

Court of the State of New York

County of \_\_\_\_\_

X

**NOTICE OF APPEAL**

Index No.:

v.

X

PLEASE TAKE NOTICE that *(insert appellant(s) name)* \_\_\_\_\_ hereby appeals to the Appellate Division of the Supreme Court of the State of New York, Fourth Judicial Department, from a(n) *(insert judgment, order, decree, decision, etc.)* \_\_\_\_\_ of the \_\_\_\_\_ Court, \_\_\_\_\_ County, dated \_\_\_\_\_.

Dated: \_\_\_\_\_, New York  
\_\_\_\_\_, \_\_\_\_\_, 200\_\_

Yours, etc.,

*Firm Name, Your Name, Address, Telephone*

To: *(Insert below the name and address of the clerk of the trial Court and the names and address of all adversaries)*