ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NO.: NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.:	FOR COURT USE ONLY
FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE:	
STREET ADDRESS: CITY: STATE: ZIP CODE:	
CITY: STATE: ZIP CODE:	
TELEPHONE NO.: FAX NO.:	
E-MAIL ADDRESS:	
ATTORNEY FOR (name):	4
SUPERIOR COURT OF CALIFORNIA, COUNTY OF	_
PEOPLE OF THE STATE OF CALIFORNIA	
vs. Defendant:	
Date of birth:	
Cal. Dept. of Corrections and Rehabilitation No. (if any):	
NOTICE OF APPEAL—FELONY (DEFENDANT) (Pen. Code, §§ 1237, 1237.5, 1538.5(m); Cal. Rules of Court, rule 8.304)	CASE NUMBER:
NOTIOE	
• You must file this form in the SUPERIOR COURT WITHIN 60 DAYS after the cou	urt rendered the judgment or mode the
• Fourmust me this form in the SOPERIOR COORT WITHIN to DATS after the coll order you are appealing.	art rendered the judgment or made the
<ul> <li>IMPORTANT: If your appeal challenges the validity of a guilty plea, a no-contest ple you must also complete the Request for Certificate of Probable Cause on page 2 of t</li> </ul>	
1. Defendant appeals from a judgment rendered or an order made by the superior court.	
NAME of defendant:	
DATE of the order or judgment:	
2. Complete either item a. or item b. Do not complete both.	
a. If this appeal is after entry of a plea of guilty or no contest or an admission of a prol	bation violation, check all that apply:
(1) This appeal is based on the sentence or other matters occurring after the plea. (Cal. Rules of Court, rule 8.304(b).)	e plea that do not affect the validity of the
(2) This appeal is based on the denial of a motion to suppress evidence und	ler Penal Code section 1538.5.
<ul> <li>(3) This appeal challenges the validity of the plea or admission. (You must of Probable Cause on page 2 of this form and submit it to the court for its s</li> </ul>	complete the Request for Certificate of
(4) Other basis for this appeal (you must complete the Request for Certificat and submit it to the court for its signature) (specify):	
and submit it to the court for its signature, (specify).	
b. For all other appeals, check one:	
(1) This appeal is after a jury or court trial. (Pen. Code, § 1237(a).)	
<ul> <li>(2) This appeal is after a contested violation of probation. (Pen. Code, § 123)</li> <li>(3) Other <i>(specify)</i>:</li> </ul>	37(b).)
<ol> <li>Defendant requests that the court appoint an attorney for this appeal. Defendant</li> </ol>	was was not
represented by an appointed attorney in the superior court.	
<ol> <li>Defendant's mailing address is: same as in attorney box above.</li> </ol>	
as follows:	
Date:	
<b>F</b>	
(TYPE OR PRINT NAME) (SIG	SNATURE OF DEFENDANT OR ATTORNEY)

CR-	120
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## PEOPLE OF THE STATE OF CALIFORNIA vs.

Defendant:

## **REQUEST FOR CERTIFICATE OF PROBABLE CAUSE**

CASE NUMBER:

I request a certificate of probable cause. The reasonable constitutional, jurisdictional, or other grounds going to the legality of the guilty plea, no-contest plea, or probation violation admission proceeding are *(specify)*:

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

	•			
(TYPE OR PRINT NAME)		(SIGNATURE OF DEFENDANT OR ATTORNEY)		
COURT ORDER				
This Request for Certificate of Probable Cause is (check one):	granted	denied.		
Date:	_	JUDGE		
CR-120 [Rev. January 1, 2017] NOTICE OF APPEAL (C	-—FELONY (DEF riminal)	ENDANT)	Page 2 of 2	