

UNITED STATES COURT OF APPEALS

FOR THE NINTH CIRCUIT

CIVIL APPEALS DOCKETING STATEMENT

INTERNAL USE ONLY

PLEASE TYPE OR PRINT. ATTACH ADDITIONAL PAGES IF NECESSARY

TITLE IN FULL:		DISTRICT:		JUDGE:	
		DATE COMPLAINT FILED:		DISTRICT COURT DOCKET NUMBER:	
		DATE NOTICE OF APPEAL FILED:		IS THIS A CROSS-APPEAL? YES NO	
		HAS THIS MATTER BEEN BEFORE THIS COURT PREVIOUSLY? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, STATE WHEN:			
		CITATION:		DOCKET NUMBER:	
CHECK AS MANY AS APPLY					
JURISDICTION			DISTRICT COURT DISPOSITION		
1. FEDERAL	2. APPELLATE	1. STAGE OF PROCEEDINGS	2. TYPE OF JUDGMENT/ ORDER APPEALED	3. 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"/> PRE-TRIAL <input type="checkbox"/> DURING TRIAL <input type="checkbox"/> AFTER TRIAL	<input type="checkbox"/> DEFAULT JUDGMENT <input type="checkbox"/> JUDGMENT/COURT DECISION <input type="checkbox"/> DISMISSAL/JURISDICTION <input type="checkbox"/> JUDGMENT/JURY VERDICT <input type="checkbox"/> DISMISSAL/MERITS <input type="checkbox"/> SUMMARY JUDGMENT <input type="checkbox"/> JUDGMENT NOV <input type="checkbox"/> DECLARATORY JUDGMENT <input type="checkbox"/> DIRECTED VERDICT <input type="checkbox"/> OTHER (SPECIFY)	<input type="checkbox"/> DAMAGES: AMOUNT SOUGHT \$_____ AMOUNT <input type="checkbox"/> GRANTED: <input type="checkbox"/> DENIED:\$_____ <input type="checkbox"/> INJUNCTIONS <input type="checkbox"/> PRELIMINARY OR <input type="checkbox"/> PERMANENT <input type="checkbox"/> GRANTED OR <input type="checkbox"/> DENIED	

BRIEF DESCRIPTION OF NATURE OF ACTION AND RESULT BELOW:

ISSUES PROPOSED TO BE RAISED ON APPEAL:

BASED ON YOUR PRESENT KNOWLEDGE:

Does this appeal involve a question of first impression? Yes No

Will the determination of this appeal turn on the interpretation or application of a particular case or statute?
 Yes No If yes, provide

Case name/statue: _____

Citation: _____

Docket number, if unreported: _____

Is there any case now pending or about to be filed in this court or any other court or administrative agency which:

a) Arises from substantially the same case or controversy as this appeal?
 Yes No

b) Involves an issue that is substantially the same, similar or related to an issue in this appeal?
 Yes No

Case name: _____

Citation: _____

Court or Agency: _____

Docket number, if unreported: _____

Will this appeal involve a conflict of law within the Ninth Circuit?
 Yes No

Among circuits? Yes No
If yes, explain briefly:

DOES THIS APPEAL INVOLVE ANY OF THE FOLLOWING:

Possibility of settlement;

Likelihood of a motion to expedite the appeal;

Multiple parties on either side for whom joint briefing is possible;

Likelihood of motions to intervene on appeal;

Likelihood of motions to file amicus briefs;

Likelihood of motions to stay appeal pending resolution of a related case. Identify case name, docket number and court or agency:

Other procedural complexities:

COUNSEL FOR APPELLANT(S):

NAME: _____

FIRM: _____

ADDRESS: _____

TELEPHONE: () _____

I CERTIFY THAT A COPY OF THIS CIVIL APPEALS DOCKETING STATEMENT WAS SUBMITTED TO THE CLERK OF DISTRICT COURT OR THE U.S. COURT OF APPEALS, AND THAT IT WAS SERVED ON EACH PARTY/COUNSEL SHOWN ON THE ATTACHED SERVICE LIST.

SIGNATURE

DATE

REMEMBER TO ATTACH COPIES OF ORDER/JUDGMENT APPEALED FROM AND SERVICE LIST WITH TELEPHONE NUMBERS