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| **STATE OF WISCONSIN, CIRCUIT COURT,** **COUNTY** |  |
|       )      ,)) (party designation)       ))-vs- )) | Notice of Appeal |
|       )      ,)) (party designation)       ) | Case No.        |
|  |
|  Notice is hereby given that (Name of party filing appeal)       appeals to the Court of Appeals, District       , from [Choose one] [ ]  the whole [ ]  a part of the final judgmentor order, entered on (Date)       in the circuit court for       County, theHonorable (Name of Judge)       , presiding, infavor of (Name of party opposing appeal)       , and against(Name of party filing appeal)       , wherein the court (Describe judgment or order)      . |
|  |
| **NOTE:** If this is an appeal under §809.30 or §809.32, also include the following [*see* §809.10(1)]: |
| * If a postconviction motion was not filed, state the date of service of the last transcript or service of a copy of the circuit court case record.

 If a postconviction motion was filed, state the date of the order deciding the postconviction motion(s). |
| * If the Court of Appeals established any other filing deadline, state it.
 |
| **If counsel is appointed under ch. 977, a copy of the order appointing counsel should be attached to the notice of appeal.** |
|  |
| This [Choose one][ ]  is [ ]  is not an appeal within Wisconsin Statutes §752.31(2). |
| This [Choose one][ ]  is [ ]  is not an appeal to be given preference in the circuit court or court of appeals pursuant to statute. |
|  |
| Date:        |
|  |
| Signature of Filing Attorney or Party      | Telephone Number      | State Bar Number (if applicable)      |
| Name Printed or Typed      | Email Address (if any)      |
| Address       |
|  |
| This completed form must be *filed* with the clerk of the circuit court in which the judgment or order appealed from was entered. In addition, copies of this completed form must be served upon the following: |
| 1. Opposing counsel; and
 |
| 1. any other party.
 |
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| The clerk of circuit court shall forward this form to the Court of Appeals. |