

# In the United States Court of Federal Claims

OFFICE OF SPECIAL MASTERS

[Date Document Filed]

PETITIONER'S NAME,

Petitioner,

v.

SECRETARY OF HEALTH AND HUMAN  
SERVICES,

Respondent.

Case No. \_\_\_\_ - \_\_\_\_ V

Special Master's Name \_\_\_\_\_

## CONSENTED MOTION TO SUBSTITUTE ATTORNEY OF RECORD

[New Attorney] hereby moves the court to be substituted as Petitioner's Attorney of Record in the above-styled case. Per Vaccine Rule 14(c) and R. Ct. Fed. Cl. 83.1(c) (4) the following documents are provided:

1. An affidavit by [New Attorney] stating that he has been retained as attorney in this matter. (See Exhibit 1 attached hereto.)
2. The written consent for substitution of attorney by the previous attorney of record. (See Exhibit 2 attached hereto.)

WHEREFORE, [New Attorney] moves that the Court recognize him as the attorney of record.

### Signature of attorney to be substituted

Name of Attorney to be substituted

Firm Name

Address

City, State, Zip code

Phone number

Facsimile number

Email Address

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**AFFIDAVIT OF APPOINTMENT**

State of \_\_\_\_\_  
County of \_\_\_\_\_

[New Attorney of Record] states as follows:

1. That I am an attorney licensed to practice law in the U.S. Court of Federal Claims.
2. That [JOHN DOE] has retained me as new attorney of record in this matter.

I certify under penalty of perjury under the laws of the United States of America that the foregoing is true and correct. Executed on \_\_\_\_\_.

**Signature of New Attorney of Record**

(Exhibit 1)

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**CONSENT TO CHANGE ATTORNEY OF RECORD**

NOW COMES [Previous Attorney of Record], Attorney of Record in the above-captioned matter, and hereby consents to [New Attorney of Record], being named as the new attorney of record in said matter.

Respectfully submitted,

By: **Signature of Previous Attorney of Record**

Date: \_\_\_\_\_

(Exhibit 2)

**Certificate of Service**

I hereby certify that a true and correct copy of the foregoing pleading was served upon the respondent by [Date and manner of service].

Respondent's Counsel's Name  
U.S. Department of Justice  
Vaccine Litigation  
Torts Branch/Civil Division  
P.O. Box 146  
Ben Franklin Station  
Washington, D.C. 20044-0146

**Signature**

New Attorney of Record Name  
Firm Name  
Address  
City, State, Zip code  
Phone number  
Facsimile number  
Email Address