

KITSAP COUNTY DISTRICT COURT, STATE OF WASHINGTON

<p style="text-align: center;">_____, Plaintiff, vs. _____, Defendant.</p>	<p>DISTRICT COURT NO. SUPERIOR COURT NO.</p> <p>NOTICE OF APPEAL TO SUPERIOR COURT – DE NOVO</p>
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A. The appellant _____, the named plaintiff defendant above, seeks review by the Superior Court of the Kitsap county District Court’s decision in cause number _____, entered _____.
(Date)

B. Designation of claimed error(s):

DATED: _____

Plaintiff’s Signature
Print Name: _____

(Address)

(City) (State) (Zip)

(_____) _____
(Telephone/Message Number)

Defendant’s Signature
Print Name: _____

(Address)

(City) (State) (Zip)

(_____) _____
(Telephone/Message Number)

Plaintiff’s Attorney
Print Name: _____

(Address)

(City) (State) (Zip)

(_____) _____
(Telephone/Message Number)

Defendant’s Attorney
Print Name: _____

(Address)

(City) (State) (Zip)

(_____) _____
(Telephone/Message Number)