

DISTRICT COURT OF WASHINGTON  
COUNTY OF SKAGIT

[ ] STATE OF WASHINGTON )  
 )  
[ ] CITY OF \_\_\_\_\_ ) NO. \_\_\_\_\_  
 )  
[ ] \_\_\_\_\_ ) Superior Court # \_\_\_\_\_  
 ) PLAINTIFF )  
 )  
 ) vs. ) NOTICE OF APPEAL AND  
 ) DETERMINATION OF APPEAL  
 ) [ ] CRIMINAL [ ] CIVIL  
 ) [ ] INFRACTION  
 )  
\_\_\_\_\_ )  
 ) DEFENDANT )

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1. The undersigned appellant was [ ] plaintiff [ ] defendant [ ] \_\_\_\_\_ in the above captioned case. Appellant seeks review in the Skagit County Superior Court of the decision of the Limited Jurisdiction Court entered \_\_\_\_\_ at a: [ ] pre-trial motion [ ] summary judgment [ ] 3.5/3.6 motion [ ] trial ([ ] jury [ ] non-jury [ ] stip. [ ] DP revocation) [ ] judgment NOV [ ] motion for reconsideration/new trial/60(b) [ ] other: \_\_\_\_\_
2. Appellant shall file and serve on all other parties within fourteen (14) days a designation of that part of the record required for review. Appellant shall pay the cost of preparing said record to the Skagit County District Court within ten (10) days of notification by the Clerk that the record is prepared.
3. Appellant shall prepare a transcript of the electronic record or the parties shall submit an agreed record, and the transcript or agreed record shall be filed in Superior Court with Appellant's brief.
4. Copies of this Notice shall immediately be served by appellant on all parties whose names and addresses are set forth on page 2 of this form.

PRESENTED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 201\_\_.

\_\_\_\_\_  
Attorney for Appellant Appellant

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DETERMINATION OF APPEAL

[ ] Criminal Appeal [ ] Civil Appeal [ ] Infraction Appeal

Filing Fee: (No filing fee required for a criminal case, provided, if the appeal is dismissed for failure to prosecute, or if the conviction is affirmed, then costs of \$230 will be imposed.)

[ ] \$230 fee required  
[ ] PAID [ ] Fee Not Paid [ ] Fee waived by attached order

DATED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 201\_\_.

\_\_\_\_\_  
CLERK OF THE DISTRICT COURT

ATTORNEY FOR APPELLANT:

\_\_\_\_\_  
Print/Type Name & Bar #

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State/Zip

APPELLANT:

\_\_\_\_\_  
Print/Type Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State/Zip

**PRINT/TYPE NAME AND ADDRESS OF ALL OTHER PARTIES AND ATTORNEYS**

\_\_\_\_\_  
Role

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
Role

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

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City/State/Zip

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Role

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Name

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Address

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City/State/Zip

\_\_\_\_\_  
Role

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Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State/Zip