



Guide for Self-Represented ("Pro Se" or "Pro Per") Parties in Worker's Compensation

BASIC INFORMATION ABOUT APPEALS FROM AWARDS OF THE
INDUSTRIAL COMMISSION OF ARIZONA IN WORKERS' COMPENSATION CASES

JUNE 2008

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Industrial Commission, Phoenix

800 W. Washington St.
Phoenix, AZ 85007
(602) 542-4661

Industrial Commission, Tucson

2675 E. Broadway Blvd.
Tucson, AZ 85716
(520) 628-5188

Arizona Supreme Court

1501 W. Washington St.
Phoenix, AZ 85007
Clerk: (602) 452-3396

<http://www.azcourts.gov/selfservicecenter/SelfServiceForms.aspx#Appeals>

Arizona Court of Appeals

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Phoenix, AZ 85007
Clerk: (602) 542-4821
www.cofad1.state.az.us

Arizona Court of Appeals

Division Two
400 W. Congress St.
Tucson, AZ 85701
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Introduction

This guide describes in simple terms the process and procedures that must be followed in appealing awards of an administrative law judge (“ALJ”) of the Industrial Commission of Arizona (“ICA”) in worker’s compensation cases. This guide describes the appeals process from the issuance of the ALJ’s award (1) through administrative review by the ICA, (2) to the Court of Appeals, and (3) from the Court of Appeals to the Arizona Supreme Court. This guide does not address appeals in other types of ICA cases, or any other claims arising out of the employer/employee relationship. It does not address appeals in criminal, civil, or juvenile cases, nor does it discuss appeals from city courts or justice of the peace courts.

Appeals from awards of the ICA in worker’s compensation cases to the Court of Appeals and the Arizona Supreme Court are very complicated. Persons who represent themselves in legal matters, also referred to as “pro se” or “pro per” litigants, are expected to know and follow the same rules as an attorney. All papers must be filed with the ICA and appellate courts on time. **Any party who is dissatisfied with an ICA award must timely file an appeal. If the other side files an appeal, you may be required to defend the ICA award on appeal. This guide will assist you whether you are filing or defending an appeal.**

An appeal from the award of the ALJ is not a retrial of the case. The ICA and the appellate courts do not review new evidence and do not decide which witnesses were telling the truth. They only review the evidence and arguments presented to the ALJ. The Court of Appeals and the Arizona Supreme Court will only reverse the ALJ’s award if they find an error of law or the lack of any evidence to support the ALJ’s award. The error must be so important that it likely affected the outcome of the case.

You may not visit with or talk to any Court of Appeals or Arizona Supreme Court judge or member of his/her staff about your case. The staff at the ICA and the respective Clerk’s Offices of the Court of Appeals and the Arizona Supreme Court will help you as much as they can, but they cannot give you legal advice or tell you what to put in your papers. Some helpful information is also provided in **Appendix 1**, “Frequently Asked Questions.” Remember to sign, and to include your current address in, any papers filed in the appeal. If your address changes, you must file a “Notice of Address Change” with the ICA (see **Form 1**) and with the Court of Appeals (see **Form 3(a) or 3(b)**), or if a petition for review has been filed, the Arizona Supreme Court (see **Form 4(a) or 4(b)**).

Many legal terms are used in this guide. These terms are defined and explained in **Appendix 2**, “Important Terms.”

In the electronic version of this document, all references to forms and appendices are linked to the corresponding page. To view, place the mouse over the word and click.

Acknowledgements

This guide was written by Scott H. Gan of Mesch, Clark & Rothschild, P.C. as part of a committee on pro se appellate practice. The committee was a joint effort between the Arizona Supreme Court, the Courts of Appeal, the Industrial Commission of Arizona, and attorneys in private practice. The author thanks the judges, staff attorneys, and clerks of the court for the Courts of Appeal and the Arizona Supreme Court for their assistance in preparing this guide.

