THE SUPREME COURT OF OHIO

In the Common Pleas Court of _____ County

Appointment of Trial Counsel in a Capital Case

This form is used pursuant to Rule 20 of the Rules of Superintendence for the Courts of Ohio to report the appointment of trial counsel where the defendant is indigent, counsel is not privately retained by or for the defendant, and the death penalty can be or has been imposed upon the defendant. **Return this form within two weeks of appointment to: Cindy Johnson, Supreme Court of Ohio, 65 S. Front Street, Seventh Floor, Columbus, OH 43215-3431. A copy of the indictment must be attached.**

Defendant's Name: _____ Case No. _____

Trial Judge: _____ Atty.Registration No. _____

Lead Counsel

Name: _____

Atty. Reg. No. _____

Address: _____

_____

Telephone: _____

Certified under Sup.R. 20 as:
Lead Counsel ☐
Co-Counsel ☐
Appellate Counsel ☐

Date of Appointment: _____

Co-Counsel

Name: _____

Atty. Reg. No. _____

Address: _____

_____

Telephone: _____

Certified under Sup.R. 20 as:
Lead Counsel ☐
Co-Counsel ☐
Appellate Counsel ☐

Date of Appointment: _____

ATTORNEY CERTIFICATION

We hereby accept appointment as trial counsel in this case. We affirm that we are currently certified under Sup.R. 20 to accept appointment as lead counsel or co-counsel, and certify that this appointment will not create a total workload so excessive that it interferes with or prevents the rendering of quality representation in accordance with constitutional and professional standards.

_____
Lead Counsel
Date: _____

_____
Co-Counsel
Date: _____

Rev. 2/17/04