

MARYLAND OFFICE OF ADMINISTRATIVE HEARINGS
ADMINISTRATIVE LAW BUILDING - 11101 GILROY ROAD
HUNT VALLEY, MARYLAND 21031-1301
(410) 229-4100 – TTD: (410) 229-4267

**PETITION FOR SUPPLEMENTAL COMPENSATION UNDER SECTION 10-501 OF THE STATE FINANCE &
PROCUREMENT ARTICLE OF THE MARYLAND ANNOTATED CODE
(THE WALTER LOMAX ACT)**

(Print clearly or type)

*In the Matter of the Wrongful Conviction of _____ (Claimant[s]) v.
The Board of Public Works*

Address: _____
Street Name & No./Apt. No. City & State Zip Code

Telephone Number: _____ Email Address: _____

If you provide your email address, do you consent to the electronic delivery of notice to the email address
provided? Yes _____ No _____

Attorney* Information: _____
Name & Address

_____ Phone No. Email

*You are not required to be represented by an attorney.

PREVIOUS COMPENSATION INFORMATION

Date(s) on which previous compensation was awarded: _____

Amount of previous compensation: _____

Conviction* Date(s): _____

Length of Sentence: _____

Length of Confinement: _____

*The conviction must be for a felony.

NO FILING FEE IS REQUIRED FOR THIS TYPE OF HEARING.

Date

Signature

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that on this _____ day of _____, 20____, a copy of this Petition For Supplemental Compensation Under Section 10-501 of the State Finance & Procurement Article of the Maryland Annotated Code was served via first-class mail on the following individuals:

_____, the currently-serving State’s Attorney/State’s Attorney’s
designee for _____ County or Baltimore City (circle if applicable); and
_____, Attorney General of the State of Maryland/Attorney
General’s designee.

Signature