

My Name _____
Address _____
City, State, Zip _____
Phone _____
E-mail _____

I am the Plaintiff
 Defendant
 Attorney for the Plaintiff Defendant and my Utah Bar number is _____

In the Duchesne County Justice Court of Utah
8th Judicial District Duchesne County
Court Address 799 E 1260 N, P.O. Box 15, Duchesne, UT 84021

Plaintiff

v.

Defendant

And

Defendant

Notice of Appeal

Case Number _____

Judge Clair M. Poulson

By and through my attorney, (Attorney, check here if you are appearing for your client.)

I appeal the final judgment entered in this case to the District Court.

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 ► _____

Typed 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 of suitable age and discretion residing there.)		
(Clerk of Court)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Electronic File		
	<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 of 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 of suitable age and discretion residing there.)		

Date _____ Sign here ► _____

Typed or printed name _____