

CIVIL APPEAL INFORMATION SHEET

Page 2

| <u>Date(s) and Type(s) of All Proceedings:</u> | <u>Transcripts Necessary?</u> | <u>If yes, date Ordered</u> | <u>Court Reporter</u> |
|--|-----------------------------------|---------------------------------|---------------------------|
| _____ | <input type="checkbox"/> | _____ | _____ |
| _____ | <input type="checkbox"/> | _____ | _____ |
| _____ | <input type="checkbox"/> | _____ | _____ |
| _____ | <input type="checkbox"/> | _____ | _____ |
| _____ | <input type="checkbox"/> | _____ | _____ |

3. IS THIS A CROSS APPEAL? YES NO

If yes, Date Original Appeal Filed? _____

4. Was there a previous appeal in this case? YES NO

If yes, provide caption: _____

Supreme Court Case No.: _____

Citation, if included in a reporter: _____

Briefly identify issue and disposition: _____

5. To your knowledge, is there any case now pending or about to be brought before this Court or any other Court or Administrative Agency which:

a) Arises from substantially the same case or controversy as this appeal?

YES NO

b) Involves an issue that is substantially the same, similar or related to an issue in this appeal?

YES NO

IF YES to the above, please provide the Case No., Caption and Forum of the case.

6. Was an appeal or superseded bond ordered?

YES

NO

If yes, please provide: DATE OF ORDER _____ AMOUNT

OF BOND _____ AND DATE POSTED _____

7. ISSUES PROPOSED TO BE RAISED ON APPEAL:

(This statement is solely for assisting the Court in case management. It is not intended to preclude presentation of issues on appeal.)

a)

b)

c)

CERTIFICATE OF SERVICE: This is to certify that a copy of this Civil Appeal Information Sheet was served on each party or their counsel of record this _____ day of _____, _____

Counsel for the Appellant

Address:

Phone: _____