



ELECTRONICALLY FILED
1/31/2024 4:46 PM
03-CV-2023-000231.00
CIRCUIT COURT OF
MONTGOMERY COUNTY, ALABAMA
GINA J. ISHMAN, CLERK

State of Alabama
Unified Judicial System
Form ARAP-1 Rev. 10/2019

Notice of Appeal Cross Appeal to the
 SUPREME COURT OF ALABAMA
 ALABAMA COURT OF CIVIL APPEALS

IN THE _____ COURT OF _____ COUNTY, ALABAMA
(Circuit, District, or Juvenile) (Name of County)

Civil Action Number:

APPELLANT(S):

[The name of each party appealing must be listed – see Rule 3(c), Alabama Rules of Appellate Procedure. Attach additional pages if necessary.]

V. APPELLEE(S):

[The name of each party against whom appeal is taken must be listed – see Rule 3(c), Alabama Rules of Appellate Procedure. Attach additional pages if necessary.]

TRIAL JUDGE:

DATE OF JUDGMENT:

DATE OF POST-JUDGMENT ORDER:

Notice is Hereby Given that the above-named appellant(s) appeal(s) to the above-designated court from the Final Judgment Order _____ *(describe order)* entered in this cause.

CHECK THE PROPER DESCRIPTION OF THE APPEALED CASE UNDER THE APPROPRIATE COURT:

SUPREME COURT OF ALABAMA

- Summary judgment amount claimed more than \$50,000
- Judgment amount exceeds \$50,000
- Amount sought in trial court more than \$50,000, judgment for defendant
- Equitable relief, except for domestic relations
- Other: _____

ALABAMA COURT OF CIVIL APPEALS

- Summary judgment amount claimed \$50,000 or less
- Judgment amount \$50,000 or less
- Amount sought in trial court \$50,000 or less, judgment for defendant
- Workers' compensation
- Domestic relations
- Other: _____

APPELLANT FILES WITH THIS NOTICE OF APPEAL:

- Security for costs of appeal.
- A supersedeas bond in the amount of \$ _____.
- Deposited cash security of \$ _____.
- Is exempted by law from giving security for costs of appeal by virtue of _____ (Specify)

Filed _____
(Date)

(Name of Appellant or Attorney for Appellant)

(Address of Appellant or Attorney for Appellant)

_____, _____
(City) (State) (Zip)

(Telephone Number)

(E-mail Address)

CERTIFIED AS A TRUE COPY

(Certification is not required if the Notice of Appeal is filed electronically. See Rule 3(d)(3), Ala. R. App. P.)

(Signature of _____, Circuit Clerk)
(Printed Name)

(Signature of Appellant or Attorney for Appellant)

Form ARAP 1 (back)
Rev. 10/2019

Notice of Appeal to the Supreme Court of Alabama Alabama Court of Civil Appeals

SECURITY FOR COSTS*

We hereby acknowledge ourselves security for costs of appeal. For the payment of all costs secured by this undertaking, we hereby waive our right of exemption as to personal property under the Constitution and laws of the State of Alabama. Executed with our seals this

_____ day of _____, 20_____.
(Day) (Month) (Year)

Date Filed and Approved: _____

(Signature of _____)
Appellant-Principal (Printed Name)

(Signature of _____, Circuit Clerk)
(Printed Name)

(Signature of _____)
Surety (Printed Name)

*Note: If you are filing this Notice of Appeal electronically, the trial-court clerk's portion of the Security for Costs will be completed after the Notice of Appeal has been filed.

(Signature of _____)
Surety (Printed Name)

DESIGNATION OF THE RECORD ON APPEAL

Appellant(s) request(s) the clerk of the trial court to include the following checked materials in the clerk's record:

- Complaint
- Answer
- Counterclaim
- Cross-claim
- Third-party complaint
- Third-party answer
- Motion to dismiss
- Pretrial order
- Entire record (less items set forth in Rule 10(a), Alabama Rules of Appellate Procedure)
- Motion for summary judgment
- Opposition to motion for summary judgment
- Final judgment/order
- Motion for new trial
- Ruling on motion for new trial
- Others: _____
- Exhibit numbers: _____

TRANSCRIPT STATUS

- Transcript will not be ordered. See Rule 10(b), Alabama Rules of Appellate Procedure.
- Transcript will be ordered. See Rules 10(b)(2) and 11(a)(2), Alabama Rules of Appellate Procedure.

