# SAMPLE FORM A

# **NOTICE OF APPEAL**

### **NOTICE OF APPEAL - INSTRUCTIONS**

In order to appeal you must be "aggrieved." To be "aggrieved" the lower court or administrative agency must have entered a judgment or order that affects your legal rights or costs you money. Usually you must have been a party in the case in the lower court. You may not appeal on behalf of a spouse, child or other relative (unless you are a legally appointed guardian), or a friend. The notice of appeal is filed in the superior court and should be accompanied by a check, money order or cash of \$655.00 which is the filing fee. Checks or money orders should be made payable to "Clerk, Court of Appeal." A second check or money order for \$100.00 made payable to "Clerk of the Superior Court" is a deposit for the clerk's transcript. This second check need not be included if you, as appellant, plan to prepare an appendix under CRC rule 8.124. If you do not have the money for the filing fee, an application for waiver of court fees and costs must accompany the notice of appeal. (See Sample Form D, for Application for Waiver of Court Fees and Costs.)

The Notice of Appeal form is available online in Adobe Acrobat PDF format and may be filled out electronically for free at http://www.courtinfo.ca.gov/cgi-bin/forms.cgi. Select "Appellate" forms, then click on Form APP-002.

#### Filling out the Notice of Appeal form:

### Caption

(1) In the "Attorney or Party Without Attorney" area at the top of the form, fill out your name, mailing address, and telephone number where you can be reached during the day.

(2) In the "Superior Court of California, County of" area of the form, specify the county, address, and branch name of the superior court that made the order or judgment you are appealing.

(3) In the next box on the form marked "PLAINTIFF/PETITIONER" and "DEFENDANT/RESPONDENT" fill out the plaintiff's name and defendant's name as they appear in the superior court case caption.

(4) Check the appropriate box for "Notice of Appeal" or "Notice of Cross-Appeal."

(5) In the "CASE NUMBER:" box immediately to the right, write the superior court case number.

#### Page 1

Entry 1. State the date of the judgment or order you are appealing and check the appropriate box to describe the order or judgment. If it is not listed, check the "Other" box, describe the order you are appealing, and specify the code section that authorizes the appeal.

Entry 2. Provide the requested information only if you are filing a cross-appeal.

Execution of Form. Write the date you are signing the Notice of Appeal, type or print your name legibly on the line at the bottom left of the page, and sign your name at the bottom right.

## **Page 2 - Proof of Service**

Have someone over the age of 18 who is not a party to the action serve the Notice of Appeal and fill out the Proof of Service on page 2 of the form. See instructions accompanying Sample Form C.

File:	Original plus fees in Superior Court Bring an extra copy to be file-stamped for your file
Serve:	All counsel All self-represented parties

	APP-00
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address):	FOR COURT USE ONLY
TELEPHONE NO.: FAX NO. (Optional):	
E-MAIL ADDRESS (Optional):	
ATTORNEY FOR (Name):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS:	
MAILING ADDRESS:	
CITY AND ZIP CODE:	
BRANCH NAME:	
PLAINTIFF/PETITIONER:	
DEFENDANT/RESPONDENT:	
	CASE NUMBER:
NOTICE OF APPEAL CROSS-APPEAL	
(UNLIMITED CIVIL CASE)	
Notice: Please read Information on Appeal Procedures for Unlimited Cit APP-001) before completing this form. This form must be filed in the sup I. NOTICE IS HEREBY GIVEN that (name):	
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Cal. Rules of Court, rule 8.100 www.courtinfo.ca.gov

American LegalNet, Inc. www.FormsWorkflow.com

CASE NAME:	CASE NUMBER:
NOTICE TO PARTIES: A copy of this document must be mailed or personally delivered THE APPEAL MAY NOT PERFORM THE MAILING OR DELIVERY HIMSELF OR HERS party to this appeal must complete the information below and mail (by first-class mail, post this document. When the front and back of this document have been completed and a cobe filed with the court.	SELF. A person who is at least 18 years old and is not a stage prepaid) or personally deliver the front and back of
PROOF OF SERVICE	
	I Service
1. At the time of service I was at least 18 years of age and not a party to this legal action	on.
2. My residence or business address is (specify):	
3. I mailed or personally delivered a copy of the Notice of Appeal/Cross-Appeal (Unlimite	d Civil Case) as follows (complete either a or b).
a. <b>Mail.</b> I am a resident of or employed in the county where the mailing occurre	, , , , ,
(1) I enclosed a copy in an envelope <b>and</b>	
(a) deposited the sealed envelope with the United States Postal S	Service, with the postage fully prepaid.
(b) placed the envelope for collection and mailing on the date and	
our ordinary business practices. I am readily familiar with this correspondence for mailing. On the same day that correspond deposited in the ordinary course of business with the United St postage fully prepaid.	business's practice for collecting and processing dence is placed for collection and mailing, it is
(2) The envelope was addressed and mailed as follows:	
(a) Name of person served:	
(b) Address on envelope:	
(c) Date of mailing:	
(d) Place of mailing (city and state):	
b. Personal delivery. I personally delivered a copy as follows:	
(1) Name of person served:	
(2) Address where delivered:	
(3) Date delivered:	
(4) Time delivered:	
I declare under penalty of perjury under the laws of the State of California that the foregoin	g is true and correct.
Date:	
(TYPE OR PRINT NAME)	(SIGNATURE OF DECLARANT)