

STATE OF NEW YORK COUNTY OF _____
CITY COURT of _____

Plaintiff

vs.

Defendant

NOTICE OF APPEAL

City Court Docket No. _____

County Clerk Index No. _____
(if known)

PLEASE TAKE NOTICE THAT THE ABOVE NAMED _____
(Appellant)
HEREBY APPEALS TO THE _____ COUNTY COURT FROM THE
(name of county)
____ DECISION/ORDER or
____ JUDGEMENT

OF THE SMALL CLAIMS / COMMERCIAL CLAIMS PART OF THE _____ CITY
COURT ENTERED IN THE OFFICE OF THE CLERK OF SAID COURT ON THE _____
DAY OF _____ IN THE AMOUNT OF \$ _____

AND FROM EVERY PART THEREOF.

DATED: _____

Signature of Appellant

Address of Appellant

TO: 1. _____
Name of Opposing Party

Address of Opposing Party

2. _____
Name of Attorney for Opposing Party (if any)

Address of Attorney

3. _____ County Clerk
(name of county)