Name and address of court reporter(s): _____

NOTE: If more than one court reporter was involved in this case, you must file a Transcript Purchase Order Form in compliance with Rules 10(b)(2) and 11(a)(2), Alabama Rules of Appellate Procedure, and Form 1A or 1B.

CERTIFICATE OF FILING AND OF SERVICE

I certify I have this date filed electronically with the clerk of the trial court the foregoing notice of appeal through the trial court electronic-filing system **or** that I have this date hand-filed the original and _____ (number) copies of the foregoing notice of appeal (along with the \$200 docket fee) and such other instruments as have been completed and included herein. If I filed the notice of appeal electronically, I acknowledge that I must pay the \$200 docket fee *directly to the appropriate appellate court clerk within seven (7) days.*[†] A true or electronic copy of each of these items will be served by the clerk of the trial court or by the trial court's electronic-filing system on each of the following: (1) the clerk of the appellate court; (2) the court reporter; and (3) counsel for each appellee or the appellee if no counsel, as follows (provide names and addresses): _____

I further certify pursuant to Rules 3(d), 25(d), and 57(h)(5), Alabama Rules of Appellate Procedure, that I have this date served a copy of this Notice of Appeal on each party to the proceedings in the trial court in the manner indicated below (*attach additional pages if necessary*):

<u>Name</u>	<u>Method of Service (AlaFile, U.S. Mail, Hand Delivery, etc.)</u>	<u>Service Address[‡]</u>

[‡]If electronic service is selected, the e-mail address at which service was made via AlaFile must be listed as the service address.

Done on this _____ day of _____, 20_____.
(Day) (Month) (Year)

(Signature of Appellant or Attorney for Appellant)

(Printed Name)

[†]NOTE: If the Notice of Appeal is filed electronically, payment of the \$200 docket fee must be mailed or hand delivered to the attention of the clerk of the appropriate appellate court at 300 Dexter Avenue, Montgomery, AL 36104. The payment shall be accompanied by a means of identifying the appeal to which the payment is applicable. See Rule 35A(a)(1), Ala. R. App. P.



State of Alabama
Unified Judicial System
Form ARAP-25 (front) 10/2019

DOCKETING STATEMENT
Appeal to the Alabama Court of
Civil Appeals

NOTE: COMPLETED CIVIL CASE COVER SHEET MUST BE ATTACHED

COUNTY	CIVIL ACTION NUMBER	TRIAL JUDGE
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PARTY FILING APPEAL (Appellant) :

v. PARTY APPEALED AGAINST (Appellee)

APPELLANT'S ATTORNEY:

Email:

Address

City

Telephone Number

State

Zip Code

APPELLEE'S ATTORNEY:

Email:

Address

City

Telephone Number

State

Zip Code

TYPE OF APPEAL:

Appeal

Cross-Appeal

JURISDICTION (TYPE OF CASE): Please check the proper description of the appealed case:

- A** Summary Judgment, amount claimed equal to or less than \$ 50,000 **E** Workmen's Compensation
B Judgment Amount equal to or less than \$ 50,000 **F** Administrative Agency
C Amount Sought in trial court \$ 50,000 or less, judgment for defendant **G** Juvenile
D Domestic Relations **H** Other _____

JURISDICTION (FINALITY): Date of entry of judgment appealed from: _____
Month Day Year

1. Is the judgment or order appealed from in compliance with Rule 58, Ala. R. Civ. P.? Yes No
2. Is the order or judgment appealed from a final judgment (i.e., does it dispose of the case as to all claims by all parties) Yes No
3. If the judgment was not final, did the trial court direct the entry of a judgment pursuant to Rule 54(b), Ala. R. Civ. P.? Yes No
4. If judgment was entered pursuant to Rule 54(b), Ala. R. Civ. P., did the trial court expressly determine that there was no just reason for delay and expressly direct that judgment be entered? Yes No
5. If there is no final judgment or if there has not been full compliance with Rule 54(b), Ala. R. Civ. P., please explain the basis for seeking appellate review and cite the authority for the appeal:

POST-JUDGMENT MOTIONS: List all post-judgment motions by date of filing, type, and date of disposition (whether by trial court order or by the provisions of Rule 59.1, Ala. R. Civ. P.):

DATE OF FILING			TYPE OF POST-JUDGMENT MOTION	DATE OF DISPOSITION		
Month	Day	Year		Month	Day	Year

Form ARAP-25 (back) 10/2019 **DOCKETING STATEMENT Appeal to the Court of Civil Appeals**

CONSTITUTIONAL ISSUES: 1. Are the provisions of Rule 44, Ala. R. App. P., applicable to this appeal? Yes No
 2. If so, have the provisions been complied with? Yes No

NATURE OF CASE ON APPEAL: In the left column of boxes preceding the categories listed below, check the box (check only one) that best describes or categorizes the basis or theory of the primary issue on appeal. In the right column of boxes, check any secondary theories that are applicable to the suit. These topics need to be checked only if the issues on appeal vary from the information supplied in the same columns on the civil case "cover sheet" filed in the trial court.

