GUADALUPE MUNICIPAL COURT
9241 South Avenida Del Yaqui | Guadalupe, Arizona 85283
https://guadalupecourt.org/ or (480) 505-5378 / (480) 505-5379 or FAX (480) 505-5377

State of Arizona
VS
Plaintiff,
Defendant

NOTICE OF APPEAL
[MISDEMEANOR CASE]

Docket No.: _____

Charge(s): _____

The undersigned appeals from the final order or final judgment in the above case as follows:

Appellant understands: (1) the instructions set forth in the "Notice of Right to Appeal," including payment for a copy of the record or transcript; (2) the need to post bond to stay enforcement of the judgment unless released on "own recognizance"; (3) filing an original and copy of the Appellant's Memorandum with the trial court; and (4) that failure to complete all stages in the appeal may result in the dismissal of the appeal and reinstatement of the trial court judgment.

The following address may be used for all court notices. The court will be notified IN WRITING of any change of address. Defendant's current mailing address must be PRINTED here, even if defendant is represented by counsel:

APPELLANT:

Address _____

City _____ State _____ Zip Code _____

Phone Number _____ E-mail _____

Attorney:

Address _____

City _____ State _____ Zip Code _____

Phone Number _____ E-mail _____

☐ I request a court appointed attorney for the appeal process. (Complete page 2 Financial Statement)

☐ I request a waived or reduced transcript fee for appeal purposes. (Complete page 2 Financial Statement)

Date: _____

Defendant or Attorney Signature: _____

Clear Form Print Form

GUADALUPE MUNICIPAL COURT
9241 South Avenida Del Yaqui | Guadalupe, Arizona 852863
(480) 505-5378

State of Arizona)
Plaintiff,)
VS)
)
)
Defendant)

FINANCIAL STATEMENT

Docket No.: _____

Instructions to the Defendant: you are to answer the following questions so the Judge can decide whether to grant your request.

How much can you pay each week for fees? _____

Marital Status: ☐ Married ☐ Single ☐ Widowed ☐ Separated ☐ Divorced

In addition to yourself, how many other persons do you support? Adults _____ Children _____

Who is your employer? _____

Employers Address? _____

How much are you paid (take-home pay)? _____ every: _____

Spouse's employer? _____

Employers Address? _____

How much is your spouse paid? _____ every: _____

Other family income: Source: _____ Amount: _____ Source: _____ Amount: _____

Year and make of vehicle 1: _____ Year and make of vehicle 2: _____

Other real or personal property _____ Value: _____ Property _____ Value: _____

Rent / Mortgage		Food:	
Car Payment(s)		Utilities:	
Credit Card(s)		Savings:	

Under the penalties of perjury, I declare that I have examined the above statements made by me, and to the best of my knowledge and belief, each and all are true and correct.

Date: _____ Defendant Signature: _____

Clear Form Print Form