



USCA DOCKET # (IF KNOWN)

**UNITED STATES COURT OF APPEALS FOR THE NINTH CIRCUIT
CIVIL APPEALS DOCKETING STATEMENT**

PLEASE ATTACH ADDITIONAL PAGES IF NECESSARY.

TITLE IN FULL:	DISTRICT: _____ JUDGE: _____	
	DISTRICT COURT NUMBER: _____	
	DATE NOTICE OF APPEAL FILED: _____	IS THIS A CROSS-APPEAL? <input checked="" type="checkbox"/> YES
	IF THIS MATTER HAS BEEN BEFORE THIS COURT PREVIOUSLY, PLEASE PROVIDE THE DOCKET NUMBER AND CITATION (IF ANY): _____	
BRIEF DESCRIPTION OF NATURE OF ACTION AND RESULT BELOW:		
PRINCIPAL ISSUES PROPOSED TO BE RAISED ON APPEAL:		
PLEASE IDENTIFY ANY OTHER LEGAL PROCEEDING THAT MAY HAVE A BEARING ON THIS CASE (INCLUDE PENDING DISTRICT COURT POST-JUDGMENT MOTIONS):		
DOES THIS APPEAL INVOLVE ANY OF THE FOLLOWING: <input checked="" type="checkbox"/> Possibility of settlement <input checked="" type="checkbox"/> Likelihood that intervening precedent will control outcome of appeal <input checked="" type="checkbox"/> Likelihood of a motion to expedite or to stay the appeal, or other procedural matters (Specify) _____ _____ <input checked="" type="checkbox"/> Any other information relevant to the inclusion of this case in the Mediation Program _____ _____ <input checked="" type="checkbox"/> Possibility parties would stipulate to binding award by Appellate Commissioner in lieu of submission to judges		
continued...		

LOWER COURT INFORMATION

JURISDICTION		DISTRICT COURT DISPOSITION	
FEDERAL	APPELLATE	TYPE OF JUDGMENT/ORDER APPEALED	RELIEF
<input type="checkbox"/> Federal Question <input type="checkbox"/> Diversity <input type="checkbox"/> Other (Specify):	<input type="checkbox"/> Final Decision of District Court <input type="checkbox"/> Interlocutory Decision Appealable As of Right <input type="checkbox"/> Interlocutory Order Certified by District Judge (Specify): <input type="checkbox"/> Other (Specify):	<input type="checkbox"/> Default Judgment <input type="checkbox"/> Dismissal/jurisdiction <input type="checkbox"/> Dismissal/merits <input type="checkbox"/> Summary Judgment <input type="checkbox"/> Judgment/court Decision <input type="checkbox"/> Judgment/jury Verdict <input type="checkbox"/> Declaratory Judgment <input type="checkbox"/> Judgment as a Matter of Law <input type="checkbox"/> Other (Specify):	<input type="checkbox"/> Damages: Sought \$ _____ Awarded \$ _____ <input type="checkbox"/> Injunctions: <input type="checkbox"/> Preliminary <input type="checkbox"/> Permanent <input type="checkbox"/> Granted <input type="checkbox"/> Denied <input type="checkbox"/> Attorney Fees: Sought \$ _____ Awarded \$ _____ <input type="checkbox"/> Pending <input type="checkbox"/> Costs: \$ _____

CERTIFICATION OF COUNSEL

I CERTIFY THAT:

1. Copies of Order/Judgment Appealed Form Are Attached.
2. A Current Service List or Representation Statement With Telephone and Fax Numbers Are Attached (See 9th Cir. Rule 3-2).
3. A Copy of This Civil Appeals Docketing Statement Was Served in Compliance with FRAP 25.
4. I Understand That Failure to Comply With These Filing Requirements May Result in Sanctions, Including Dismissal of This Appeal.

Signature

Date

COUNSEL WHO COMPLETED THIS FORM

NAME:

FIRM:

ADDRESS:

E-MAIL:

TELEPHONE:

FAX:

**×This Document Should Be Filed in The District Court With The Notice of Appeal×
 ×If Filed Late, it Should Be Filed Directly With the U.S. Court of Appeals×**