<p>TORTS – Personal Injury</p> <p>A <input type="checkbox"/> <input type="checkbox"/> Bad Faith</p> <p>B <input type="checkbox"/> <input type="checkbox"/> Fraud</p> <p>C <input type="checkbox"/> <input type="checkbox"/> Legal Malpractice</p> <p>D <input type="checkbox"/> <input type="checkbox"/> Med. Malpractice</p> <p>E <input type="checkbox"/> <input type="checkbox"/> Other Malpractice</p> <p>F <input type="checkbox"/> <input type="checkbox"/> Products/AEMLD</p> <p>G <input type="checkbox"/> <input type="checkbox"/> Gen. Negligence</p> <p>H <input type="checkbox"/> <input type="checkbox"/> Vehicular Negligence</p> <p>I <input type="checkbox"/> <input type="checkbox"/> Other _____</p>	<p>TORTS – Property Damage</p> <p>J <input type="checkbox"/> <input type="checkbox"/> Personality</p> <p>K <input type="checkbox"/> <input type="checkbox"/> Realty</p> <p>CONTRACTS</p> <p>L <input type="checkbox"/> <input type="checkbox"/> Commercial</p> <p>M <input type="checkbox"/> <input type="checkbox"/> Personal</p> <p>N <input type="checkbox"/> <input type="checkbox"/> Pension</p> <p>O <input type="checkbox"/> <input type="checkbox"/> Insurance</p> <p>P <input type="checkbox"/> <input type="checkbox"/> Employment</p> <p>Q <input type="checkbox"/> <input type="checkbox"/> Other _____</p>	<p>R <input type="checkbox"/> <input type="checkbox"/> REAL PROPERTY</p> <p>S <input type="checkbox"/> <input type="checkbox"/> CIV RTS: Prisoner</p> <p>T <input type="checkbox"/> <input type="checkbox"/> CIV RTS: Other</p> <p>U <input type="checkbox"/> <input type="checkbox"/> Other _____</p> <p>EQUITY/Non-Damages Action</p> <p>V <input type="checkbox"/> <input type="checkbox"/> Domestic Relations</p> <p>W <input type="checkbox"/> <input type="checkbox"/> Declar. Judgment</p> <p>X <input type="checkbox"/> <input type="checkbox"/> Injunc. Commercial</p> <p>Y <input type="checkbox"/> <input type="checkbox"/> Injunc. Employment</p>	<p>Z <input type="checkbox"/> <input type="checkbox"/> Injunc. Other</p> <p>1 <input type="checkbox"/> <input type="checkbox"/> Extrord. Writ</p> <p>2 <input type="checkbox"/> <input type="checkbox"/> Other _____</p> <p>STATUTES/RULES</p> <p>3 <input type="checkbox"/> <input type="checkbox"/> Admin. Agency</p> <p>4 <input type="checkbox"/> <input type="checkbox"/> Term. Parental Rts.</p> <p>5 <input type="checkbox"/> <input type="checkbox"/> Workmen's Comp.</p> <p>6 <input type="checkbox"/> <input type="checkbox"/> Wrongful Death</p> <p>7 <input type="checkbox"/> <input type="checkbox"/> Other: _____</p>
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IF THE CASE WENT TO TRIAL, HOW MANY DAYS DID THE TRIAL TAKE? _____.

BRIEFLY SUMMARIZE THE ISSUE(S) ON APPEAL. THIS INFORMATION IS FOR CASE PROCESSING AND STATISTICAL PURPOSES ONLY.

WITHOUT ARGUMENT, BRIEFLY SUMMARIZE THE FACTS TO INFORM THE COURT OF THE NATURE OF THE CASE. THIS INFORMATION IS FOR CASE PROCESSING AND STATISTICAL PURPOSES ONLY.

