UNITED STATES DISTRICT COURT

FOR THE DISTRICT OF

Form 1. Notice of Appeal from a Judgment or Order of a United States District Court

U.S. District Court case number:

Notice is hereby given that the appellant(s) listed below hereby appeal(s) to the United States Court of Appeals for the Ninth Circuit.

Date case was first filed in U.S. District Court:
Date of judgment or order you are appealing:
Docket entry number of judgment or order you are appealing:
Fee paid for appeal? (appeal fees are paid at the U.S. District Court)
\bigcirc Yes \bigcirc No \bigcirc IFP was granted by U.S. District Court

List all Appellants (List each party filing the appeal. Do not use "et al." or other abbreviations.)

Is this a cross-appeal? \bigcirc Yes \bigcirc No
If yes, what is the first appeal case number?
Was there a previous appeal in this case? \bigcirc Yes \bigcirc No
If yes, what is the prior appeal case number?
Your mailing address (if pro se):
City: State: Zip Code:
Prisoner Inmate or A Number (if applicable):
Signature Date
Complete and file with the attached representation statement in the U.S. District Court
Feedback or questions about this form? Email us at <u>forms@ca9.uscourts.gov</u>
Form 1 Case 3:22-cv-00121-SLG Document 46 Filed 07/26/23 Page 1 of 3 Rev. 06/09/2022

UNITED STATES COURT OF APPEALS FOR THE NINTH CIRCUIT

Form 6. Representation Statement

Instructions for this form: http://www.ca9.uscourts.gov/forms/form06instructions.pdf

<u>Appellant(s)</u> (*List each party filing the appeal, do not use "et al." or other abbreviations.*) Name(s) of party/parties:

Name(s) of counsel (if any):
Address:
Telephone number(s):
Email(s):
Is counsel registered for Electronic Filing in the 9th Circuit? O Yes O No

<u>Appellee(s)</u> (List only the names of parties and counsel who will oppose you on appeal. List separately represented parties separately.)

Name(s) of party/parties:

Name(s) of counsel (if any):	

 Address:

 Telephone number(s):

 Email(s):

To list additional parties and/or counsel, use next page.

Feedback or questions about this form? Email us at <u>forms@ca9.uscourts.gov</u>

Continued list of parties and counsel: (attach additional pages as necessary)

<u>Appellants</u>

Name(s) of party/parties:

Name(s) of counsel (if any):
Address:
Telephone number(s):
Email(s):
Is counsel registered for Electronic Filing in the 9th Circuit? O Yes O No
Appellees Nome(a) of north/northese
Name(s) of party/parties:
Name(s) of counsel (if any):
Address:
Telephone number(s):
Email(s):
Name(s) of party/parties:
Name(a) of coursel (if any):
Name(s) of counsel (if any):
Address:
Telephone number(s):
Email(s):
Feedback or questions about this form? Email us at <u>forms@ca9.uscourts.gov</u>
Form 6 Case 3:22-cv-00121-SLG Document 46 Filed 07/26/23 Page 3 of 3