**COMMONWEALTH OF MASSACHUSETTS**

**APPEALS COURT**

**Docket Number: {{ docket\_number }}**

**{{ users[0] }}**

**v.**

**{{ other\_parties[0] }}**

**On Appeal From** **{{ trial\_court }}**

**Informal Appellant Brief of {{ users[0] }}**

Date: {{ users[0].signature\_date }}

Your name: {{ users[0] }}

Your pronouns (optional): {{ users[0].pronouns }}

Your address: {{ users[0].address.address }}

Your phone number: {{ users[0].mobile\_number }}

Your email address: {{ users[0].email }}

# Issues ON APPEAL

{{ appeal\_issues }}

# Case HISTORY

This case was filed in {{ trial\_court }} on {{ filed\_date }}.

Judge {{ judge\_name }} issued the decision on {{ decision\_date }}.

The following decisions/orders are challenged:

{{ challenged\_judgments }}

# Statement of the Facts

{{ appeal\_facts }}

# Argument

{{ appeal\_arguments }}

**CONCLUSION/RELIEF REQUESTED**

{{ appeal\_conclusion }}

Respectfully submitted,

/s/ {{ users[0] }}

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your name: {{ users[0] }}

Your address: {{ users[0].address.address }}

Your phone number: {{ users[0].mobile\_number }}

Your email address: {{ users[0].email }}

Date: {{ users[0].signature\_date }}

# Certificate of Service

I certify that on {{ users[0].signature\_date }}

I served a complete copy of this {{ is\_served\_informal\_brief}} Informal Appellant Brief, {{ is\_served\_record\_appendix }} Record Appendix, {{ is\_served\_impounded\_appendix }} Impounded Appendix on all parties, by sending it to the person(s) listed below using the email address(es) or physical mailing address(es) shown:

Name of other party or parties or their lawyer(s) who you served:

{{ other\_parties[0] }}

The email or physical mailing address(es) you sent the documents to:

{{ other\_parties[0].address.address }}

{{ other\_parties[0].email }}

/s/ {{ users[0] }}

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your Name: {{ users[0] }}

Your address: {{ users[0].address.address }}

Your phone number: {{ users[0].mobile\_number }}

Your email address: {{ users[0].email }}

Date: {{ users[0].signature\_date }}

{%p if filing\_mail %}

**FILING**

**Certificate of Mailing, Mass. R. A. P. 13 (a) (1) (B)**

Pursuant to Mass. R. A. P. 13 (a) (1) (B), I certify that on the following date, {{ users[0].signature\_date }}, which is a date on or before when this brief is due to be filed in the Appeals Court, I sent it by first-class mail or its equivalent to the Appeals Court.

/s/ {{ users[0] }}

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your name: {{ users[0] }}

Your address: {{ users[0].address.address }}

Your phone number: {{ users[0].mobile\_number }}

Your email address: {{ users[0].email }}

Date: {{ users[0].signature\_date }}

{%p endif %}

{%p if filing\_institution %}

**FILING**

**Certificate of Mailing and Filing,**

**Mass. R. A. P. 13 (a) (1) (B) and 13 (a) (2)**

Pursuant to Mass. R. A. P. 13 (a) (1) (B) and 13 (a) (2), I certify that I am a self-represented party, am currently confined in a State or Federal institution, and that on the following date, {{ users[0].signature\_date }}, which is a date on or before when the brief is due to be filed in the Appeals Court, I deposited this brief in the institution's internal mail system for mailing to the Appeals Court.

/s/ {{ users[0] }}

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your name: {{ users[0] }}

Your address: {{ users[0].address.address }}

Your phone number: {{ users[0].mobile\_number }}

Your email address: {{ users[0].email }}

Date: {{ users[0].signature\_date }}

{%p endif %}

**COMMONWEALTH OF MASSACHUSETTS**

**APPEALS COURT**

**Docket Number: {{ docket\_number }}**

**{{ users[0] }}**

**v.**

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**On Appeal From** {{ trial\_court }}

**Appellant's Record Appendix (R.A.)**

**Vol. 1 of 1**

Date: {{ users[0].signature\_date }}

Your name: {{ users[0] }}

Your pronouns (optional): {{ users[0].pronouns }}

Your address: {{ users[0].address.address }}

Your phone number: {{ users[0].mobile\_number }}

Your email address: {{ users[0].email }}

{{ record\_appendix\_text }}

**COMMONWEALTH OF MASSACHUSETTS**

**APPEALS COURT**

**Docket Number: {{ docket\_number }}**

**{{ users[0] }}**

**v.**

**{{ other\_parties[0] }}**

**On Appeal From** {{ trial\_court }}

**CONTAINS IMPOUNDED MATERIAL**

**Appellant's Record Appendix (R.A.)**

**Vol. 1 of 1**

Date: {{ users[0].signature\_date }}

Your name: {{ users[0] }}

Your pronouns (optional): {{ users[0].pronouns }}

Your address: {{ users[0].address.address }}

Your phone number: {{ users[0].mobile\_number }}

Your email address: {{ users[0].email }}

{{ impounded\_record\_appendix\_text }}