



# STATE OF RHODE ISLAND JUDICIARY

## DISTRICT COURT

### NOTICE OF APPEAL CIVIL CERTIFICATION ORDER

<b>In Re</b>	<b>Civil Action File Number</b>
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Name of Each Party and Attorney Filing Appeal	

<b>Date Case First Filed in the District Court</b>	<b>Date of Order Appealed From</b>
<b>Party Filing Appeal</b> <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Other: _____	<b>Trial Court Judge</b>

<b>TRIAL COURT ACTION APPEALED</b> <input type="checkbox"/> <b>NOAMH</b> Notice of Appeal	
<b>JUDGMENT FOR:</b> <input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent <input type="checkbox"/> Other	
<b>TRANSCRIPT STATUS</b> <input type="checkbox"/> Transcript* Ordered on: _____	<b>FILING FEE</b> Filing Fee Required: <input type="checkbox"/> Yes <input type="checkbox"/> No Appeal Filing Fee for Each Petitioner: \$150.00 Trial Court Receipt Number: _____
*Transcript shall be provided, at the expense of the State, no later than fifteen (15) days from the filing of the Notice of Appeal.	

/s/ _____ Attorney for <input type="checkbox"/> the Petitioner <input type="checkbox"/> the Respondent or <input type="checkbox"/> the Petitioner <input type="checkbox"/> the Respondent	<b>Rhode Island Bar Number:</b>
	<b>Date:</b>
<b>Telephone Number:</b>	