## PRE-CALENDAR STATEMENT State of New York Supreme Court – Appellate Division \_\_\_\_\_Judicial Department

**<u>Case Title</u>**: Set forth the full case title.

County Docket Nos.:

Date of Commencement:

**<u>Parties Involved</u>**: Set forth the full names of the original parties and any change in parties.

<u>Counsel for Appellant(s)</u>: Set forth the name, address, telephone number and facsimile number of counsel for appellant. OR Set forth the same information for *pro se* (unrepresented) appellant.

<u>Counsel for Respondent(s) and Counsel for Other Parties</u>: Set forth the name, address, telephone number and facsimile number of counsel for respondent(s) and for each other party.

<u>**Court, Judge and County:**</u> Identify the court, judge or justice, and the county from which the appeal is taken.

**Nature and Object of Action or Proceeding:** Concisely set forth the nature and object of the underlying action or proceeding.

(For example, modification of an order of child support. Petition for custody....)

**<u>Appellate Issue(s)</u>**: Set forth a clear and concise statement of the issue(s) to be raised on appeal, the grounds for reversal or modification to be advanced, and the specific relief sought on the appeal.

(For example, Did the court properly grant modification.)

<u>Other Related Matters</u>: Indicate if there is another related action or proceeding, identifying and briefly describing same. If none, state None.

Submitted by:

(sign above line, write name below line)

Date:

Attachments:

1. Copy of order or judgment appealed from. \_\_\_\_\_attached

2. Copy of opinion or decision.

3. Copy of notice of appeal or order Granting leave to appeal

Attach copies, not originals. File this original form with attachments when original notice of appeal is filed in the office where the judgment or order of court of original instance is entered. A copy of this document must be served upon all counsel and *pro se* parties.

## \_\_\_\_\_ does not exist

attached