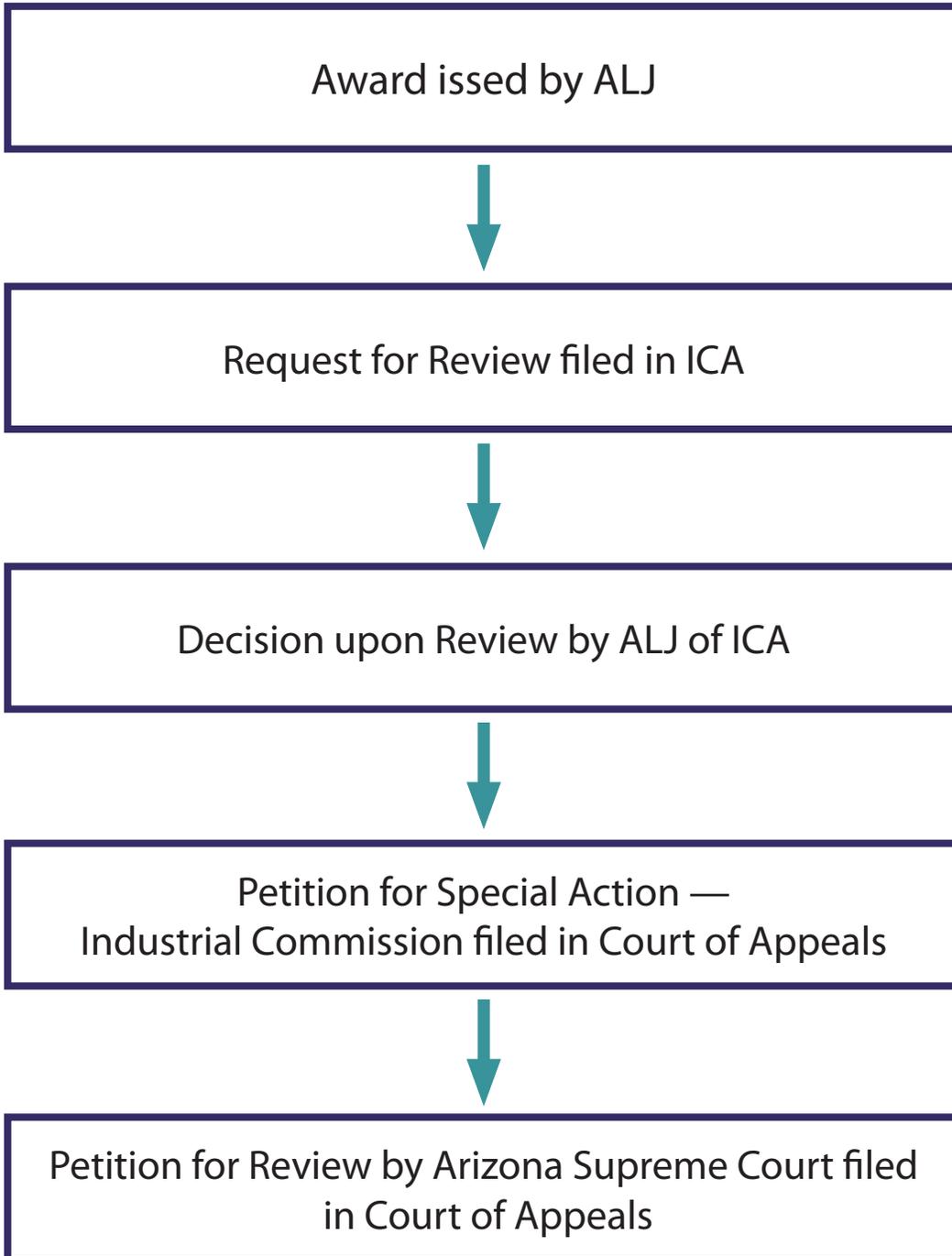
Disclaimer

The materials in this guide are not legal advice and may not be used as legal authority. This guide is an overview of the Arizona Rules of Civil Appellate Procedure. This guide does not replace or supersede those rules. You can obtain a copy of the Arizona Rules of Civil Appellate Procedure from a law library or at the following website: <http://azrules.westgroup.com/home/azrules/default.wl>. Another helpful resource is the State Bar of Arizona's three-volume treatise on appellate practice entitled the Arizona Appellate Handbook. The Arizona Appellate Handbook should be available at any law library. If you want to review the statutes referred to in this Guide, you can go to www.azleg.state.az.us/arizonarevisedstatutes.asp#. You can obtain a copy of the Workers' Compensation Practice and Procedures at the following website: www.azsos.gov/PUBLIC_SERVICES/title_20/20-05.htm.

