

My Name: _____
Address: _____
City, State, Zip: _____
Phone _____
E-Mail: _____

I am the Plaintiff
 Defendant
 Attorney for the Plaintiff and my bar number is: _____
 Defendant

In the Justice Court of Utah
Utah County
151 S. University Avenue, Suite 3300, Provo, UT 84601

<p>_____ Plaintiff</p> <p>vs.</p> <p>_____ Defendant</p> <p>And</p> <p>_____ Defendant</p>	<p>Notice of Appeal (Small Claims)</p> <p>Case Number: _____</p> <p>Judge: _____</p>
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By and through my attorney, (Attorney, check here if you are appearing for your client.)

I appeal the final judgment in this case to the District Court
(within 28 days after the dismissal or judgment)

I have not included any non-public information in this document.

I declare under penalty of Utah Code Section 78B-5-705 that everything stated in this document is true and correct.

Date: _____ Sign here ► _____
Type or printed name _____

Certificate of Service

I certify that I served a copy of this Notice of Appeal on the following people:

Person's Name	Method of Service	Served at this Address	Served on this date
(Other Party or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax) <input type="checkbox"/> Email (Person agreed to service by email) <input type="checkbox"/> Left at business (With Person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person or suitable age and discretion residing there)		
(Clerk of Court	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax) <input type="checkbox"/> Email (Person agreed to service by email) <input type="checkbox"/> Left at business (With Person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person or suitable age and discretion residing there)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax) <input type="checkbox"/> Email (Person agreed to service by email) <input type="checkbox"/> Left at business (With Person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person or suitable age and discretion residing there)		

Date: _____

Sign here ► _____

Type or printed name _____