shared.

Name: Date of Birth:

Name: Date of Birth:

Name: Date of Birth:

DATE: Signature:

DO NOT SUBMIT THIS FORM TO THE ELECTRONIC FILING SYSTEM.

For Questions Contact: Denise McNERNEY, Merits Cases Clerk, 202-479-3032; dmcnerney@supremecourt.gov