

United States District Court  
for the District of

USCA8 No.  
\_\_\_\_\_

NOTICE OF APPEAL

United States of America,

*Plaintiff*

vs

\*  
\*  
\*  
\*  
\*  
\*  
\*  
\*  
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\*  
\*  
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\_\_\_\_\_  
District Court Docket Number

\_\_\_\_\_  
District Court Judge

*Defendant*

Notice is hereby given that \_\_\_\_\_ appeals to the United States Court of Appeals for the Eighth Circuit from the:  Judgment & Commitment  Order \_\_\_\_\_ (Specify) entered In this action on \_\_\_\_\_

\_\_\_\_\_  
Signature of Defendant's Counsel

\_\_\_\_\_  
Typed Name of Defendant's Counsel

\_\_\_\_\_  
Street Address Room Number

(\_\_\_\_\_) \_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
City State ZIP

\_\_\_\_\_  
Date

TRANSCRIPT ORDER FORM

TO BE COMPLETED BY ATTORNEY FOR APPELLANT

Please Prepare a transcript of:

- Pre-trial proceedings
- Testimony or
- Portions thereof
- Sentencing
- Post Trial Proceedings
- Other (Specify)

I am not ordering a transcript because:

- Previously Filed
- Other (Specify)

CERTIFICATE OF COMPLIANCE

Appellant hereby certifies that copies of this notice of appeal/transcript order form have been filed/served upon U.S. District Court, court reporter, and all counsel of record, and that satisfactory arrangements for payment of cost of transcripts ordered have been made with the court reporter. (FRAP 10(b)). Method of payment:  Funds,  CJA Form24 completed and attached.

Attorney's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Note: Complete all Items on Page Two**

INFORMATION SHEET

TO BE COMPLETED BY ATTORNEY FOR APPELLANT

1 Defendant's Address: \_\_\_\_\_

2. Date of Verdict \_\_\_\_\_ Jury  Non-Jury

Offenses: \_\_\_\_\_

Trial Testimony - Number of Days \_\_\_\_\_ Bail Status \_\_\_\_\_

3. Sentence and Date Imposed: \_\_\_\_\_

4. Appealing: sentence  Conviction  Both   
Challenging:  Application of Sentencing Guidelines  
 Constitutionality of Guidelines  
 Both Application and Constitutionality

5. Date Trial Transcript ordered by Counsel or District Court: \_\_\_\_\_

Stenographer in Charge: \_\_\_\_\_

(Name, Address,Phone)

6. Trial Counsel was:  Appointed  Retained  
Does Defendant's financial status warrant appointment of counsel on appeal?  
 Yes  No

Affidavit of Financial Status filed: \_\_\_\_\_

Is there any reason why trial counsel should not be appointed as counsel on appeal?  
 Yes  No

7. Assistant U.S. Attorney Name and Phone Number: \_\_\_\_\_

**Court Reporter Acknowledgment**

\_\_\_\_\_  
Date Order Received

\_\_\_\_\_  
Estimated Completion Date

\_\_\_\_\_  
Est Number of Pages

\_\_\_\_\_  
Court Reporter's Signature

\_\_\_\_\_  
Date