

MAIL COMPLETED FORM TO:  
CATHY FETTER

Prothonotary and Clerk of Courts  
200 South Juliana Street  
Bedford, Pa 15522

We will accept Cash or a  
**Money Order payable to Bedford County Probation Office:**  
**In the Amount of \$57.00**

Note: If more than one citation, you must list each one. Please return 6 copies along with your summary appeal and nonrefundable payment, in order for the clerk to properly time stamp and return.

**Summary Appeal must be received within 30 days of District  
Magistrate's decision**

**NO CHECKS ACCEPTED**

Commonwealth of Pennsylvania  
Court of Common Pleas  
County of: \_\_\_\_\_  
\_\_\_\_\_ Judicial District



## Notice of Appeal from Summary Criminal Conviction

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 complaint:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ 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) \_\_\_\_\_  
(printed name) \_\_\_\_\_  
\_\_\_\_\_ Zip: \_\_\_\_\_  
Supreme Court ID No: \_\_\_\_\_  
Phone No: \_\_\_\_\_ Fax No: \_\_\_\_\_

### 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