SETTLEMENT CONFERENCE: The court may require that this appeal be subject to a moderated settlement conference. Do you think the case on appeal would be appropriate for such a conference? Yes No

Explain: _____

Date of Filing of the Notice of Appeal: _____

Date **Signature of Attorney / Party Filing this Form**

Certificate of Service

I certify I have this date filed electronically with the clerk of the trial court the foregoing docketing statement through the trial court electronic-filing system or that I have this date hand-filed the original and _____ (number) copies of the foregoing docketing statement. A true or electronic copy of the docketing statement will be served by the clerk of the trial court or by the trial court's electronic-filing system on each of the following: (1) the clerk of the appellate court; (2) the court reporter; and (3) attorney for each appellee or the appellee if no attorney as follows (provide names and addresses): _____

I further certify pursuant to Rules 3(d), 25(d), and 57(h)(5), Ala. R. App. P., that I have this date served a copy of this Notice of Appeal on each party to the proceedings in the trial court in the manner indicated below (attach additional pages if necessary):

Name of Party	Method of Service (US Mail, AlaFile, etc.)	Service Address
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

*If electronic service is selected, the e-mail address at which service was made via AlaFile must be listed as the service address.

 (Signature of Appellant or Attorney for Appellant) Date: _____, 20____.

 (Printed Name)



State of Alabama
Unified Judicial System

**TRANSCRIPT PURCHASE ORDER
OF APPELLANT – CIVIL**

Form ARAP-1A

Rev. 8/91

(See Rules 10(b) and 11(a) of the Alabama Rules of Appellate Procedure)

APPELLANT

v. APPELLEE

Civil Action Number

Trial Judge

Court Reporter

County

Date of Notice of Appeal

PART I. TO BE COMPLETED AND FILED WITH THE COURT REPORTER BY APPELLANT WITHIN 7 DAYS OF THE FILING OF THE NOTICE OF APPEAL.

A. Request is hereby made to the reporter for a transcript of the following proceedings (give particulars):

NOTE: exhibits are included in the clerk's record and need not be specified - see Rule 10 (b)(1), A.R.App.p.

Entire Transcript

Oral Charges to the Jury

Testimony of Plaintiff

Objection to Oral Charge

Testimony of Defendant

Objection to Refused Requested Written

Testimony of Witness _____

Charge(s), Numbers _____

Testimony of Witness _____

Others: _____

NOTE: Unless the entire transcript is ordered, appellant must attach a statement of the issues to pages 4 and 5.

B. I CERTIFY that I HAVE paid the Court Reporter the estimated cost of transcribing that part of the proceedings I have deemed necessary to be included in the record.

_____ Date

_____ Signature

_____ Telephone Number

NOTE: Upon Completion of PART I, appellant should distribute pages as follows:

* Pages 1, 2 and 3 – Court Reporter	Page 4 – Trial Court	Pages 5 – Appellee	Pages 6 – Retained by appellant
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PART II. TO BE COMPLETED BY COURT REPORTER ON SAME DATE TRANSCRIPT PURCHASE ORDER IS RECEIVED.

A.

Date Transcript Purchase Order Received

Estimated Completion Date

Estimated Number of Pages

Estimated Cost

B. I CERTIFY THAT I HAVE I HAVE NOT (*Check one*) been paid the estimated cost of the transcript.

_____ Date

_____ Signature

_____ Telephone Number

NOTE: Upon Completion of PART II, Court Reporter should distribute pages as follows:

* Pages 1 and 2 – Retained by the Court Reporter	Pages 3 – Transmitted to the Appropriate Appellate Court on Same Date Transcript Purchase Order is Received.
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PART III. CERTIFICATE OF COMPLETION OF REPORTER'S TRANSCRIPT

NOTE: This is to be completed by court reporter on date of filing of transcript in trial court. On the day of completion, this certificate must be forwarded to the appropriate appellate court (page 2) and copies thereof shall be served on the clerk of the trial court and each of the parties.

I CERTIFY that I have this date completed and filled with the clerk of the trial court the original of a true and correct transcript of the evidence and matters designated by the parties. All pages are numbered serially in the upper right corner of the pages, prefaced by an index, and ending with the following number: _____

I CERTIFY that photocopies of this certificate are this date being served on the clerk of the trial court and each of the parties, along with a copy of the index (with copies of the transcript as ordered).

Dated this _____ day of _____, _____

_____ Court Reporter

NOTE: Upon Completion of PART III, Court Reporter should distribute pages as follows:

* Pages 1 - Retained by the Court Reporter	Pages 2 – Transmitted to the Appropriate Appellate Court
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* Distribution Code:

Page 1: White

Page 2: Blue

Page 3: Green

Page 4: Canary

Page 5: Pink

Page 6: Goldenrod



EXHIBIT A TO NOTICE OF APPEAL

ADDITIONAL PARTIES SERVED (ELECTRONIC VIA ALAFILE)

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