**[SAMPLE COVER FOR APPENDICES] App.R. 51-1**

IN THE INDIANA COURT OF APPEALS [OR SUPREME COURT]

Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\*

[NAME OF APPELLANT], Appeal [or Interlocutory Appeal,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Petition for Review]

 Appellant, from the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[name of trial court or administrative agency]

 v. Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 [Trial court or administrative agency case no.]

[NAME OF APPELLEE], Hon. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [name and title of presiding judge, e.g.

Appellee. judge, special judge, judge pro tempore]

TITLE [e.g., Appellant’s Appendix]

[Title should indicate if appendix is a supplemental appendix]

Volume \_\_\_\_\_ [number of volume] of \_\_\_\_\_\_ [total number of volumes]

Pages \_\_\_\_\_\_ through \_\_\_\_\_\_\_

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 Firm (if applicable)

 Address

 Telephone number

 Attorney for [Filing Party, e.g., Appellant]\*\*

 [or Pro Se Filing Party]

\*When seeking or opposing transfer or review, use Court of Appeals or Tax Court case number unless Supreme Court number has been assigned.

\*\*Include information only about the filing party on the cover.