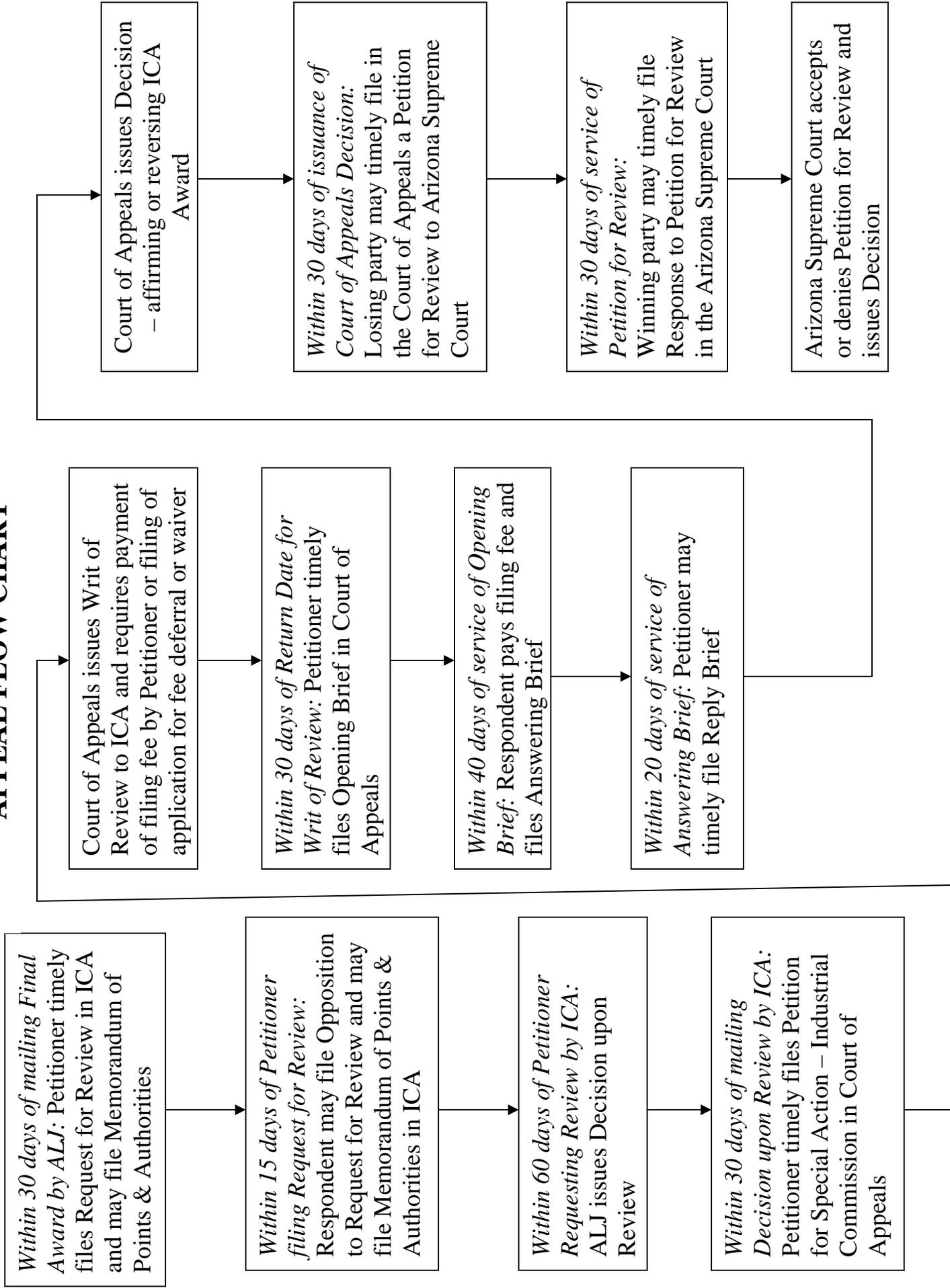
Electronic Filing

The Arizona appellate courts plan to implement programs to allow self-represented litigants to electronically file briefs and other documents with the court. To check on the availability of that option and the applicable procedures and requirements for electronic filing, please refer to the website of the appropriate appellate court or contact the clerk of that court.

Process of Review of ICA



WORKER'S COMPENSATION APPEAL FLOW CHART



The Steps to Filing an Appeal

An applicant (employee), the employer, or the employer's insurance carrier, if they are a party to the worker's compensation case, can appeal from an award of the ALJ. The party who appeals the ALJ's award is called the "**Petitioner**." The other parties to the appeal who are not appealing the ALJ's award are called the "**Respondents**." The following pages describe the most important steps that must be taken to appeal from or to defend the ALJ's award. The legal terms referred to in these steps are defined in **Appendix 2**.

Step 1: Determine when the award was mailed to the parties by the ICA

- A. An ALJ will issue an award and mail a copy to all of the parties – the applicant, the employer, and the employer's insurance carrier. The award is considered final unless, within thirty (30) days after the decision has been mailed to the parties, one of the parties files a request for review.
- B. The award is any formal written document the ALJ has issued determining a worker's right to benefits under the Worker's Compensation Act. ALJs issue most awards after hearings. Although a document may state it is an ICA "action," "order," or "award" it is an award for appeal purposes if the document contains a determination of some issue related to the compensation claim of a particular worker.
- C. Contact the ICA ALJ division to review the file if the mailing date of the award is uncertain.

Step 2: Timely file a "Request for Review" with the ICA

- A. The Petitioner must file a paper called a "Request for Review" with the ICA within thirty (30) days after the date on which a copy of the award is mailed to the parties.
- B. No administrative or judicial review of the ALJ's award will be allowed unless a timely Request for Review is filed. (A form of the Request for Review is attached as **Form 2**).
- C. The Court of Appeals will dismiss the Petitioner's request to review the ICA award if a Request for Review was not timely filed with the ICA.

Step 3: Preparing the Request for Review

- A. The Request for Review need only state that the Petitioner requests a review of the ALJ's award. A copy of the award should be attached to the Request for Review. The Request for Review may be accompanied by a list of the reasons why the ALJ's decision was incorrect; this is called a Memorandum of Points and Authorities. Filing a Memorandum

- of Points and Authorities is not required; nonetheless it can be used to preserve issues for administrative and judicial review by more fully explaining the reasons why the petitioner believes the award should be changed.
- B. The prevailing party (Respondent) before the ICA may file a response to the Request for Review, with a Memorandum of Points and Authorities, within fifteen (15) days after the request has been filed. A prevailing party (Respondent) that does not file a response to the Request for Review does not admit the ALJ's decision was incorrect.
 - C. The Request for Review must be filed with the ICA and copies must be mailed to the other parties to the case.
 - D. The ICA, at its own expense, transcribes the testimony presented at every ALJ hearing within 10 business days after the hearing is completed. The Petitioner or Respondent may review these transcripts at the ICA.
 - E. The review is made by the same ALJ that issued the award and is based on the exhibits and testimony admitted by the ALJ and the memoranda, if any, submitted by the parties.
 - F. The ALJ may affirm, reverse, rescind, modify, or supplement the award, and make any disposition of the case that is appropriate. A decision by the ALJ will usually be made within sixty (60) days after the review has been requested. The Decision upon Review becomes part of the ICA file and a copy is mailed to the parties.
 - G. The Decision upon Review by the ALJ becomes final unless, within thirty (30) days after the date of mailing copies of the decision, one of the parties files a Petition for Special Action in Division One (Phoenix) of the Court of Appeals. (See **Form 5(a) or 5(b)**).
 - H. If the Petitioner fails to file the Petition for Special Action in Division One of the Court of Appeals within thirty (30) days after the decision upon review has been mailed to the parties, the Court of Appeals will dismiss the appeal as untimely.

Step 4: Preparing and filing of the Petition for Special Action- Industrial Commission

- A. A "Petition for Special Action-Industrial Commission" (the "Petition") must be filed in Division One of the Court of Appeals in Phoenix, Arizona. A copy of the award and the Decision upon Review should be attached to the petition. The caption of the petition must name each party to the award, including the ICA, and appropriately designate each party's interest in the matter. (See **Form 5(a) or 5(b)**).

