**COMMONWEALTH OF MASSACHUSETTS**

**APPEALS COURT**

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

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

**v.**

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

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

**Appellee's Supplemental Record Appendix (S.R.A.)**

**Vol. 1 of {{ appendix\_volume\_total }}**

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

Your name: {{ users[0] }}

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

Your address: {{ users[0].address.one\_line }}

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

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

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{%p for exhibit in exhibits %}

{{ exhibit.title }} {% if include\_exhibit\_cover\_pages %}{{ exhibit.start\_page + loop.index + table\_page\_length - 1 }}{% else %}{{ table\_page\_length + exhibit.start\_page }}{% endif %}

{%p endfor %}