

Court of Appeals of Ohio Second Appellate District

TRIAL NO. _____

APPEAL NO. _____

RELATED APPEALS _____

CRIMINAL DOCKET STATEMENT

DIRECT APPEAL
 CROSS-APPEAL
 JOINT APPEAL

NOTE: A TIME-STAMPED COPY OF THE FINAL JUDGMENT BEING APPEALED MUST BE ATTACHED TO THIS STATEMENT.

<p>CASE CAPTION</p> <p>_____</p> <p style="text-align: center;">VERSUS</p> <p>_____</p> <p>Plaintiff-Appellant / Appellee (Circle Designation)</p> <p>_____</p> <p>Counsel for the State, S. Ct. Regis. No.</p> <p>_____</p> <p>Address</p> <p>_____</p> <p>Phone Number (List additional attorneys on bottom of this sheet.)</p>	<p>_____</p> <p>Defendant-Appellant / Appellee (Circle Designation)</p> <p>_____</p> <p>Counsel for Defendant, S. Ct. Regis. No.</p> <p>_____</p> <p>Address</p> <p>_____</p> <p>Phone Number (List additional attorneys on bottom of this sheet.)</p>
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HISTORY OF THE CASE: (Check appropriate box and provide requested information)

TRIAL COURT _____ DATES: JUDGMENT APPEALED _____ NOTICE OF APPEAL _____

COUNSEL APPOINTED FOR TRIAL? Yes No APPEAL: Yes No

IS SUBSTITUTE COUNSEL REQUESTED FOR APPEAL? Yes No

WAS STAY OF SENTENCE GRANTED BY THE TRIAL COURT? Yes No

IS A STAY REQUESTED OF THE COURT OF APPEALS: Yes No EXPEDITED PER LOC. R. 2.8(A)? Yes No

NATURE OF THE CASE:

MISDEMEANOR (TRIAL)
 FELONY (TRIAL)
 GUILTY/NO CONTEST PLEA

CHARGE _____ SENTENCE _____

PROBATION REVOCATION
 PRIOR CHARGE _____ SENTENCE _____

APPEAL BY STATE (R.C. 2945.67)
 OF RIGHT
 WITH LEAVE OF COURT (Discretionary)
 APP. R. 5 (Leave to file delayed appeal)

POST-CONVICTION RELIEF (R.C. 2953.21)
 WAS A HEARING HELD IN THE TRIAL COURT?
 Yes No Date _____

PROBABLE ISSUE(S) FOR REVIEW _____

THE RECORD (Indicate the type of record to be filed):

SUMMARY OF DOCKET AND JOURNAL ENTRIES ONLY (No transcript, App. R. 9(C) statement, or agreed statement will be filed).

STATEMENT OF THE RECORD PURSUANT TO APP. R. 9(C)
 AGREED STATEMENT OF THE RECORD PURSUANT TO APP. R. 9(D)

TRANSCRIPT OF PROCEEDINGS:
 Full Partial - (If partial, designate parts/dates of hearing) _____

NAME OF THE COURT REPORTER: _____
 PROJECTED DATE FOR FILING TRANSCRIPT: _____

NOTE: A COPY OF THE REQUEST FOR THE TRANSCRIPT MUST BE FILED WITH THE CLERK & A TIME-STAMPED COPY SERVED ON THE COURT REPORTER.

USE THIS SPACE FOR ADDITIONAL ATTORNEYS

<p>_____</p> <p>_____</p> <p>_____</p>	<p>_____</p> <p>_____</p> <p>_____</p>
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