

ATTORNEY OR PARTY WITHOUT ATTORNEY ( <i>Name, State Bar number, and address</i> ):  TELEPHONE: FAX NO. ( <i>Optional</i> ): ATTORNEY FOR (Name):	FOR COURT USE ONLY           CASE NUMBER:
<p style="text-align: center;"><b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF BUTTE</b></p> <input type="checkbox"/> Butte County Courthouse One Court Street, Oroville, CA 95965 (530) 532-7002 <input checked="" type="checkbox"/> North Butte County Courthouse 1775 Concord Avenue, Chico, CA 95928 (530) 532-7002	
PLAINTIFF/PETITIONER:  DEFENDANT/RESPONDENT:	
<p><b>CERTIFICATE OF NO APPEAL</b></p>	

*A \$40.00 fee will be charged pursuant to Government Code §70626(a)(8) for issuing this certificate.*

I, \_\_\_\_\_ Deputy Clerk of the Superior Court of California, County of Butte,  
do hereby certify and attest to the following:

- That the complaint/petition was filed in the above referenced case on \_\_\_\_\_
- A judgement resolving all issues was entered on \_\_\_\_\_
- I have checked the court's records from \_\_\_\_\_ to \_\_\_\_\_ ; and
- I find that no Notice of Appeal of said judgment has been filed in this action.

I certify that the forgoing information is a true and correct finding of the records searched.

Kimberly Flener, Clerk of the Superior Court

Dated: \_\_\_\_\_

By Deputy Clerk: \_\_\_\_\_  
(Deputy Clerk)

