

(2/05) **CIVIL NOTICE OF APPEAL – 9TH & 10TH JUDICIAL DISTRICTS**
STATE OF NEW YORK
DISTRICT COURT, SUFFOLK COUNTY

_____ X INDEX NO. _____

_____ () Plaintiff,
_____ () Petitioner,

-against-

NOTICE OF APPEAL
(CIVIL)

_____ () 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:

District Court, _____ District, County of SUFFOLK,
entered in the office of the Clerk of said court on the ___ day of _____, 20__
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 self-represented 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)

Name: _____

Address: _____

TO: Appeals Clerk, District Court

Address: _____