

NOTICE OF APPEAL

(ENTER NAME OF TRIAL COURT)

Plaintiff-Appell _____
- vs -

Defendant-Appell _____

Trial Court No. _____
Court of Appeals No. _____

Notice is hereby given that (name each Appellant) _____

appeals to the Eleventh District Court of Appeals from the trial court Judgment Entry time-stamped _____ (describe it and attach a copy of each Judgment Entry being appealed) _____

_____ Check here if court-appointed and attach copy of appointment and Financial Disclosure/Affidavit of Indigency.

_____ Check here if any co-counsel for Appellant and attach a separate sheet indicating name, address, telephone no. and fax no.

TRANSCRIPT INFORMATION - App. R. 9(B)

_____ I have ordered a complete transcript from the court reporter
Estimated completion date: _____ Estimated number of pages: _____
_____ I have ordered a partial transcript from the court
Estimated completion date: _____ Estimated number of pages: _____
_____ A statement pursuant to App. R. 9 (C) or (D) is to be prepared in lieu of a transcript.
_____ Videotapes to be filed. See App. R. 9(A) or (B)
_____ No transcript or statement pursuant to either App. R. 9(C) or (D) is necessary.
_____ Transcript has been completed and already made part of the record.

Date

Signature of Attorney or Appellant

Name

Address

City, State, Zip Code

Atty. Regis. No.

Telephone No.

Fax No.

E-Mail Address

**ELEVENTH DISTRICT COURT OF APPEALS
DOCKETING STATEMENT**

(To be attached to and filed with Notice of Appeal)

Plaintiff-Appell _____

Name of Trial Court _____

Trial Court No. _____

- vs -

Court of Appeals No. _____

Defendant-Appell _____

REGULAR CALENDAR

____ Case should be assigned to the Regular Calendar with full briefing.

ACCELERATED CALENDAR – (Check if this applies)

____ I have read Loc.App.R. 11. This appeal meets those requirements, and I request that it be briefed and decided on the Accelerated Calendar.

EXPEDITED APPEAL

____ This case should be heard as an expedited appeal as defined under App.R. 11.2 because: (State provision of App.R. 11.2 or applicable statute): _____

ORAL ARGUMENT

____ To expedite oral argument, I am willing to travel to whichever adjoining county in which the Eleventh District has the first available date.

____ I want oral argument in this appeal set in the county in which the appeal originates.

CASE TYPE

____ **A. Criminal.**

Specify nature of offense(s) (e.g., assault, burglary, rape): _____

- (1) Is the defendant presently in jail? ____ Yes ____ No. If the answer is "Yes," give date of incarceration _____. When is he/she due to be released (if you know)? _____.
- (2) Has a stay been filed in the trial court? ____ Yes ____ No. If granted, what are the terms? _____
- (3) Does the judgment entry comply with Crim.R. 32(C) by including the plea, verdict or findings, and a sentence? ____ Yes ____ No. If the answer is "No," this is not a final appealable order.

____ **B. Post-Conviction Relief.** Date of conviction: _____

____ **C. Civil.**

Specify cause(s) of action: _____

____ **D. App.R. 11.2 (Abortion, Adoption, or Termination of Parental Rights Appeal).**

PROBABLE ISSUE FOR REVIEW _____

THE FOLLOWING QUESTIONS APPLY TO ALL CIVIL AND ADMINISTRATIVE APPEALS

1. FINAL APPEALABLE ORDER

- (a) Has the trial court disposed of all claims by and against all parties?
_____ Yes (**Attach copies of all judgments and orders indicating that all claims against all parties have been concluded.**)
_____ No
- (b) If the answer to (a) is "No," has the trial court made an express determination that there is "no just reason for delay," pursuant to Civ.R. 54(B), with respect to the judgment or order from which the appeal is taken?
_____ Yes (Attach a copy of that order.)
_____ No
- (c) Is the judgment or order subject to immediate appeal under R.C. 2505.02? If so, set forth the specific provision(s) that authorize this appeal: _____
- (d) Does the right to an immediate appeal arise from a provision of a statute other than R.C. 2505.02? If so, identify that statute: _____

2. MEDIATION

- (a) Would a pre-hearing conference or mediation assist in the resolution of this matter?
_____ Yes _____ No _____ Maybe

Please explain (optional) _____

CERTIFICATE OF SERVICE: I certify that I have mailed or otherwise delivered a copy of this Docketing Statement to all counsel of record, or to the parties if unrepresented. The following is a listing of the name, address and telephone number of all counsel and the parties they represent and any parties not represented by counsel: (attach extra sheet if necessary)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

DATE _____ SIGNATURE _____