

**FIRST DISTRICT COURT OF APPEALS**

**CRIMINAL DOCKET STATEMENT**

**Notice:** Pursuant to Loc.R. 3.1(A)(2)(c), failure to file a completed docket statement may result in the dismissal of the appeal.

<b>Name of Trial Court:</b> _____  <b>Caption:</b>  _____ Plaintiff-Appellant <u>or</u> Appellee  vs.  _____ Defendant-Appellant <u>or</u> Appellee	<b>Appeal No.</b> _____  <b>Trial No.</b> _____  <b>Trial Judge</b> _____  <b>Date of Judgment(s) Being Appealed</b> _____  <b>Notice of appeal was filed in compliance with:</b> <input type="checkbox"/> App.R. 4(A) (within 30 days); or <input type="checkbox"/> App.R. 4(B) (time extended); or <input type="checkbox"/> App.R. 5 (delayed appeal)  <b>Related or Prior Appeals</b> _____ _____
--	---

**General**

Have you attached to the notice of appeal a copy of the final judgment being appealed? Yes ☐ No ☐

Is this an appeal from a juvenile delinquency proceeding? Yes ☐ No ☐

Is this an appeal from a ruling on a post-conviction petition? Yes ☐ No ☐

If a direct appeal, does the sentencing order contain the following four requirements: Yes ☐ No ☐

1. Fact of conviction for each count;
2. Separate sentence for each count;
3. Signature of trial court judge, and
4. File stamp of the clerk of courts?

Specify the type of action in the trial court: Traffic ☐ Misdemeanor ☐ Felony ☐

Resolution Type: Trial ☐ Plea ☐

Probable issues for review: \_\_\_\_\_

Type of Appeal: ☐ Defendant's appeal as of right ☐ State's appeal as of right  
☐ Defendant's appeal by leave of Court ☐ State's appeal by leave of Court  
☐ Victim's appeal

## **Parties**

If there are additional parties and/or attorneys, please copy this page, complete the information for the additional parties, and attach it to this statement.

Party's name_____	Party's name_____
Party's designation_____	Party's designation_____
Attorney's name_____	Attorney's name_____
Attorney's registration number_____	Attorney's registration number_____
Address of counsel or party_____	Address of counsel or party_____
_____	_____
Phone_____	Phone_____
Email_____	Email_____

## **Calendar Designation**

Please choose the appropriate calendar designation for this case.

**Regular Calendar:** Pursuant to Loc.R. 11.1(A), all appeals are placed on the regular calendar by default.

**Accelerated Calendar:** Do you wish instead to have your appeal assigned to the accelerated calendar?

Yes ☐ No ☐

If Yes, please identify the applicable factor(s) under Loc.R. 11.1(B) which support the assignment of the case to the accelerated calendar:\_\_\_\_\_

\_\_\_\_\_

**Expedited Calendar:** Must this case be expedited as being one of the following types of cases?

Yes ☐ No ☐

- ☐ Victim's interlocutory appeal [R.C. 2930.19]
- ☐ Prosecutorial appeals under Crim.R. 12(K) and Juv.R. 22 [App.R. 11.2(D)]
- ☐ Appeals concerning delinquent children [App.R. 11.2(D)]
- ☐ Denial of bail bond [R.C. 2937.222(D)]

## **Record**

This Docket Statement serves as a praecipe to the clerk of courts to prepare and transfer the record as specified below by the appellant:

- ☐ The record will consist of ONLY the original papers, exhibits, and a certified copy of the docket and journal entries that were filed in the trial court. [App.R. 9(A)]. **By checking this box, appellant acknowledges that no transcript(s) of proceedings are required to be prepared, and no App.R. 9(C) Statement or App.R. 9(D) Agreed Statement will be filed.**

- ☐ In addition to the original papers, exhibits, and a certified copy of the docket and journal entries that were filed in the trial court, the record will include (choose one):
- ☐ Complete Transcript of Proceedings under App.R. 9(B)\*
  - ☐ Partial Transcript of Proceedings under App.R. 9(B)\*
  - ☐ Statement under App.R. 9(C)
  - ☐ Agreed Statement under App.R. 9(D)
- ☐ **This is an appeal of a criminal sentence AND there was a **presentence, psychiatric, or other investigative report** that was submitted to the trial court in writing before the sentence was imposed, and appellant requests such report(s) to be made part of the record.**

**\*If the record will include transcript(s) of proceedings, please complete the following:**

- ☐ All transcripts of proceedings have already been prepared and filed in the trial court, and no additional transcripts will be filed.
- ☐ There are additional transcript(s) of proceedings that must still be prepared and filed.\*\*  
The transcript(s) of proceedings to be filed are (choose one):
- ☐ Complete Transcript of Proceedings [App.R. 9(B)].
  - ☐ Partial Transcript of Proceedings [App.R. 9(B)].

If partial, please provide a list of the hearing dates you will be ordering.

\_\_\_\_\_  
\_\_\_\_\_  
*If not currently known, indicate this on the lines above and file an amended docket statement when the dates become known.*

Note: If partial transcript is selected, appellant must comply with App.R. 9(B)(5). Appellee may follow App.R. 9(B)(5) if appellee considers transcripts or other parts of the proceedings necessary to the appeal.

**\*\*If there are transcript(s) of proceedings that must still be prepared and filed, the *Court Reporter's Certification* must be completed by the court reporter and appellant must comply with Loc.R. 9(B)(1) by attaching a copy of the transcript order to this docket statement.**

---

COURT REPORTER'S CERTIFICATION (to be signed by the court reporter)

---

Will the Court Reporter complete and file the requested transcript(s) of proceedings within 40 days of the filing of the notice of appeal (20 days if on the accelerated calendar)?

- ☐ Yes  
☐ No

If No, please explain why the transcript(s) of proceedings will not be ready for filing within 40 days from the notice of appeal (or 20 days for the accelerated calendar):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Estimated Date of Filing:** \_\_\_\_\_

Signature of Court Reporter: \_\_\_\_\_ Date: \_\_\_\_\_  
(Email authority of court reporter is permitted; if relying on email authority, please attach the email.)

**Certificate of Service**

I certify that a copy of this docket statement was served upon \_\_\_\_\_  
on \_\_\_\_\_ by the following method: \_\_\_\_\_.

\_\_\_\_\_  
**Signature**