IN THE COURT OF APPEALS
FIRST APPELLATE DISTRICT OF OHIO
HAMILTON COUNTY, OHIO

APPEAL NO. _____

_____

Appell

TRIAL NO. _____

vs

APPLICATION FOR RECONSIDERATION

_____

Appell

_____, respectfully moves this Court to reconsider

its decision of_____for the reasons below:

_____

_____

_____

_____

_____
(First and Last Name)

_____
(Address)

_____
(City, State, Zip Code)

_____
*(Email Address **and** Telephone Number)*

_____
Signature

CERTIFICATE OF SERVICE

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Signature