

Form 1. Notice of Appeal Tax, Civil, Family Court - (Except Juvenile Cases), and Probate

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA
NOTICE OF APPEAL (____ CROSS APPEAL)
TAX, CIVIL, FAMILY COURT - (EXCEPT JUVENILE CASES), AND
PROBATE**

Superior Court Case Caption: _____

Superior Court Case No.: _____

A. Notice is given that (person appealing) _____ is appealing an order/judgment from the:

Tax Division Civil Division Family Court Probate Division

1. Date of entry of judgment or order appealed from (if more than one judgment or order appealed, list all):

2. Filing date of any post-judgment motion: _____

3. Date of entry of post-judgment order: _____

4. Superior Court Judge: _____

5. Is the order final (*i.e.*, disposes of all claims and has been entered by a Superior Court Judge, not a Magistrate Judge)? YES NO

If no, state the basis for jurisdiction: _____

Has there been any other notice of appeal filed in this case: YES NO

If so, list the other appeal numbers: _____

6. If this case was consolidated with another case in this court, list the parties' names and the Superior Court case number: _____

B. Type of Case: Civil I Civil II Landlord and Tenant Neglect

Termination of Parental Rights Adoption Guardianship Mental Health

Probate Intervention Domestic Relations Mental Retardation

Paternity & Child Support Other: _____

C. Indicate Status of Case: Paid In Forma Pauperis CCAN

Was counsel appointed in the trial court? YES NO

(COMPLETE REVERSE SIDE)

- D.** Provide the names, addresses, and telephone numbers of all parties to be served. For persons represented by counsel, identify counsel and whom the counsel represents. For each person, state whether the person was a plaintiff or defendant in the Superior Court. *Attach additional pages if necessary.

Name	Address	Party Status (Plaintiff, Defendant)	Telephone No.
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- E.** Identify the portions of the transcript needed for appeal, including the date of the proceeding, the name of the Court Reporter (or state that the matter was recorded on tape if no Court Reporter was present), the courtroom number where the proceeding was held, and the date the transcript was ordered, or a motion was filed for preparation of the transcript. *Attach additional pages if needed.

Date of Proceeding/Portion	Reporter/Courtroom No.	Date ordered
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Check this box if no transcript is needed for this appeal.

- F.** Person filing appeal:
- Plaintiff Pro Se Defendant Pro Se
- Third Party/Intervenor Counsel for Plaintiff
- Counsel for Defendant

ATTACH A COPY OF THE ORDER, JUDGMENT OR DOCKET ENTRY FROM WHICH THIS APPEAL IS TAKEN

 Print Name of Appellant/Attorney Signature Bar No.

 Address Telephone Number

*Appellant is responsible for ordering and paying the fee for transcript(s) in the Court Reporting and Recording Division, Room 5500. If appellant has been granted In Forma Pauperis status, or had an attorney appointed by the Family Court, and transcript is needed for this appeal, appellant must file a Motion for Transcript in Court Reporting and Recording Division, Room 5500. That office number is (202) 879-1009. If that motion is granted, transcript will be prepared at no cost to appellant.