NOTICE OF APPEAL

(EN	ITER NAME OF TR	RIAL COURT)
	Т	rial Court No.
Plaintiff-Appell - vs -	C	Court of Appeals No.
Defendant-Appell Notice is hereby given that (name each Appellant)		
appeals to the Eleventh District Court of Appeals fro		· · · · · · · · · · · · · · · · · · ·
Check here if court-appointed and attach copy appointment and Financial Disclosure/Affidavi	it of Indigency.	Check here if any co-counsel for Appellant and attach a separate sheet indicating name, address, telephone no. and fax no.
Counsel or Appellant is res	sponsible for o	INFORMATION - App. R. 9(B) Obtaining required information from of Appeal if a transcript will be ordered.
Estimated completion date:	а	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 ir	n lieu ofa transcript.
☐ Videotapes to be filed. See App. R. 9(A) or (B)		
☐ No transcript or statement pursuant to either App	o. R. 9(C) or (D)is necessary.
Transcript has been completed and already made	le part of the re	cord.
 Date	Signature of Atto	rney or Appellant
	Name	
	Address	
	City, State, Zip C	ode
	Atty. Regis. No.	
Admin/Forms/New NA.4 Revised 04/12/2010	Telephone No.	Fax No.

ELEVENTH DISTRICT COURT OF APPEALS DOCKETING STATEMENT

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

	Name of Trial Court
Plaintiff-Appell	- _ Trial Court No.
	_ Court of Appeals No.
	_
Defendant-Appell	_
REGULAR CALENDAR	_
Case should be assigned to the Regular Calendar with fu	ll briefing.
ACCELERATED CALENDAR - (Check if this applies)	
I have read Loc.R.11.1. This appeal meets those requirer Accelerated Calendar.	nents, and I request that it be briefed and decided on the
EXPEDITED APPEAL	
This case should be heard as an expedited appeal as def 11.2 or applicable statute):	ined under App.R. 11.2 because: (State provision of App.R.
 ORAL ARGUMENT To expedite oral argument, I am willing to travel to whicher available date. 	ever adjoining county in which the Eleventh District has the first
☐ I want oral argument in this appeal set in the county in w	nich 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	f 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) b	y including the plea, verdict or findings, and a sentence?
Yes No If the answer is "No," this is not a f	inal appealable order.
B. Post-Conviction Relief Date of Conviction:	
C. Civil	
Specify cause(s) of action:	
— Ann P. 11.2 (Abortion, Adoption, or Tormination of P.	avental Dialata Annaal)

PROBABLE ISSUE FOR REVIEW	

THE FOLLOWING QUESTIONS APPLY TO ALL CIVIL AND ADMINISTRATIVE APPEALS

1. FINAL APPEALABI	LE ORDER	
		nd against all parties? nd orders indicating that all claims against all parties have been
☐ No		
(b) If the answer to (a		made an express determination that there is "no just reason for delay," udgment or order from which the appeal is taken?
☐ Yes (Attach	a copy of that order.)	
☐ No		
(c) Is the judgment of authorize this app		opeal under R.C. 2505.02? If so, set forth the specific provision(s) that
(d) Does the right to	an immediate anneal arise fi	rom a provision of a statute other than R.C. 2505.02? If so, identify that
statute:	an inimodiate appear anse ii	on a provision of a statute office fram (N.S. 2000.02). If so, identity that
. MEDIATION		
(a) Would a pre-hear	ing conference or mediation	assist in the resolution of this matter?
☐ Yes	☐ No	☐ Maybe
Please explain (optio	onal)	
counsel of record, or	to the parties if unrepresent	e mailed or otherwise delivered a copy of this Docketing Statement to all ted. The following is a listing of the name, address and telephone number of al parties not represented by counsel: (attach extra sheet if necessary)
		
DATE		SIGNATURE

Admin/Forms/New Dkt Stmt. 4 Revised 04/26/2011

INSTRUCTIONS FOR SERVICE OF NOTICE OF APPEAL

		,
	Plaintiff-Appell	,
	- VS -	Trial Court No.
	Defendant-Appell	, ,
	PLEASE LIST ALL PARTIES AND	THEIR COUNSEL WHO ARE INVOLVED IN THE APPEAL
		RTS WILL MAKE SERVICE BY REGULAR MAIL.
1.	ATTORNEY'S NAME:	
	ATTY. REGIS. NO.:	
	ADDRESS:	
	PHONE NUMBER:	
	WHO THEY REPRESENT:	
2.	ATTORNEY'S NAME:	
	ATTY. REGIS. NO.:	
	ADDRESS:	
	PHONE NUMBER:	
	WHO THEY REPRESENT:	
3.	ATTORNEY'S NAME:	
	ATTY. REGIS. NO.:	
	ADDRESS:	
	PHONE NUMBER:	
	WHO THEY REPRESENT:	
ATTC	DRNEY FILING APPEAL	ATTY. REGIS. NO.
ADDF	RESS	PHONE NO.

(CONTINUE ON NEXT PAGE IF NEEDED)

4.	ATTORNEY'S NAME:	
	ATTY. REGIS. NO.:	
	ADDRESS:	
	ADDITEOU.	
	PHONE NUMBER:	
	WHO THEY REPRESENT:	
5.	ATTORNEY'S NAME:	
•	ATTY. REGIS. NO.:	
	ADDRESS:	
	PHONE NUMBER:	
	WHO THEY REPRESENT:	
6.	ATTORNEY'S NAME:	
	ATTY. REGIS. NO.:	
	ADDRESS:	
	DUONE NUMBER.	
	PHONE NUMBER:	
	WHO THEY REPRESENT:	
7.	ATTORNEY'S NAME:	
	ATTY. REGIS. NO.:	
	ADDRESS:	
	PHONE NUMBER:	
	WHO THEY REPRESENT:	