## NOTICE OF APPEAL TO APPELLATE DIVISION, THIRD DEPARTMENT FROM ORDER OF FAMILY COURT

STATE OF NEW Y	ORK	
FAMILY COURT	COUNTY OF	<del></del>
In the Matter of	,	— NOTICE OF APPEAL Family Court
	Petitioner(s) ,	Docket No.
V		
	Respondent(s) .	
	Use lower Court caption)	<u></u>
Respondent(s)) hei	AKE NOTICE that the above named reby appeal(s) to the Supreme Court, Appealed the Court entered in the	ellate Division, Third Judicial
of	County, on the	day of, 20, which
and from each and Dated:	every part thereof.	
	(Signature)	
	(Address)	
	(Telephone)	
TO: Family C	ourt Clerk (Original)	
		_ _
		_
(also send	a copy to all other adverse parties and to t	_ he Attorney for the Child, if any)

Note: File with Family Court the original and two copies of the Notice of Appeal, together with one copy of a Pre-calendar statement and proof of service of these papers upon all adverse parties or their attorneys and the Attorney for the Child, if any; Serve one copy of the notice of appeal and one copy of the Pre-calendar statement upon all adverse parties or their attorneys and the Attorney for the Child, if any; Please note that Pre-calendar statements are not required in Family Court proceedings involving child abuse or neglect, juvenile delinquency or persons in need of supervision.

Revised: February 19, 2014

## Supreme Court of the State of New York Appellate Division: THIRD Judicial Department

Informational Statement (Pursuant to 22 NYCRR 1250.3 [a])

Case Title: Set forth the title of the case as it appears on the summons, notice of petition or order to show cause by which the matter was or is to be commenced, or as amended.				
- against -			Date Notice of Appeal Filed	
			For Appellate Division	
Case Type		Filing Type		
☐ Civil Action ☐ CPLR article 75 Arbitration	<ul><li>□ CPLR article 78 Proceed</li><li>□ Special Proceeding Oth</li><li>□ Habeas Corpus Proceed</li></ul>	er Original Proceed	☐ Executive Law § 298 ☐ CPLR 5704 Review  220-b w § 36	
Nature of Suit: Check up to	three of the following categor	ories which best reflect	the nature of the case.	
☐ Administrative Review	☐ Business Relationships	☐ Commercial	☐ Contracts	
☐ Declaratory Judgment	☐ Domestic Relations	☐ Election Law	☐ Estate Matters	
☐ Family Court	☐ Mortgage Foreclosure	☐ Miscellaneous	☐ Prisoner Discipline & Parole	
☐ Real Property (other than foreclosure)	☐ Statutory	☐ Taxation	□ Torts	

	Appeal			
Paper Appealed From (Check one only):		If an appeal has been taken from more than one order or		
		judgment by the filing of this notice of appeal, please		
			ation for each such order or	
			on a separate sheet of paper.	
☐ Amended Decree	☐ Determination	☐ Order	Resettled Order	
☐ Amended Judgement	☐ Finding	Order & Judgment	Ruling	
Amended Order	☐ Interlocutory Decree	☐ Partial Decree	$\square$ Other (specify):	
☐ Decision	☐ Interlocutory Judgment	☐ Resettled Decree		
☐ Decree	☐ Judgment	☐ Resettled Judgment		
Court:		County:		
Dated:		Entered:		
Judge (name in full):		Index No.:		
·	Post-Final	Trial:	If Yes: 🗌 Jury 🗌 Non-Jury	
	Prior Unperfected Appeal a	nd Related Case Informatio	n	
Are any appeals arising in the same ac	tion or proceeding currently	pending in the court?	☐ Yes ☐ No	
If Yes, please set forth the Appellate D		_		
	J	• • • • • • • • • • • • • • • • • • • •		
Where appropriate, indicate whether	there is any related action o	or proceeding now in any co	ourt of this or any other	
jurisdiction, and if so, the status of the	case:			
	Original Proce	eeding		
Commonand by	ausa	□ Writ of Hoboos Cornus	Date Filed:	
•	ause	· · · · · · · · · · · · · · · · · · ·	Date Filed.	
Statute authorizing commencement of	r proceeding in the Appellat	e Division:		
	Proceeding Transferred Durs	yuant to CDLD 7904/a)		
	Proceeding Transferred Purs	Suant to CPLR 7604(g)		
Court: County:				
Judge (name in full): Order of Transfer Date:				
	CPLR 5704 Review of	Ex Parte Order:		
Court:	Cou	unty:		
Judge (name in full): Dated:				
Description of	of Appeal, Proceeding or Ap	plication and Statement of	Issues	
Description: If an appeal, briefly descr	ihe the naner annealed from	m If the anneal is from an a	order specify the relief	
Description: If an appeal, briefly describe the paper appealed from. If the appeal is from an order, specify the relief requested and whether the motion was granted or denied. If an original proceeding commenced in this court or transferred				
pursuant to CPLR 7804(g), briefly describe the object of proceeding. If an application under CPLR 5704, briefly describe the				
nature of the ex parte order to be revi		o. II all application ander C	if strong accorde tile	
The second secon				
1				

