

IN THE _____ COURT
_____ COUNTY, OHIO

STATE OF OHIO,

Case No. _____

Plaintiff-Appellee,

-vs-

NOTICE OF APPEAL

_____,

Defendant-Appellant.

Now comes _____ and hereby gives notice of appeal to the
Twelfth District Court of Appeals for _____ County, Ohio, from the judgment of the
_____ Court entered on the _____ day of _____,
20____.

Signature

Printed Name

Attorney Registration No.
(if applicable)

Address

Telephone No.

E-Mail Address

FORM 1
OHIO TWELFTH DISTRICT COURT OF APPEALS
CRIMINAL DOCKET STATEMENT

Revised 01/01/2010

APPEAL NUMBER _____
TRIAL COURT NO. _____
TRIAL COURT JUDGE _____

Parties:

Counsel:*

(Name & Supreme Court Registration No.)

(Address)

Plaintiff-Appellant/Appellee
(Circle designation)

(Telephone No.)

(E-mail address)

Filing appeal but not representing party on appeal

vs.

vs.

(Name & Supreme Court Registration No.)

(Address)

Defendant-Appellant/Appellee
(Circle designation)

(Telephone No.)

(E-mail address)

Filing appeal but not representing party on appeal

*** List at least one counsel for each party to the appeal. List any additional parties and/or attorneys on an attached sheet. If a party will be represented by more than one counsel, designate which counsel is to be primarily responsible for prosecuting the appeal and receiving notices and pleadings from the court and all other parties. See Loc.R. 9(A).**

1. This appeal should be assigned to:

- A. The **Regular Calendar** with Full Briefing
 - Transcript is more than 100 pages
 - Brief in excess of 15 pages is necessary to argue the issues adequately, or more than 15 days will be required to file the brief
 - Appeal concerns unique issues of law which will be of substantial precedential value in determination of similar cases
 - Other: _____

B. The **Accelerated Calendar**

- No transcript required
- Transcript consists of less than 100 pages, or is of such length that preparation time will not be a source of delay
- Record was made in an administrative hearing and was filed with the trial court
- All parties to the appeal agree to an assignment to the accelerated calendar and agree to comply with filing requirements of Loc.R. 6
- Other: _____

- | | YES | NO |
|---|--------------------------|--------------------------|
| 2. Was counsel appointed for trial? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Has counsel been appointed for appeal by trial court? (See Loc.R. 9[C]) | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Was Motion for Bond or Stay of Execution made in the trial court? (See Loc.R. 8) | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. If so, was the motion granted? | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Offense(s) convicted of: _____ | | |
| 7. Length of sentence: _____ | | |
| 8. Probable issues for review: _____ | | |
| 9. Was a presentence, psychiatric or other investigative report submitted to the court in writing before sentence was imposed? | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Type of record to be filed: | | |
| <input type="checkbox"/> Transcript of proceedings has been prepared and filed in the trial court. If this box is checked, the court will consider this to be a Loc.R. 5 notice for purposes of completing the record on appeal. | | |
| <input type="checkbox"/> Complete transcript of proceedings to be prepared Estimated length of transcript: _____ | | |
| <input type="checkbox"/> Partial transcript of proceedings Specify parts ordered: _____ | | |
| Estimated length of partial transcript: _____ | | |
| <input type="checkbox"/> Statement of evidence or agreed statement to be prepared [App.R. 9(C) or (D)] | | |
| 11. Time needed to complete transcript: _____ | | |
| 12. Time needed to file brief after record is complete (not to exceed 15 days for accelerated calendar cases): _____ | | |
| 13. List all related or pending appeals: _____ | | |

Counsel's Signature