- B. The party filing the petition is designated the Petitioner. All other parties are designated as Respondents. The caption of the petition should also identify each of the parties as employee, employer, or insurance carrier. The ICA is always named as a Respondent. In “No Insurance” and “Apportionment” cases, the ICA is also named in the caption as a party-in-interest.
- C. The caption of the petition must include the ICA’s claim number, the insurance carrier’s claim number (if applicable) and the Court of Appeals case number assigned by the Clerk when the petition is filed.
- D. The body of the petition must identify the award sought to be reviewed by the Court of Appeals, including the date it was issued by the ALJ.
- E. A Petitioner should attach a copy of the Decision upon Review issued by the ALJ to the petition.
- F. The body of the petition should also ask the Court of Appeals to issue a “Writ of Review” directing the ICA to certify its claims files to the Court of Appeals within ten (10) business days after issuance of the Writ of Review. The Petitioner must sign the petition.
- G. If the ICA case originated in Pima, Pinal, Cochise, Santa Cruz, Greenlee, Graham, or Gila County, Division One of the Court of Appeals, located in Phoenix, will transfer the appeal to Tucson, where Division Two of the Court of Appeals is located. Division Two will assign a new case number to the appeal and all subsequent filings by the parties will be made in the Court of Appeals in Tucson.
- H. If the ICA case originated in Maricopa, Yuma, La Paz, Mohave, Coconino, Yavapai, Navajo, or Apache County, the case will remain in Division One of the Court of Appeals located in Phoenix, and all subsequent filings by the parties will be made there.
- I. An original and six copies of the petition must be filed with the Clerk of the Court of Appeals. If the petitioner pays the filing fee and provides additional copies of the petition for each party to be served, the Clerk of the Court of Appeals will date-stamp these copies and return them to the petitioner so they can be mailed to the respondent parties to the appeal.
- J. Although the filing fee should be paid at the time of the filing of the Petition for Special Action, failure to pay the filing fee will not result in immediate dismissal of the appeal.
- K. If, however, a Petition for Special Action is filed without paying the filing fee, the clerk of the Court of Appeals will not issue a Writ of Review requiring the ICA to transmit its claims file to the Court of Appeals until the Petitioner has paid the fee or payment has been deferred or waived.

- L. When a petition is filed without payment of the filing fee, the Clerk notifies the Petitioner that the fee must be paid by a specified date or the Court of Appeals will dismiss the petition.
- M. A Petitioner may request “deferral” or “waiver” of the filing fee as set forth in Arizona Revised Statutes §12-302. A deferral postpones or otherwise sets a schedule for paying the filing fee. A waiver means a party does not have to pay the filing fee.
- N. The requirements for deferral or waiver are based on the party’s financial situation, including the receipt of economic assistance from the state or federal government.
- O. The Petitioner applying for a deferral or waiver must file an application with the Court of Appeals and provide proof of the financial circumstances supporting the request. (A form of the “Application for Deferral or Waiver of Court Fees and/or Costs” is attached as **Form 7(a) or 7(b)**).
- P. If the request for deferral is granted, the Petitioner is required to make payments pursuant to a schedule set by the Court, or payment of the fee will be deferred until further order of the Court.
- Q. If a request for waiver is granted, the Petitioner will not have to pay the filing fee. If the request for deferral or waiver is denied, the Petitioner must pay the filing fee in full. If the Petitioner fails to pay the filing fee as ordered by the Court of Appeals, the appeal will be dismissed.

Step 5: Issuance of the Writ of Review by the Clerk of the Court of Appeals

- A. When the filing fee has been paid, the Clerk of Division One of the Court of Appeals issues the Writ of Review and serves it upon the ICA and all other parties to the Special Action on the same or next business day after the petition has been filed. The Petitioner does not have to serve the other parties to an award with a copy of the Writ of Review.
- B. After the clerk of the Court of Appeals issues the Writ of Review, the Petitioner must serve the other parties (Respondents) to the Special Action with a copy of the petition. The Petitioner should not serve a petition before it has been filed with the Court of Appeals and the Court of Appeals has issued a Writ of Review.
- C. Mailing a copy of the petition to the other parties’ (Respondents’) last known address as shown in the ICA’s file is sufficient and service is complete when mailed. If a party has appeared through counsel, service on the party should be made by serving the counsel rather than the party. Service on the ICA must be made on its Chief Counsel. Service on the State Compensation Fund, if it is a party, must be made on its Chief Counsel.
- D. Within ten (10) business days after service of the Writ of Review on the ICA, it transmits

- the entire claims file to the appropriate division of the Court of Appeals, together with an affidavit certifying that the claims file is the full, true, and complete record before the ICA.
- E. The ICA may move for additional time to transmit the claims file, and the Court of Appeals may extend the time for transmitting the claims file.
 - F. Parties should always review the claims file transmitted to the Court of Appeals to ensure that it is complete.
 - G. If the claims file lacks documents filed with the ICA and not properly excluded from the claims file, a party may file a motion with the Court of Appeals to have the ICA supplement the record with those items.
 - H. The record may not be supplemented to include documents or other matters that are not part of the certified record or that the ICA or ALJ did not properly consider in issuing the award or decision upon review.
 - I. Any party before the ICA, other than the Petitioner, intending to participate in the Special Action before the Court of Appeals, must file a “Notice of Appearance” with the Clerk of the Court to which the case is assigned within ten (10) business days after the date the party was served with the petition. An original and six (6) copies of the Notice of Appearance must be filed with the Clerk of the Court of Appeals.
 - J. If a Respondent does not file and serve a Notice of Appearance, other parties need not serve that Respondent with copies of any briefs, motions or other matters filed with the Court of Appeals. The Court of Appeals also does not need to serve the Respondent who failed to file a Notice of Appearance with a copy of any later order, decision, or determination. The Court of Appeals, however, may choose to allow a party (Respondent) who failed to file a Notice of Appearance to participate formally in the proceedings.

