

**Form App. R. 9-1 Notice of Appeal**

IN THE INDIANA [SUPREME COURT/COURT OF APPEALS/TAX COURT]

**CAUSE NO.** \_\_\_\_\_

NAME,	)	
	)	
[Appellant/Petitioner],	)	[Appeal or Petition] from the
([Plaintiff/Defendant/Claimant/	)	[_____ Court or Administrative
Respondent below]),	)	Agency]
	)	
v.	)	Trial Court [or Administrative
	)	Agency number] Case No.: _____
NAME,	)	
	)	
[Appellee/Respondent],	)	The Honorable _____,
([Plaintiff/Defendant/Claimant/	)	Judge.
Respondent below]).	)	

**NOTICE OF APPEAL**

[insert whether this is an "expedited" appeal under App. R. 14.1]

**Party Information**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

The following party information *only if not represented by an attorney*:

Tel. No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Requesting service of orders and opinions of the Court by:

☐ E-mail or ☐ U.S. Mail (choose one)

*In forma pauperis:* ☐ Yes ☐ No

Attorney(s) representing party filing Notice of Appeal, if any:

Name: \_\_\_\_\_

Attorney # \_\_\_\_\_

Address: \_\_\_\_\_

Tel. No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Name: \_\_\_\_\_

Attorney # \_\_\_\_\_

Address: \_\_\_\_\_

Tel. No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Name: \_\_\_\_\_

Attorney # \_\_\_\_\_

Address: \_\_\_\_\_

Tel. No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Name: \_\_\_\_\_

Attorney # \_\_\_\_\_

Address: \_\_\_\_\_

Tel. No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

IMPORTANT: Each attorney specified above:

- (a) certifies that the contact information listed for him/her on the Indiana Supreme Court Roll of Attorneys is current and accurate as of the date this Notice of Appeal is filed;
- (b) acknowledges that all orders, opinions, and notices in this matter will be sent to the attorney at the email address(es) specified by the attorney on the Roll of Attorneys regardless of the contact information listed above for the attorney; and
- (c) understands that he/she is solely responsible for keeping his/her Roll of Attorneys contact information accurate, see Ind. Admis. Disc. R. 2(A).

Attorneys can review and update their Roll of Attorneys contact information on the Indiana Courts Portal

### INFORMATION FOR JUDGMENT/ORDER BEING APPEALED

Date of Judgment/Order being appealed: \_\_\_\_\_

Title of Judgment/Order being appealed: \_\_\_\_\_

Date Motion to Correct Error denied ☐ or deemed denied ☐, if applicable: \_\_\_\_\_

Was the Judgment/Order issued by:

- ☐ A magistrate as a final order under Ind. Code 33-23-5-5
- ☐ A magistrate and approved by trial judge on \_\_\_\_\_
- ☐ A trial court judge

Basis for Appellate Jurisdiction:

- ☐ Appeal from a Final Judgment, as defined by Appellate Rule 2(H) and 9(I)
- ☐ Appeal from an interlocutory order, taken as of right pursuant to Appellate Rule 14(A) or 14(D)
- ☐ Appeal from an interlocutory order, accepted by discretion pursuant to Appellate Rule 14(B)(3) or 14(C)(5)
- ☐ Expedited Appeal, taken pursuant to Appellate Rule 14.1

This appeal will be taken to:

- ☐ Court of Appeals of Indiana, pursuant to Appellate Rule 5
- ☐ Indiana Supreme Court, pursuant to Appellate Rule 4
  - ☐ This is an appeal in which a sentence of death or life imprisonment without parole is imposed under Ind. Code § 35-50-2-9 or a post conviction relief case in which the sentence was death
  - ☐ This is an interlocutory appeal authorized under Rule 14 involving the death penalty or a life without parole case raising a question of interpretation of Ind. Code § 35-50-2-9
  - ☐ This is an appeal from an order declaring a statute unconstitutional
  - ☐ This is an appeal involving a waiver of parental consent to abortion under Rule 62
  - ☐ This is an appeal involving mandate of funds

### Trial Court Clerk/Administrative Agency/Court Reporter Instructions

Pursuant to Appellate Rule 10 or 14.1(C), the clerk of [insert name of trial court or Administrative Agency] is requested to assemble the Clerk's Record, as defined in Appellate Rule 2(E).

Pursuant to Appellate Rule 11 or 14.1(C), the Court Reporter of the [insert name of the court or Administrative Agency] is requested to transcribe, certify, and file with the clerk of the [insert name of trial court or Administrative Agency] the following hearings of record, including exhibits: \_\_\_\_\_.

### Public Access

Was the entire trial court or agency record sealed or excluded from public access?

☐ Yes ☐ No

Was a portion of the trial court or agency record sealed or excluded from public access?

☐ Yes ☐ No

If yes, which provision in the Rules on Access to Court Records provides the basis for this exclusion:

\_\_\_\_\_.

If Rule 6 of the Rules on Access to Court Records provides the basis for this exclusion, was the trial court or agency order issued in accordance with the requirements of this rule?

☐ Yes ☐ No

### Appellate Alternative Dispute Resolution

If civil case, is Appellant willing to participate in Appellate Dispute Resolution?

☐ Yes ☐ No

If yes, provide a brief statement of the facts of the case. (Attach additional pages as needed.)

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### Attachments

The following SHALL be attached to this Notice of Appeal (in all appeals):

☐ Copy of judgment or order being appealed

The following SHALL be attached to this Notice of Appeal if applicable (check if applicable):

☐ Copy of the trial court or Administrative Agency's findings and conclusion (in civil cases)

☐ Copy of the sentencing order (in criminal cases)

☐ Order denying Motion to Correct Error or, if deemed denied, copy of Motion to Correct Error

☐ Copy of all orders and entries relating to the trial court or agency's decision to seal or exclude information from public access

☐ If proceeding pursuant to Appellate Rule 14(B)(3), copy of Order from Court of Appeals accepting jurisdiction over interlocutory appeal

☐ The documents required by Rule 40(C), if proceeding *in forma pauperis*

### Certification

By signing below, I certify that:

- (1) This case ☐ does ☐ does not involve an interlocutory appeal; issues of child custody, support, visitation, adoption, paternity, determination that a child is in need of services, termination of parental rights; or an appeal entitled to priority by rule or statute.
- (2) I have reviewed and complied, and will continue to comply, with the requirements of Appellate Rule 9(J), 23(F), and the Rules on Access to Court Records on appeal; and,
- (3) I will make satisfactory payment arrangements for any Transcripts ordered in this Notice of Appeal, as required by Appellate Rule 9(H).

Respectfully submitted,

\_\_\_\_\_  
[Insert Name of Attorney or *pro se* party]

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone number

\_\_\_\_\_  
Attorney Number (if represented by counsel)

### **CERTIFICATE OF FILING AND SERVICE**

I hereby certify that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, the foregoing was filed with the Clerk of the Indiana Supreme Court, Court of Appeals, and Tax Court.

I also certify that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, the foregoing was served by [insert specific means of service] upon:

[list names and addresses of:

- (1) counsel of record in the trial court/administrative agency;
- (2) the parties served as required by Appellate Rule 14.1(B)(2) and (4) (if applicable);
- (3) the Attorney General, if applicable under Appellate Rule 9(A)(3); and
- (4) any other persons required by statute.]

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[Signature]