

Name, Address, Phone # & State Bar # of Attorney or Party without Attorney	FOR COURT USE ONLY
Attorney for: SUPERIOR COURT, STATE OF CALIFORNIA COUNTY OF YOLO 725 Court Street, #103 Woodland California 95695 530/406-6704	
Plaintiff(s):	Case Number:
Defendant(s):	NOTICE OF APPEAL

NOTICE OF APPEAL of the Order, Decision or Award of the Labor Commissioner in State Case # _____,

Dated _____, and served upon the undersigned appellant, _____

_____ on _____, is given and filed pursuant to Labor Code Section 98.2.

Appellant attaches as Exhibit "A" a copy of the Order, Decision or Award appealed and requests that the Clerk of the Court set the cause for hearing before the above-entitled court, where it shall be heard *de novo* in accordance with Labor Code Section 98.2, and that the Clerk of the Court give Notice of time, date and place of the new trial to each of the following parties and the Labor Commissioner's office at the places listed below. Appellant certifies that a copy of this Notice of Appeal has been served upon the Labor Commissioner and a copy has been mailed to the Respondent, as shown below.

APPELLANT (OR ATTORNEY) (NAME, ADDRESS, TELEPHONE NUMBER)
OFFICE OF THE LABOR COMMISSIONER (ADDRESS AND TELEPHONE NUMBER) STATE LABOR COMMISSIONER 2424 ARDEN WY, #360 SACRAMENTO CA 95825
RESPONDENT (OR ATTORNEY) (NAME, ADDRESS, TELEPHONE NUMBER)

Dated:

Signature of Appellant

DLSE 537 (Rev. 10/01/04)

YOCV 0152

Appeal of Labor Commission Decision