CP-31-SA-	 

## Commonwealth of Pennsylvania Court of Common Pleas County of:



## Notice of Appeal from Summary Criminal Conviction

Judicial District
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Appellant Name:	Date:	Issuing Authority Docket Number:
Address:	Citation No:	
City: State: Zip:	Magisterial Dist	rict No:

A sentence of was imposed on: . Offense(s) of which convicted:

Grounds relied upon for appeal (except when the appeal is from a guilty plea or a conviction):

Date of entry of guilty plea, the conviction, or other final order from which appeal is taken:

Name and mailing citation or compla		ant as show on	If sentence includes fines, costs or restitution, amount paid, if any:
Affiant Name:			
Address:			Type or amount of bail or collateral furnished to issuing authority, if any:
City:	State:	Zip:	

Name and mailing address of issuing	g authority:	Name and address	s of attorney filing r	notice of appeal:
Issuing Authority:		Attorney Signature: Attorney Name (Prir	nted):	
Address:		Address:		
City: State:	Zip:	City:	State:	Zip:
ony. Otate.	ip:	Phone No:	Fax No:	
Phone No:		Supreme Court ID N	lumber:	

## NOTICE TO DEFENDANT:

If your appeal is from a motor vehicle conviction other than parking, have the clerk of courts certify this copy and mail to the following address:

PennDOT Correspondence Unit PO Box 68618 Harrisburg, PA 17106

I hereby certify that an appeal has been filed in the above-captioned case.

Clerk of Courts

## **CERTIFICATE OF COMPLIANCE**

I certify that this filing complies with the provisions of the *Public Access Policy of the Unified Judicial System of Pennsylvania: Case Records of the Appellate and Trial Courts* that require filing confidential information and documents differently than non-confidential information and documents.

Submitted by	/: _	
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Signature: \_\_\_\_\_

Name:
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Attorney No. (if applicable): \_\_\_\_\_