

**STATE OF ARIZONA  
COURT OF APPEALS  
DIVISION \_\_\_\_**

IN THE MATTER OF:	)	CASE NO. _____
	)	
_____ ,	)	
a minor	)	<b>NOTICE OF HEARING ON APPEAL</b>
<b>[Use fictitious name if petitioner</b>	)	<b>AND</b>
<b>has so requested]</b>	)	<b>APPOINTMENT OF COUNSEL</b>
_____	)	

1. Your hearing date is: \_\_\_\_\_.
  
2. The location of your hearing is:  
  
    \_\_\_\_\_ Arizona Court of Appeals, Office of the Clerk  
            1501 W. Washington, Second Floor  
            Phoenix, AZ 85007  
            Telephone: (602)542-4821  
  
    \_\_\_\_\_ Arizona Court of Appeals, Office of the Clerk  
            400 W. Congress, Second Floor  
            Tucson, AZ 85701  
            Telephone: (520)628-6954
  
3. The time of your hearing is: \_\_\_\_\_.
  
4. Your appointed Guardian ad Litem is: \_\_\_\_\_.  
    Address: \_\_\_\_\_.  
    Phone Number: \_\_\_\_\_.
  
5. Your appointed attorney is: \_\_\_\_\_.  
    Address \_\_\_\_\_.  
    Phone: \_\_\_\_\_.

DATE: \_\_\_\_\_

\_\_\_\_\_  
Deputy Clerk

Mailed/hand-delivered to  
petitioner/petitioner's attorney  
on \_\_\_\_\_, 20\_\_.

\_\_\_\_\_

Mailed/hand-delivered to  
guardian ad litem  
on \_\_\_\_\_, 20\_\_.

\_\_\_\_\_