**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.*

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

## 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
☐ Defendant's appeal by leave of Court
☐ Victim's appeal
☐ State's appeal as of right
☐ State's appeal by leave of Court

## 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(F) [App.R. 11.2(E)]
- ☐ Appeals concerning delinquent children [App.R. 11.2(E)]
- ☐ 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.** If this box is checked, proceed to the *Calendar Designation section*.

☐ 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:

- ☐ Complete Transcript of Proceedings under App.R. 9(B)*
- ☐ Partial Transcript of Proceedings under App.R. 9(B)*
- ☐ Statement under App.R. 9(C)—must be submitted to and approved by the trial court
- ☐ Agreed Statement under App.R. 9(D)—must be submitted to and approved by the trial court

☐ **This is an appeal of a criminal sentence AND** there was a **presentence, psychiatric, or other investigative (probation) 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 this box is checked, please refer to Loc.R. 9(C) and (D).*

***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. If this box is checked, proceed to the *Calendar Designation section.*

☐ 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.**

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

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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 a copy of this document was served upon:_____,
(person(s)/counsel served)

on _____ in the following manner: _____
(date sent) (how sent: i.e., mail or email)

to _____. **(Attach additional pages, if needed.)**
(address or email of where sent)

_____
***Signature***