**IN THE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ COURT**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_COUNTY, OHIO**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Trial Ct. Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Plaintiff**

 **Appellate Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **v.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Defendant**

 **CIVIL APPEAL DOCKETING STATEMENT**

TRIAL NO.

APPEAL NO.

DATE OF JUDGMENT/ORDER APPEALED FROM

DATE NOTICE OF APPEAL FILED

DATE NOTICE OF CROSS APPEAL FILED

DID THE JUDGMENT/ORDER DISPOSE OF ALL CLAIMS BY AND AGAINST ALL PARTIES? IF NOT DOES THE JUDGMENT INCLUDE A CERTIFICATION OF "NO JUST CAUSE FOR DELAY?" IF SO, IS THE JUDGMENT OTHERWISE FINAL? \_\_\_\_\_\_\_\_\_\_\_\_

**THIS APPEAL SHOULD BE ASSIGNED TO:**

 The regular calendar

 The accelerated calendar for the reason checked:

 1. No transcript required.

 2. Transcript consists of fifty or fewer pages, or is of such length

 that its preparation time will not be a source of delay.

 3. Agreed statement submitted in lieu of the record.

 4. Record was made in an administrative hearing and was filed with

 the trial court.

 5. All parties to the appeal agree to an assignment to the accelerated

 calendar.

ALTHOUGH THE APPEAL MEETS ONE OR MORE OF THE REASONS FOR ASSIGNMENT TO THE ACCELERATED CALENDAR, IT SHOULD NOT BE ASSIGNED TO THE ACCELERATED CALENDAR BECAUSE:

 1. Brief in excess of 15 pages (see Loc. R. 7) is necessary to set forth

 adequately the facts and argue the issues in the case.

 2. Appeal concerns unique issue of law which will be of substantial

 precedential value in the determination of similar cases.

 3. Other:

 **IDENTIFY THE PARTIES**

**APPELLANT'S NAME**:

**APPELLANT IS**: Plaintiff ( ) or Defendant ( ) or Other ( )\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**APPELLANT COUNSEL:** Name Address

 City/State

 Telephone

**APPELLEE COUNSEL:** Name Address City/State

 Telephone Represents  **(Use separate sheet if necessary)**

1. Type of Litigation

2. Trial Court Disposition

3. If this matter has been before this court previously, identify the previous case by case number.

4. Identify by case style and case number any case pending before this court or any other court or administrative agency which arises from substantially the same case or controversy as this appeal.

 (Signature) (Date)