

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 Magisterial 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 Tunc petition 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



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:

_____ Zip _____

Date: _____
Issuing Authority Docket No.: _____
Citation No.: _____
Magisterial District No.: _____

A sentence of _____ was imposed on _____ . Offense(s) of which convicted: _____

Grounds relied upon for appeal (except when the appeal is from a guilty plea or a conviction): _____

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:

_____ Zip _____

If sentence includes fines, costs, or restitution, amount paid, if any:

Type or amount of bail or collateral furnished to issuing authority, if any:

Name and mailing address of issuing authority:

_____ Zip _____
Phone No. _____

Name and address of attorney filing notice of appeal:
Signature _____
Name _____
_____ Zip _____
Supreme Court ID No. _____
Phone No. _____ Fax No. _____

I certify that this filing complies with the provisions of the Public Access Policy of the Unified Judicial System of Pennsylvania: Case Records of the Appellate and Trial Courts that require filing confidential information and documents differently than non-confidential information and documents.

Signature of the Filer

NOTICE TO DEFENDANT:

If your appeal is from a motor vehicle conviction other than parking, have the clerk of courts certify this copy and mail to the following address:

**PennDOT
Correspondence Unit
PO Box 68618
Harrisburg, PA 17106**

I hereby certify that an appeal has been filed in the above-captioned case.

Clerk Of Courts