Step 6: Timing and filing of briefs in the Court of Appeals

- A. The Petitioner must file an Opening Brief within thirty (30) days from the return date of the Writ of Review. The return date is identified in a copy of the Writ of Review that the Clerk of the Court of Appeals sends to the Petitioner. The Clerk of the Court of Appeals will not provide any additional notice of the due date of the Opening Brief to the Petitioner.
- B. A Respondent must file an Answering Brief within forty (40) days after service of the Opening Brief. If the Opening Brief was mailed, the Respondent has forty-five (45) days from the date of the mailing to file the Answering Brief. The Respondent usually pays the filing fee when the Answering Brief is filed in the Court of Appeals.

- C. The Petitioner may file a Reply Brief within twenty (20) days after service of the Answering Brief. If the Answering Brief was mailed, the Petitioner has twenty-five (25) days from the date of the mailing to file the Reply Brief.
- D. The Petitioner must file an original and six (6) copies of the Opening Brief. Similarly, a Respondent must file an original and six (6) copies of the Answering Brief. The Petitioner must file an original and six (6) copies of the Reply Brief.
- E. The Petitioner must serve two (2) copies of the Opening Brief on each party (Respondent) that has filed a Notice of Appearance in the case in the Court of Appeals. Likewise, any Respondent filing an Answering Brief must serve two (2) copies of the brief on each party. The Petitioner must serve two (2) copies of the Reply Brief on each party. (See “Certificate of Compliance,” **Form 8(a) or 8(b)**).
- F. If the Petitioner or any Respondent, for good reason, needs more time to file the Opening Brief, the Answering Brief, or the Reply Brief, he or she can file a motion with the Clerk of the Court of Appeals asking for an extension of time to file the opening brief. (See “Motion for Extension of Time to File Brief,” **Form 9(a) or 9(b)**).
- G. The Motion for Extension of Time must be filed with the Clerk of the Court of Appeals before the expiration of the deadline to file the Opening Brief, Answering Brief, or Reply Brief.
- H. Any other party may either object or agree to the request for an extension of time to file a brief. (See “Stipulation for Extension of Time to File a Brief” is attached as **Form 10(a) or 10(b)**). The Court of Appeals will usually grant a first request for extension of time if it is reasonable. Subsequent requests for extension of time are not usually granted unless extraordinary circumstances are shown.

The Opening Brief

The Petitioner prepares and files the Opening Brief. The Opening Brief is the document filed with the Court of Appeals describing the evidence and arguments presented to the ALJ and why the ALJ's award should be reversed. Below is a description of how to prepare the Opening Brief.

Step 1: Preparation

- A. The Opening Brief should be typed on a computer or a typewriter. The text must be black.
- B. Typing all papers filed with the Court of Appeals and the Arizona Supreme Court will ensure that the Court can read and understand what is filed. If you cannot type your papers, you may file handwritten papers so long as they contain readable, clear images on white paper.
- C. Type in briefs must be 14-point or larger. For example, an acceptable proportionally spaced type is Times New Roman, 14-point.
- D. The paper must be white, opaque, and unglazed. Only one side of the paper may be used.
- E. The brief must be on 8 ½ by 11 inch paper and contain a caption setting forth the name of the court, title of the case, and case number.
- F. The text must be double spaced. Headings, quotations, and footnotes may be indented and single spaced.
- G. All pages must contain margins of at least one (1) inch.
- H. Each page must be separately numbered.
- I. Cases referred to in the brief must be underlined or in italics.
- J. Headings must be underlined, in italics, or in bold.
- K. The Opening Brief cannot be longer than 14,000 words and may not have an average of more than 280 words per page. The word limit does not include the table of contents, table of citations, certificate of compliance, or addendum.

Step 2: Referring to the documents and testimony in the briefs

- A. Whenever possible, the parties to the appeal should identify in the briefs the important documents or witness testimony supporting their arguments.

- B. Each document relied on in the briefs should have been admitted at the ICA hearing, or otherwise be part of the ICA file, and have been relied on by the ALJ in making the award. Each document should be identified in the briefs by reference to its title and its date. For example, a report written by Dr. Smith on December 25, 2007, should be identified in the briefs as “Report of Dr. Smith dated 12/25/07.”
- C. The ICA transcribes the testimony of the witnesses who testified at the ICA hearing within ten (10) business days after the hearing was completed. The parties to the appeal can review the transcripts at the ICA office or at the Court of Appeals.
- D. If a party wants the Court of Appeals to review the testimony of a witness who testified at the ICA hearing, the testimony should be identified in the briefs by reference to the date of the hearing and the page of the transcript where the testimony is found. For example, the testimony of Mr. Jones at the hearing on December 25, 2007, at page 15 should be identified in the briefs as “12/25/07 Transcript at p. 15.”
- E. If the briefs do not identify the important documents or testimony, the Court of Appeals will have a difficult time determining if the arguments are supported by the record. The Court of Appeals will not search the record to determine if the evidence supports the arguments presented in the appeal.

Step 3: Contents (See Form 8 (a) or 8 (b))

- A. **COVER PAGE.** The cover page should be a separate page with the case caption. The cover page should be on light blue paper. Additional requirements for the cover page are:
 - 1. The caption should contain the ICA claim number, the insurance carrier’s claim number, and the Court of Appeals case number. The Court of Appeals case number is on the Petition and the Writ of Review.
 - 2. The cover page should be titled “Petitioner’s Opening Brief.” (See **Form 8(a) or 8(b)**).
 - 3. The cover page should have the name and address of the Petitioner.
- B. **STATEMENT OF THE CASE.** This section identifies when the ALJ issued the award, the date the Petitioner filed the Request for Review, and the date the ICA entered the Decision upon Review affirming the ALJ’s award.
 - 1. The Statement of the Case helps the Court of Appeals understand what the ICA did before it entered the award, and it shows that the Petition for Special Action was filed on time.

