

		CAS	SE NUMBE	R:		
STATE OF ARIZONA	VS.					
)			
		Defend	ant(s) Name / Add	dress / Phone		
Di	DEFENDANT'S NOTICE OF APPEAL (CRIMINAL)					
The undersigned appeals from the fina	al order or final judg	ment in the abo	ve case as	follows:		
AB		Violation Code	Violation C		Violation Cod	le
Appellant understands the instructions Payment for preparation of the The right to post bond to stay Filing the required memorando	e record or transcrip enforcement of the	ot judgment unles:	s released			ce"
Appellant further acknowledges and urdismissal of the appeal and reinstatem			all stages i	n the app	eal process	may result in
The following address may be used fo	r all court notices.	The court will be	notified IN	WRITING	G of any cha	ange of addres
Defendant's current mailing address (r	nust be printed her	e, even if defend	lant is repr	esented b	by counsel):	
Defendant's current mailing address (r	nust be printed her	e, even if defend	lant is repro	esented t	oy counsel):	
	nust be printed her Address:		·			
Mailing City, S	Address:					
Mailing City, S Daytime Phone / Alternat	Address: state, Zip: e Phone: () -				
Mailing City, S Daytime Phone / Alternat	Address:) -				
Mailing City, S Daytime Phone / Alternat Defendant's dat	Address: state, Zip: e Phone: () -				
Mailing City, S Daytime Phone / Alternat Defendant's dat	Address: state, Zip: e Phone: () -)		
Mailing City, S Daytime Phone / Alternat Defendant's dat Date:	Address: State, Zip: e Phone: (te of birth) -)	-	
Mailing City, S Daytime Phone / Alternat Defendant's dat Date:	Address: State, Zip: se Phone: (te of birth ant Defendant's) - Attorney	() ————————————————————————————————————	- Bar No.	
Mailing City, S Daytime Phone / Alternat Defendant's dat Date:	Address:) - Attorney) 	- Bar No.	
Mailing City, S Daytime Phone / Alternat Defendant's dat Date:	Address:) - Attorney) 	- Bar No.	
Mailing City, S Daytime Phone / Alternat Defendant's dat Date:	Address:) - Attorney) 	- Bar No.	
Mailing City, S Daytime Phone / Alternat Defendant's dat Date:	Address:) - Attorney) 	- Bar No.	
Mailing City, S Daytime Phone / Alternat Defendant's dat Date: Defenda Attorney co	Address:) - Attorney) 	- Bar No.	
Mailing City, S Daytime Phone / Alternat Defendant's dat Date: Defenda Attorney co I CERTIFY that I mailed a cop to: Yavapai County Attorney's O Attorney for the State, Appea 255 E. Gurley Street Prescott, AZ 86301	Address:) - Attorney) 	- Bar No.	