KITSAP COUNTY DISTRICT COURT
STATE OF WASHINGTON

_____ ,

Plaintiff/Petitioner,

v.

_____ ,

Defendant/Respondent.

NO. _____

NOTICE OF APPEAL

___ **AMENDED**

1. <u>NAME OF PARTY WHO WANTS TO APPEAL</u> – _____
   ___ plaintiff/petitioner; ___ defendant/respondent, wants to appeal a Kitsap County District Court final decision by having the decision reviewed by the Kitsap County Superior Court.

2. <u>TYPE OF CASE</u> – The type of case being appealed is –

   ___ criminal;   ___ civil;   ___ infraction;   ___ small claims

3. <u>DECISION(S) BEING APPEALED</u> – The name of each decision being appealed must be listed –

   _____

4. <u>PLAINTIFF/PETITIONER CONTACT INFORMATION [not required if represented by attorney]</u> –
   Mailing Address –_____

5. <u>DEFENDANT/RESPONDENT CONTACT INFORMATION [not required if represented by attorney]</u> –
   Mailing Address –_____

6. <u>ATTORNEY FOR PLAINTIFF/PETITIONER [select one]</u> –

   ___   None.

   ___   Prosecutor's Office, 614 Division Street, MS-35, Port Orchard, WA 98366.

   ___   Name of Attorney – _____

   Attorney Address – _____

7. <u>ATTORNEY FOR DEFENDANT/RESPONDENT</u> [select one] –

___ None.

___ Office of Public Defense, 614 Division Street, MS-40, Port Orchard, WA 98366.

___ Name of Attorney – _____

Attorney's Address – _____

8. <u>REPRESENTATION ON APPEAL</u> –

___ <u>Motion For Court-Appointed Attorney (Criminal Appeal Only)</u>. Defendant moves for representation by a court-appointed attorney on appeal because the defendant is indigent. Defendant should promptly screen for counsel with the Kitsap County District Court, which will thereafter review the motion.

___ <u>Retain Counsel</u>. The appealing party will retain private counsel on appeal.

___ <u>Self Representation</u>. The appealing party will be self-represented on appeal.

9. <u>SERVICE OF NOTICE OF APPEAL ON ALL OTHER PARTIES</u> – The party filing this Notice of Appeal shall immediately serve a copy of this Notice of Appeal on all other parties and promptly file a Declaration Of Appellate Service in Kitsap County District Court.

DATED – _____

/s/ Signed Electronically _____

_____

[<u>Note</u> – By typing your name, you intend to sign electronically and agree your electronic signature is the same as a handwritten signature for the purpose of validity, enforceability, and admissibility.]