

ATTORNEY OR PARTY WITHOUT ATTORNEY: _____ STATE BAR NO.: _____ NAME: FIRM NAME: STREET ADDRESS: CITY: _____ STATE: _____ ZIP CODE: _____ TELEPHONE NO.: _____ FAX NO.: _____ E-MAIL ADDRESS: ATTORNEY FOR (name): _____	<i>FOR COURT USE ONLY</i>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b>	
<b>PEOPLE OF THE STATE OF CALIFORNIA</b>	
vs.	
Defendant: Date of birth: _____ Cal. Dept. of Corrections and Rehabilitation No. (if any): _____	
<b>NOTICE OF APPEAL—FELONY (DEFENDANT)</b> <b>(Pen. Code, §§ 1237, 1237.5, 1538.5(m); Cal. Rules of Court, rule 8.304)</b>	CASE NUMBER: _____

**NOTICE**

- **You must file this form in the SUPERIOR COURT WITHIN 60 DAYS after the court rendered the judgment or made the order you are appealing.**
- **IMPORTANT:** If your appeal challenges the validity of a guilty plea, a no-contest plea, or an admission of a probation violation, you must also complete the Request for Certificate of Probable Cause on page 2 of this form. (Pen. Code, § 1237.5.)

1. Defendant appeals from a judgment rendered or an order made by the superior court.  
 NAME of defendant: \_\_\_\_\_  
 DATE of the order or judgment: \_\_\_\_\_
2. **Complete either item a. or item b. Do not complete both.**
  - a. *If this appeal is after entry of a plea of guilty or no contest or an admission of a probation violation, check all that apply:*
    - (1)  This appeal is based on the sentence or other matters occurring after the plea that do not affect the validity of the plea. (Cal. Rules of Court, rule 8.304(b).)
    - (2)  This appeal is based on the denial of a motion to suppress evidence under Penal Code section 1538.5.
    - (3)  This appeal challenges the validity of the plea or admission. (*You must complete the Request for Certificate of Probable Cause on page 2 of this form and submit it to the court for its signature.*)
    - (4)  Other basis for this appeal (*you must complete the Request for Certificate of Probable Cause on page 2 of this form and submit it to the court for its signature*) (*specify*): \_\_\_\_\_
  - b. *For all other appeals, check one:*
    - (1)  This appeal is after a jury or court trial. (Pen. Code, § 1237(a).)
    - (2)  This appeal is after a contested violation of probation. (Pen. Code, § 1237(b).)
    - (3)  Other (*specify*): \_\_\_\_\_
3.  Defendant requests that the court appoint an attorney for this appeal. Defendant  was  was not represented by an appointed attorney in the superior court.
4. Defendant's mailing address is:  same as in attorney box above.  
 as follows: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_ (TYPE OR PRINT NAME) ▶ \_\_\_\_\_ (SIGNATURE OF DEFENDANT OR ATTORNEY)

<p><b>PEOPLE OF THE STATE OF CALIFORNIA</b> vs. Defendant:</p>	<p>CASE NUMBER:</p>
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**REQUEST FOR CERTIFICATE OF PROBABLE CAUSE**

I request a certificate of probable cause. The reasonable constitutional, jurisdictional, or other grounds going to the legality of the guilty plea, no-contest plea, or probation violation admission proceeding are (*specify*):

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

\_\_\_\_\_

(TYPE OR PRINT NAME)

\_\_\_\_\_

(SIGNATURE OF DEFENDANT OR ATTORNEY)

**COURT ORDER**

This Request for Certificate of Probable Cause is (*check one*):     granted     denied.

Date:

\_\_\_\_\_

JUDGE