

CIVIL NOTICE OF APPEAL – 9<sup>TH</sup> & 10<sup>TH</sup> JUDICIAL DISTRICTS

STATE OF NEW YORK

- CITY COURT
- COUNTY COURT
- DISTRICT COURT
- JUSTICE COURT
- TOWN COURT
- VILLAGE COURT

\_\_\_\_\_ X

INDEX NO.

- Plaintiff,
- Petitioner,

-against-

NOTICE  
OF  
APPEAL

- Defendant,
- Respondent.

\_\_\_\_\_ X

PLEASE TAKE NOTICE that the above named

- Plaintiff,
- Petitioner,
- Defendant,
- Respondent

hereby appeals to the Appellate Term of the Supreme Court for the Ninth and Tenth Judicial Districts from the  order  judgment of the:

- City Court, of \_\_\_\_\_, County of \_\_\_\_\_,
- County Court, of \_\_\_\_\_, County of \_\_\_\_\_,
- District Court, of \_\_\_\_\_, County of \_\_\_\_\_,
- Justice Court, of \_\_\_\_\_, County of \_\_\_\_\_,
- Town Court, of \_\_\_\_\_, County of \_\_\_\_\_,

entered in the office of the Clerk of said court on the \_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_ and this appeal is taken from:

- each and every part thereof.
- if only a part thereof, specify what parts of the order or judgment you wish to appeal.

DATED:

Yours,  
*(if pro se put your own name below)*

Name:  
Address:  
Telephone no.

Attorney for Appellant *(if represented by an attorney)*  
Name:  
Address:  
Telephone no.

TO: Opponent or Attorney (if opponent is represented by an attorney)  
AND Clerk of the Court