CERTIFICATE TO BE FILED WITH NOTICE OF APPEAL TO THE COURT OF APPEALS (CIVIL CASES)

	APPELLATE NO.		
	(To be filled in by COA)		
	TRIAL COURT NO		
	*	IN THE	COURT
(Appellant)			
VS.	*	OF	
	*		COUNTY, TX
(Appellee)			
The records of my of	ffice reflect the following in	formation in this ca	se:
CASE TYPE:			
DATE JUDGMENT OR APPEALABLE ORDER S	IGNED:		
DATE MOTION FOR NEW			
DATE NOTICE OF APPEAL FILED:			
DATE REQUEST FOR FINDINGS OF FACT FILE	ED:		
DATE REQUEST FOR REPORTER			
PRESIDING TRIAL COURT JUDGE:			
TRIAL COURT REPORTER(S):			
WAS APPELLANT DECLARED INDIGENT?:			
		YES	NO
APPELLANT'S COUNSEL IS:Retained	Appoint	ted	Pro Se
APPELLANT'S ATTORNEY:			

	ADDRESS:				
	TELEPHONE:			FAX:	
	EMAIL ADDRESS:				
	STATE BAR CARD NO.:				
APPELLEE'S ATT	ORNEY:				
	ADDRESS:				
	TELEPHONE:			FAX:	
	EMAIL ADDRESS:				
STATE	BAR CARD NO.:				
DATED THIS	DAY OF				<u>,</u> 20
5/(125 11115 <u></u>					<u>,</u> 20
		CLERK			
		BY:	•		
		ы:	DEPUTY CLER	RK	

(Complete in duplicate - Original to 12th Court of Appeals/Trial Court)
1517 W. Front Street, Suite 354, Tyler, TX 75702; www.12thcoa.courts.state.tx.us

***PLEASE ATTACH A FILE-MARKED COPY OF THE NOTICE OF APPEAL TO THIS FORM. PLEASE BE SURE THAT ALL OF THE REQUESTED INFORMATION IS COMPLETE. THANK YOU.

[Revised 9-8-14]