

Commonwealth of Pennsylvania
Court of Common Pleas
County of: _____
_____ Judicial District



Notice of Appeal from Summary Criminal Conviction

Name and Address of Appellant:

_____ Zip _____

Date: _____

Issuing Authority Docket No: _____

Citation No: _____

Magisterial District 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 address of affiant as shown on
citation or complaint:

_____ Zip _____

If sentence includes fines, costs or restitution, amount
paid, if any:

Type or amount of bail or collateral furnished to issuing
authority, if any:

Name and mailing address of issuing authority:

Zip: _____ Phone No: _____

Name and address of attorney filing notice of
appeal:

(signature) _____

(printed name) _____

_____ Zip: _____

Supreme Court ID No: _____

Phone No: _____ Fax No: _____

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:

**PA Dept. of Transportation
Bureau of Licensing
PO Box 60037
Harrisburg, PA 17106**

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

Clerk Of Courts