

APPEARANCE

JD-CL-12 Rev. 12-21
P.B. §§ 3-1 through 3-12, 10-13, 25-6A, 25a-2, 25a-3

**This form is available
in other language(s).**

STATE OF CONNECTICUT
SUPERIOR COURT
www.jud.ct.gov



**There are instructions and important notices on page 2 (the back) of this form.
Read page 2 before filling out this form.**

I am filing this appearance to let the court and all attorneys and self-represented parties of record know that I have changed my address. My new address is below.

Return date (For Civil/Family cases)
Docket Number FBT-FA-19-6088163-S

Name of case (Full name of first Plaintiff v. Full name of first Defendant) Note: In Criminal/Motor Vehicles cases, the Plaintiff is The State of Connecticut

AMBROSE, CHRISTOPHER V. AMBROSE, KAREN

<input checked="" type="checkbox"/> Housing Session <input type="checkbox"/> Judicial District <input type="checkbox"/> Geographic Area	Address of court (Number, street, town and zip code) 1061 MAIN STREET, BRIDGEPORT, CT 06604	Scheduled court date (Criminal/Motor Vehicle cases only)
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Enter the Appearance of

Name (Your name or name of official, firm, professional corporation, or individual attorney) CHRISTOPHER AMBROSE				Juris number (For attorney/law firm)
Mailing address 381 HORSE POND ROAD		Post Office box number	Telephone number (Area code first) 203-505-1889	
City/town MADISON	State CT	Zip code 06443	Fax number	E-mail address CA0515@AOL.COM

in the case named above for: (Select one of the following parties. See descriptions/notes on page 2 of this form.)

PLAINTIFF <input checked="" type="checkbox"/> The Plaintiff. <input type="checkbox"/> All Plaintiffs. <input type="checkbox"/> The following Plaintiff(s) only: _____	DEFENDANT <input type="checkbox"/> The Defendant. <input type="checkbox"/> All Defendants. <input type="checkbox"/> The following Defendant(s) only: _____
<input type="checkbox"/> Other (Specify): _____	

This is a **Family Matters** case (such as divorce, custody, or child support). My appearance is for: (Select one or both)
 matters in the Family Division of the Superior Court Title IV-D Child Support matters

This is a **Criminal/Motor Vehicle** case, and I am filing this appearance as a Public Defender or Assigned Counsel (Special Public Defender)
 This appearance is for the purpose of a bail hearing only.
 This appearance is for the purpose of alternative arraignment proceedings only.

If an appearance by other counsel or self-represented party is on file for this party/parties, select one option below:

- This appearance is in place of the appearance of: **ALDRICH & ALDRICH/409128**
Name and Juris Number (if applicable) to be replaced
- This appearance is in addition to an appearance already on file.

I agree that documents can be delivered (served) to me electronically in this case. (Practice Book Sec. 10-13) Yes No

Signed (Individual attorney or self-represented party) 	Name of person signing at left (Print or type) CHRISTOPHER AMBROSE	Date signed 04/11/2022
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Certification

I certify that a copy of this document was or will immediately be mailed or delivered electronically or non-electronically on (date) **04/11/2022** to all attorneys and self-represented parties of record and that written consent for electronic delivery was received from all attorneys and self-represented parties of record who received or will immediately be receiving electronic delivery.

Name and address of each party and attorney that copy was or will be mailed or delivered to*
**KAREN AMBROSE, 799 MANCHESTER ROAD, GLASTONBURY, CT 06033, RIORDAN.
KMME@PROTONMAIL.COM, JOCELYN B. HURWITZ, ESQ., COHEN & WOLF, PO BOX 1821,
BRIDGEPORT, CT 06601, JHURWITZ@COHENANDWOLF.COM, CORRINE BONI-VENDOLA, ESQ.,
CHARLES & BONI-VENDOLA, PO BOX 213, COS COB, CT 06807, CORRINE@CBVDIVORCELAW.COM**

FOR COURT USE ONLY

*If necessary, attach additional sheet or sheets with name and address which the copy was or will be mailed or delivered to.

Signed (Signature of filer) 	Print or type name of person signing CHRISTOPHER AMBROSE	Date signed 04/11/2022
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