

**SUPERIOR COURT OF WASHINGTON  
COUNTY OF WHATCOM**

State of Washington,  
City of Bellingham,

Plaintiff

vs.

Respondent, Defendant

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Bellingham Municipal Court Case No.

Superior Court Case No.

**NOTICE OF APPEAL TO SUPERIOR  
COURT AND CERTIFICATION OF  
FILING STATUS**

1. Appellant, \_\_\_\_\_, the named (plaintiff) (defendant) above seeks review by the Superior Court of the Bellingham Municipal Court decision in cause number \_\_\_\_\_ entered on the date of \_\_\_\_\_.
2. Specific errors of law claimed are:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. **Within 14 days** the Appellant will file and serve on all other parties a designation of the part of the record that needs to be transmitted to the Superior Court. Appellant shall pay for the cost of preparing the record to the Clerk of Bellingham Municipal Court **within 10 days** of notification by the Clerk that the record is ready unless payment has been waived by the Bellingham Municipal Court (RALJ6.2(a)).
4. Appellant shall transcribe the electronic recording of proceedings in accordance with RALJ6.3A(a), and shall file the transcript of the record with the Superior Court in accordance with LRLJ4.1(a).
5. Copies of this notice must be served on all other parties.

## CERTIFICATION OF STATUS

This is designated:

- \_\_\_\_\_ A criminal appeal for which no filing fee is required (RCW 10.10.060).
- \_\_\_\_\_ A civil, infraction, parking or contempt appeal for which a filing fee must be paid before the Notice of Appeal will be accepted for filing (RALJ2.4(b)).
- \_\_\_\_\_ A civil, infraction or parking appeal for which an In Forma Pauperis Petition has been granted and the filing fee is waived (RCW 36.18.022).

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
Bellingham Municipal Court Clerk

Presented this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
Appellant's Attorney

\_\_\_\_\_  
Appellant's Signature

\_\_\_\_\_  
Print Attorney's Name and Bar Number

\_\_\_\_\_  
Print Appellant's Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City                      State                      Zip Code

\_\_\_\_\_  
City                      State                      Zip Code

\_\_\_\_\_  
Print Respondent's Name and Counsel, if known

\_\_\_\_\_  
Address

\_\_\_\_\_  
City                      State                      Zip Code