2. If the award was issued after the ICA heard witness testimony, or was based on documents admitted by the ALJ during the hearing, that information should be stated in the Statement of the Case.
- C. **STATEMENT OF FACTS.** This section tells the Court of Appeals about the circumstances that form the basis for the ALJ's award and the factual or medical dispute resolved by the decision.
1. The information contained in the Statement of Facts should be found in (1) the papers and exhibits that were filed with the ICA or admitted at the ICA hearing, or (2) the transcripts of the ICA hearing.
 2. Whenever possible, identify documents contained in the ICA claims file or the pages of the transcripts of the hearings where each of the important facts can be found.
 3. If the Court of Appeals cannot determine that the facts presented are supported by the papers filed with the ICA or the hearing transcripts, it will not be able to consider the reasons presented for reversing the ALJ's award.
- D. **ISSUES PRESENTED FOR REVIEW.** In this section, the Petitioner should identify the errors that the ALJ made. For example: Did the ALJ consider evidence that should have been excluded? Did the ALJ fail to allow evidence that should have been admitted? Did the ALJ apply the wrong law? Is the ALJ's award not supported by the evidence?
1. List all of the reasons why you believe the ALJ's award is incorrect.
 2. List each reason separately.
 3. The best Opening Briefs, however, seldom raise more than three or four issues for review.
- E. **ARGUMENTS.** For each of the issues listed above, explain the reasons the ALJ's award is wrong.
1. Identify any statutes, reported cases, or rules that the ALJ violated or any other legal authority that justifies reversal of the ALJ's award.
 2. Refer to the documents in the ICA file, the transcripts of the hearings, or the exhibits that were admitted by the ALJ during the hearings to support these reasons.

3. Identify each issue separately and state all the reasons why the ALJ's award should be reversed.
- F. **CONCLUSION AND SIGNATURE.** In the conclusion, the Petitioner should simply tell the Court of Appeals what the Petitioner wants the Court to do. For example, "reverse the ALJ's award and remand the matter to the ICA for further hearings on my claim." The last page of the Opening Brief should be dated and signed before making the copies for filing with the Court of Appeals.
- G. **CERTIFICATE OF COMPLIANCE.** A separate statement called a "Certificate of Compliance" should be included at the end of the Opening Brief. This statement should indicate that the brief contains no more than 14,000 words. (A form of the Certificate of Compliance is attached as **Form 8(a) or 8(b)**).
- H. The Opening Brief should also contain a separate statement indicating that two (2) copies of the Opening Brief were sent to the other side or the other side's attorney. This statement can be part of the Certificate of Compliance described above. (See **Form 8(a) or 8(b)**).

The Answering Brief

After the Petitioner files the Opening Brief, the Respondent files the Answering Brief. The Answering Brief responds to the arguments made in the Opening Brief and explains why the ALJ's award was correct. Below is a discussion of how to prepare the Answering Brief.

Step 1: Preparation

- A. The Answering Brief must be formatted in the same manner as the Opening Brief, except the cover page should be on red paper.
- B. The Respondent should follow all the requirements with respect to the paper, font size, margins, headings, page numbers, etc. that are described in Step 1 of "The Opening Brief."
- C. The Respondent should refer to the record and the transcripts of the proceedings in the ICA in the same manner as described in Step 2 of "The Opening Brief."
- D. The Respondent should place his or her name and address on the front cover of the Answering Brief
- E. Like the Opening Brief, the Answering Brief is limited to 14,000 words and may not have an average of more than 280 words per page. The word limit does not include the table of contents, table of citations, certificate of compliance, or addendum.

Step 2: Contents

- A. The Answering Brief should contain all of the same sections as described in Step 3 of "The Opening Brief." For example, the Brief must include: (1) a caption on the cover page (although the color of the cover page for the Answering Brief is red), (2) a separate section for the argument, (3) a conclusion, and (4) a signature page. (See **Form 8(a) or 8(b)**).
- B. The Answering Brief does not have to contain a separate Statement of the Case, Statement of Facts, or Statement of the Issues Presented for Review, unless the Respondent finds that these sections of the Opening Brief are insufficient or incorrect.
- C. **ARGUMENTS.** The Answering Brief should tell the Court of Appeals why the ALJ's award is correct and explain why the arguments made by the Petitioner are incorrect.
 1. For example, the Respondent may argue that the ALJ's award is supported by the

evidence. The Respondent should refer to this evidence, such as testimony presented at the ICA hearing, in the Answering Brief.

2. The Respondent may also argue that the reasons presented in the Opening Brief for reversing the ALJ's award are not supported by the evidence or the law in the Answering Brief. The Respondent should cite to the important evidence, cases, statutes, or rules supporting these arguments.

- D. **CERTIFICATE OF COMPLIANCE.** Like the Opening Brief, the end of the Answering Brief must contain a "Certificate of Compliance" indicating that two (2) copies of the Answering Brief were mailed or hand-delivered to the Petitioner, and that the Answering Brief contains no more than 14,000 words. (See **Form 8(a) or 8(b)**).

The Optional Reply Brief

The Reply Brief tells the Court of Appeals why the Respondent's arguments in the Answering Brief are incorrect. The Petitioner is not required to file a Reply Brief.