Issues: Specify the issues proposed to be raised on the appeal, proceeding, or application for CPLR 5704 review, the grounds for reversal, or modification to be advanced and the specific relief sought on appeal.			
	Party Infor	mation	
	tions: Fill in the name of each party to the action or pro		
	, indicate the status of the party in the court of original ins		
	to be filed for a proceeding commenced in this court, fi	ll in only the party's name an	d his, her, or its status in this
court.			
No.	Party Name	Original Status	Appellate Division Status
1	rarey rearre	Original Status	Appendic Bitisien status
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			-
12			
13			
14			
15			
16			
17			
18			
18 19			
18			
18 19			

## Attorney Information

Instructions: Fill in the names of the attorneys or firms for the respective parties. If this form is to be filed with the notice of petition or order to show cause by which a special proceeding is to be commenced in the Appellate Division, only the name of the attorney for the petitioner need be provided. In the event that a litigant represents herself or himself, the box marked "Pro Se" must be checked and the appropriate information for that litigant must be supplied in the spaces provided.

Attorney/Firm Name:					
Address:					
City:	State:		Zip:	Telephone No:	
E-mail Address:					
Attorney Type:	☐ Retained	☐ Assigned [	$\square$ Government $\square$	Pro Se 🔲 Pro Hac Vice	
Party or Parties Represe	ented (set forth	party number(s) f	rom table above):		
Attorney/Firm Name:				(16   16   16   16   16   16   16   16	10° 1,46° 1,46° 1,46° 1,46° 1,46° 1,46° 1
Address:					
City:	State:		Zip:	Telephone No:	
E-mail Address:	·		•		
Attorney Type:	☐ Retained	☐ Assigned [	☐ Government ☐	Pro Se 🔲 Pro Hac Vice	
Party or Parties Represe	ented (set forth	party number(s) f	rom table above):		
Attorney/Firm Name:	00 (100 (100 (100 (100 (100 (100 (100 (		der (der (der (der (der (der (der (der (	(1.66   1.66   1.66   1.66   1.66   1.66   1.66   1.66   1.66   1.66   1.66   1.66   1.66   1.66   1.66   1.66	10 ; 10 ; 10 ; 10 ; 10 ; 10 ; 10 ;
Address:					
City:	State:		Zip:	Telephone No:	
E-mail Address:					
Attorney Type:	☐ Retained	☐ Assigned [	$\square$ Government $\square$	Pro Se 🗌 Pro Hac Vice	
Party or Parties Represe	ented (set forth	party number(s) f	rom table above):		
Attorney/Firm Name:				(16   16   16   16   16   16   16   16	10° 1,46° 1,46° 1,46° 1,46° 1,46° 1,46° 1
Address:					
City:	State:		Zip:	Telephone No:	
E-mail Address:					
Attorney Type:	☐ Retained	☐ Assigned [	☐ Government ☐	Pro Se 🔲 Pro Hac Vice	
Party or Parties Represe	ented (set forth	party number(s) f	rom table above):		
Attorney/Firm Name:	00 (100 (100 (100 (100 (100 (100 (100 (		der (der (der (der (der (der (der (der (	(1.66   1.66   1.66   1.66   1.66   1.66   1.66   1.66   1.66   1.66   1.66   1.66   1.66   1.66   1.66   1.66	10 ; 10 ; 10 ; 10 ; 10 ; 10 ; 10 ;
Address:					
City:	State:		Zip:	Telephone No:	
E-mail Address:					
Attorney Type:	☐ Retained	☐ Assigned [	☐ Government ☐	Pro Se 🔲 Pro Hac Vice	
Party or Parties Represe	ented (set forth p	party number(s) f	rom table above):		
Attorney/Firm Name:	0.10.10.10.10.10.10.10.10.10.10.10.10.10		# # # # # # # # # # # # # # # # # # #	7. day 1.	90 : 200 : 200 : 200 : 200 : 200 : 200 :
Address:					
City:	State:		Zip:	Telephone No:	
E-mail Address:					
Attorney Type:	☐ Retained	☐ Assigned [	☐ Government ☐	Pro Se 🔲 Pro Hac Vice	
Party or Parties Represe	ented (set forth	party number(s) f	rom table above):		<u></u>

## **AFFIDAVIT OF SERVICE OF MAILING**

STATE OF NEW YORK	<u>C</u>	)		
COUNTY OF	OUNTY OF) ss.:			
	, being duly sworn, c	leposes and says:	:	
On the da	ay of	, 20	, I served a true copy of the	
annexed	exed by mailing the same in a sealed envelope, with			
postage prepaid thereor	າ, in a post office or offic	ial depository of th	ne U.S. Postal Service within the	
		erson[s] to whom	you are mailing the papers being	
Name & Address Name & Address			Name & Address	
	(Signature)			
	(Print Name)			
Sworn to before me this	·			
day of	,			
Notary Public				

Revised: February 19, 2014