	IN THE INDIAN CAUSE NO.	APPEALS
Appellants,	,	) Appeal from
vs.		) ) Trial Ct Cause
Appellee,	,	) That Ct Cause
and		
		)
Appellee.		, )
		OF APPEAL earance)
Party Information Name: Address:		
= =	e of orders and opinions of the control of the cont	
Attorney or attorn supplied):	neys representing party fil	ling Notice of Appeal, if any (all fields must be
Attorney # 179 Address: 50	van L. Ciyou 906-49 E. 91 <sup>st</sup> Street, Suite 200 ianapolis, IN 46240	
Tel. No.: (31) Fax No.: (31)	7) 972-8000 7) 955-7100 you@ciyoudixonlaw.com	
	E. 91 <sup>st</sup> Street, Suite 200 ianapolis, IN 46240	
Tel. No.: (31	7) 972-8000 7) 955-7100	

INFORMATION FOR JUDGMENT/ORDER BEING APPEALED
Date of Judgment/Order being appealed:
Title of Judgment/Order being appealed: Findings of Fact and Conclusions of Law and
<u>Judgment</u>
Date Motion to Correct Error denied or deemed denied, if applicable: N/A
If case was heard by a magistrate, date trial judge approved judgment or order: <u>N/A</u>
Basis for Appellate Jurisdiction:
Appeal from a Final Judgment, as defined by Appellate Rule 2(H) and 9(I)
$\underline{X}$ Appeal from an interlocutory order, taken as of right pursuant to Appellate Rule $14(A),(C),(D)$
Appeal from an interlocutory order, accepted by discretion pursuant to Appellate Rule 14(B)(3)
Expedited Appeal, taken pursuant to Appellate Rule 14.1
This appeal will be taken to:
X Court of Appeals of Indiana, pursuant to Appellate Rule 5
☐ Indiana Supreme Court, pursuant to Appellate Rule 4
☐ This is an appeal in which a sentence of death or life imprisonment without
parole is imposed under Ind. Code § 35-50-2-9 or a post conviction relief case
in which the sentence was death
☐ This is an interlocutory appeal authorized under Rule 14 involving the death
penalty or a life without parole case raising a question of interpretation of Ind
Code § 35-50-2-9
This is an appeal from an order declaring a statute unconstitutional
This is an appeal involving a waiver of parental consent to abortion under Rule
62
☐ This is an appeal involving mandate of funds
Trial Court Clerk/Administrative Agency/Court Reporter Instructions
Pursuant to Appellate Rule 10 or 14.1(C), the clerk of Wells County is requested to assemble
the Clerk's Record, as defined in Appellate Rule 2(E).
Pursuant to Appellate Rule 11 or 14.1(C), the court reporter of the Wells County Circuit
Court is requested to transcribe, certify, and file with the clerk of Wells County the following
hearing of record, including exhibits:
Public Access
Was the entire trial court or agency record sealed or excluded from public access?
Yes X No
Was a portion of the trial court or agency record sealed or excluded from public access?
Yes X No
If yes, which provision in Administrative Rule 9(G) provides the basis for this exclusion:
If Administrative Rule 9(G)(1)(c) provides the basis for this exclusion, was the trial court or
agency order issued in accordance with the requirements of Administrative Rule 9(H)?
☐ Yes ☐ No

Appellate Alternative Dispute Resolution		
If civil case, is Appellant willing to participate in Ap  Yes X No	ppellate Dispute Resolution?	
If yes, provide a brief statement of the facts of the ca	ase. (Attach additional pages as needed.)	
Attachments		
The following SHALL be attached to this Notice of	11 /	
X Copy of judgment or order being appealed		
The following SHALL be attached to this Notice of applicable):	Appeal if applicable (check if	
Copy of the trial court or Administrative Age	ency's findings and conclusion (in civil	
cases)		
Copy of the sentencing order (in criminal case)		
Order denying Motion to Correct Error or, in	f deemed denied, copy of Motion to	
Correct Error  Copy of all orders and entries relating to the	trial court or agency's decision to seal or	
exclude information from public access	that court of agency's decision to sear of	
☐ If proceeding pursuant to Appellate Rule 14(	(B)(3), copy of Order from Court of	
Appeals accepting jurisdiction over interlocu	itory appeal	
The documents required by Rule $40(C)$ , if pr	roceeding in forma pauperis	
Certification		
By signing below, I certify that: (1) This case $\underline{X}$ does $\square$ does not involve an in	starlocutory appeals issues of child	
custody, support, visitation, adoption, patern of services, termination of parental rights; or	nity, determination that a child is in need	
statute.	1 7 7	
(2) I have reviewed and complied, and will cont		
Appellate Rule 9(J) and Administrative Rule		
(3) I will make satisfactory payment arrangements for any Transcripts ordered in this Notice of Appeal, as required by Appellate Rule 9(H).		
Notice of Appeal, as required by Appenate P	Xule 9(11).	
Res	spectfully submitted,	
/\$/	Bryan L. Ciyou	
	yan L. Ciyou	
·	-	
<u>/s/</u>		
CI	YOU & DIXON, P.C.	

50 East 91st Street, Suite 200 Indianapolis, Indiana 46240 (317) 972-8000 **ATTORNEYS FOR APPELLANTS** 

## **CERTIFICATE OF FILING AND SERVICE**