Step 1: Preparation

- A. In preparing the Reply Brief, the Petitioner should follow all of the requirements with respect to the paper, font size, margins, headings, page numbers, etc. that are described in Step 1 of "The Opening Brief" except the cover page should be gray and titled "Petitioner's Reply Brief."
- B. All references to the record or the transcripts should comply with the requirements described in Step 2 of "The Opening Brief."
- C. The Reply Brief is limited to 7,000 words and may not have an average of more than 280 words per page. The word limit does not include the table of contents, table of citations, certificate of compliance, or addendum.

Step 2: Contents

- A. The Reply Brief is limited to responding to those arguments or facts presented in the Answering Brief. It is not an opportunity to repeat arguments that were made in the Opening Brief.
- B. The form of the Reply Brief is similar to the Opening and Answering Briefs. (See **Form 8(a) or 8(b)**).
- C. Like the Opening Brief, the end of the Reply Brief must contain a Certificate of Compliance indicating that two (2) copies of the Reply Brief were mailed or hand-delivered to the Respondent or the Respondent's attorney. (See **Form 8(a) or 8(b)**).
- D. This Certificate of Compliance should also state that the Reply Brief does not exceed 7,000 words.

Oral Argument

If any party to the appeal wants the Court of Appeals to conduct an oral argument before issuing a written decision, that party can file a written request for oral argument with the Clerk of the Court of Appeals. The Court of Appeals will decide whether to grant oral argument. If granted, the Court of Appeals will set a time for the parties to appear to discuss the facts and arguments made in the written briefs.

1. A written request must be made by either party in a separate paper filed with the Clerk of the Court of Appeals on or before the earlier of ten (10) business days after the Reply Brief is due or filed. (A form of a “Request for Oral Argument” is attached as **Form 11(a) or 11(b)**).
2. At least twenty (20) days before the date set for oral argument, the Clerk of the Court of Appeals will notify the parties of the specific time and place at which oral argument will be heard.
3. However, an appeal may be considered and decided without oral argument if (1) the parties do not timely make a written request for oral argument, or (2) the Court of Appeals decides that oral argument will not be helpful in reaching its decision.
4. If the Court of Appeals decides that a case will be submitted without oral argument, the Clerk of the Court of Appeals will give the parties prompt written notice of this decision, and any party will have ten (10) business days from the date of such notice to file a statement with the Clerk of the Court of Appeals explaining why oral argument should be heard.

Notice of Decision

When the Court of Appeals issues its decision resolving the appeal, the Clerk of the Court of Appeals will simultaneously advise the parties of the decision in writing, and it will mail a copy of the decision to all parties. The Court of Appeals will also post decisions online. Division One decisions are posted at www.cofad1.state.az.us. Division Two decisions are located at www.appeals2.az.gov.

Costs

The party who wins on appeal may file a “Statement of Costs” with the Clerk of the Court of Appeals requesting reimbursement for the costs of preparing or responding to the appeal. (A form of a “Statement of Costs” is attached as **Form 12(a) or 12(b)**).

1. The Statement of Costs should contain a request for reimbursement of the filing fee, the cost of making the copies of the briefs, and the cost of the transcripts.
2. The successful party must file the Statement of Costs within ten (10) business days, not including weekends and official state holidays, after the Clerk of the Court of Appeals advises the parties of the Court of Appeals’ decision.
3. The successful party must file the Statement of Costs with the Clerk of the Court of Appeals.
4. The unsuccessful party may file an Objection to the amount of costs requested. This Objection must be filed within five (5) business days, not including weekends and official state holidays, after receipt of the Statement of Costs.
5. If no Objection is filed, the Clerk of the Court of Appeals will enter an order awarding costs to the successful party as set forth in the Statement of Costs.

The Petition for Review

Seeking Further Review in the Arizona Supreme Court

Any party who believes that the Court of Appeals decision was wrong can file a “Petition for Review” with the Clerk of the Court of Appeals (not the Arizona Supreme Court) within thirty (30) days after the Court of Appeals issues its decision. (A form of the Petition for Review is attached as **Form 13(a) or 13(b)**, and a form of the Response to the Petition for Review is attached as **Form 14(a) or 14(b)**). The Arizona Supreme Court has discretion whether it will review decisions from either Division One or Two of the Court of Appeals. Below is a description of the formatting requirements and contents of the Petition for Review and the Response to the Petition for Review.

Step 1: Preparation

- A. The parties filing the Petition for Review and the Response to the Petition for Review should follow all of the requirements for paper size, font size, margins, page numbers, headings, etc. described in Step 1 of “The Opening Brief.”
- B. The Petition for Review and the Response to the Petition for Review are each limited to a total of twelve (12) pages.
- C. A copy of the Court of Appeals decision should be attached to the Petition for Review.

Step 2: Contents

- A. The Petition for Review and the Response to the Petition for Review should contain a discussion of:
 1. The issues presented for review;
 2. A list of additional issues not decided by the Court of Appeals which may need to be decided by the Arizona Supreme Court if review is granted;
 3. A statement of the important facts; and
 4. The reasons for granting or denying the Petition for Review, such as whether (1) an Arizona decision controls the point of law in question, (2) a decision of the Supreme Court should be overruled or modified, (3) the Court of Appeals has made conflicting decisions, or (4) an important issue of law has been decided incorrectly. This section is important because the Supreme Court is not required to review Court of Appeals decisions.

