County of Carbon COURT OF COMMON PLEAS CLERK OF COURTS

Criminal Division and Collections Division

Tyra L. Boni, Clerk of Courts



P.O. BOX 107 JIM THORPE, PA 18229 570-325-3637 FAX 570-325-5705

Attached please find a copy of the **Notice of Appeal from Summary Criminal Conviction** to be completed. Ensure that all necessary information is included.

- A. You have the right to appeal the District Judge's decision to the Carbon County Court of Common Pleas within (30)days from the date of conviction. If past (30)days, you will need to file a Nunc Pro Tune prior to filing a Summary Appeal.
- B. The non-refundable filing fee for an appeal is \$57.45 made payable to the Carbon County Clerk of Courts in the form of cash, check, or money order.
- C. You must include your current mailing address, as you will be notified via First Class mail of your hearing date.
- D. You must include the **docket number(s)** of the case(s) that you wish to appeal.

If you have any questions, feel free to contact my office.

Regards,

Tyra L. Boni

Tyra L. Boni, Clerk of Courts

Commonwealth of Pennsylvania Court of Common Pleas County of Carbon 56th Judicial District



Notice of Appeal from Summary Criminal Conviction

COMMONWEALTH OF PENNSYLVANIA v.

Carbon County Clerk of Courts
P.O. Box 107
Jim Thorpe, PA 18229
PH: 570-325-3637

		_
Name and address of appellant:		Date:
		Issuing Authority Docket No.:
		Citation No.:
	Zip	Magisterial District No.:
-	ZIP	
A sentence of		was imposed or
	Offense(s)	of which convicted:
Grounds relied upon for app	peal (except when the appeal is fro	om a guilty plea or a conviction):
D + (+ ())		
Date of entry of guilty plea,	the conviction, or other final order	from which appeal is taken:
Name and mailing address of affiant as shown on citation or compliant:		If sentence includes fines, costs, or restitution, amount
		paid, if any:
		Type or amount of bail or collateral furnished to issuing authority, if any:
	Zip	authority, if any.
Name and mailing address of issuing authority:		Name and address of attorney filing notice of appeal:
		Signature
-	-	Name
p.	Zip	Zip
Phone No		Supreme Court ID No.
		Phone No Fax No
I certify that this filing co	omplies with the provisions of the F	Public Access Policy of the Unified Judicial System of
	2.0 S	ourts that require filing confidential information and documents
differently than non-con	nfidential information and document	ts.
		Signature of the Filer
NOTICE TO DEFENDANT:		-
	r vehicle conviction other than park	king, have the clerk of courts certify this copy and mail to
he following address:	PennDOT	
	Correspondence Unit PO Box 68618	
	Harrisburg, PA 17106	
hereby certify that an appea	al has been filed in the above-caption	oned case.
		Clerk Of Courts