M	IE J	IUD	ICIAL	BRA	NCH

	Plaintiff	"X" the court for filing				
V.		County:				
	Defendant	Location (Town):				
	-	Docket No.:				
CONSENT FOR EXPEDITED FINAL HEARING						
14 M.R.S. § 6321-B						
DEFENDANTS PLEASE NOTE: You may consult with an attorney or a housing counseling before signing this form.						
I/we consent to the scheduling of an expedited final hearing in the above captioned matter. 🗌 I/we have consulted with an attorney or a housing counselor; <b>OR</b> 🗌 I/we choose not to consult with an attorney or a housing counselor.						
Date ( <i>mm/dd/yyyy</i> ):	►					
		Defendant Signature				
		Print Name				
Date ( <i>mm/dd/yyyy</i> ):	<b>F</b>					
		Defendant Signature				
		Print Name				
Date ( <i>mm/dd/yyyy</i> ):	►					
		Party-In-Interest Signature				
		Print Name				
Date ( <i>mm/dd/yyyy</i> ):						
		Party-In-Interest Signature				
		Print Name				
Date ( <i>mm/dd/yyyy</i> ):	►					
		Plaintiff Signature				
		Print Name				

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