Step 3: Filing

- A. **FILING LOCATION AND NUMBER OF COPIES.** The party filing either the Petition for Review or the Response to the Petition for Review must file an original and seven (7) copies. The Petition for Review is filed with the Clerk of the Court of Appeals. The Response to the Petition for Review is filed with the Clerk of the Arizona Supreme Court.
- B. **APPENDIX.** Any papers necessary to assist the Arizona Supreme Court in understanding and ruling on the Petition for Review or the Response to the Petition for Review should be filed as an Appendix with the Petition for Review or the Response to the Petition for Review.
 - 1. If the Appendix is more than fifteen (15) pages in length, it must be fastened together separately from the Petition for Review or the Response to the Petition for Review.
 - 2. If the Appendix is more than fifteen (15) pages, an original and two (2) copies of the Appendix must be filed with the Clerk of the Court of Appeals when the Petition for Review is filed. Similarly, an original and two (2) copies of the Appendix must be filed with the Clerk of the Arizona Supreme Court when the Response to the Petition for Review is filed.
- C. **TIMING.** The party opposing the Petition for Review has thirty (30) days to file a Response to the Petition for Review if the Petition for Review was hand-delivered. If the Petition for Review was mailed, the opposing party has thirty-five (35) days from the date of mailing to file the Response to the Petition for Review.
- D. A Reply to the Response to the Petition for Review is not allowed unless the Supreme Court orders a Reply to be filed.
- E. When the Arizona Supreme Court decides whether it will grant or deny the Petition for Review, it will mail a copy of its decision to the parties.
- F. If the Petition for Review is granted, the Supreme Court will issue an Order stating whether supplemental briefs or oral argument will be permitted.
- G. If a Petition for Review is denied, no further appeal to a state court is permitted.

Appendix 1

Frequently Asked Questions

Frequently Asked Questions

QUESTION 1: Where can I find the Arizona Rules of Civil Appellate Procedure?

ANSWER: The Arizona Rules of Civil Appellate Procedure are in the Arizona Revised Statutes located at any law library and at <http://azrules.westgroup.com/home/azrules/default.wl>.

QUESTION 2: What does it cost to file a Petition for Special Action-Industrial Commission?

ANSWER: The Petitioner's filing fee payable to the Court of Appeals is currently \$140.00. These fees may change. You should check the fees posted on the websites for Division One and Division Two of the Court of Appeals. The website address for Division One is: www.cofad1.state.az.us. The website for Division Two is: www.appeals2.az.gov. After the Petition for Special Action-Industrial Commission is filed, the Court of Appeals clerk will notify the Petitioner by mail that the Court of Appeals filing fee is due.

QUESTION 3: How long will it take for the Court of Appeals to make its decision?

ANSWER: This time period can vary depending on the nature of the case. It often takes several months from the date the Petition for Special Action-Industrial Commission is filed until the Court of Appeals makes its written decision.

QUESTION 4: Who can a self-represented party speak to at the Court of Appeals or the Supreme Court?

ANSWER: A self-represented party can only speak to the Clerk or the Deputy Clerks. The Clerk and the Deputy Clerks cannot give legal advice. The self-represented party cannot contact any staff member, judge, or other person at the Court of Appeals or the Supreme Court about the party's case.

QUESTION 5: What is a Request for Review?

ANSWER: It is an appeal to the same ALJ who handled your hearing and the first step in the appellate process. If you disagree with the ALJ's award, you must file a timely Request for Review to say why you disagree.

QUESTION 6: How is a Request for Review different from a Petition for Review?

ANSWER: The Request for Review is filed in the ICA with the same ALJ who handled your hearing. A Petition for Review is filed as the third step in an appeal to object to a written decision of the Court of Appeals. The Petition for Review is filed in the Court of Appeals, and requests that the Arizona Supreme Court review the decision of the Court of Appeals. Filing a Petition for Special Action-Industrial Commission is the second step. It is filed

in the Court of Appeals and requests review of the ICA's award after the Decision upon Review has been mailed.

QUESTION 7: What is a Petition for Review?

ANSWER: A Petition for Review asks the Arizona Supreme Court to review a decision made by the Court of Appeals.

QUESTION 8: Can I file a Motion for Reconsideration if the Arizona Supreme Court denies my Petition for Review?

ANSWER: No. You may not ask the Arizona Supreme Court to reconsider its decision denying your Petition for Review.

QUESTION 9: How long after the Court of Appeals issues its decision do I have to file a Petition for Review?

ANSWER: You have thirty (30) days to file a Petition for Review with the Clerk of the Court of Appeals after the Court of Appeals issues its decision.

QUESTION 10: Where do I file the Petition for Review to the Arizona Supreme Court?

ANSWER: The Petition for Review is filed with the Clerk of the Court of Appeals that issued the decision you are seeking to have the Arizona Supreme Court review.

QUESTION 11: What is the difference between a hearing and an oral argument for an appeal?

ANSWER: An oral argument is an opportunity to discuss why the ALJ's decision was incorrect. No new evidence is presented. An appellate court will consider only the papers, exhibits, and testimony presented to the ICA. The appellate courts do not conduct hearings where evidence is presented.

QUESTION 12: Who can I call to get legal advice?

ANSWER: You should call an attorney to get legal advice. Most county bar associations have a "Lawyers Referral Service" that can help find you an attorney. In addition, the Arizona State Bar website (www.azbar.org) has links that can help you locate an attorney.

QUESTION 13: Can the Court of Appeals appoint an attorney to represent me?

ANSWER: No. The right to appointed counsel applies only in some criminal and juvenile cases.

APPROPRIATE QUESTIONS FOR THE CLERKS OF THE COURT OF APPEALS OR THE
ARIZONA SUPREME COURT

WE ARE HAPPY TO HELP YOU IF WE CAN. AS WE MUST BE FAIR TO EVERYONE, WE ARE
ALLOWED TO HELP YOU ONLY IN CERTAIN WAYS.

This is a list of some things that court personnel can and cannot do for you:

- We can explain and answer general questions about how the court works.
- We can give you general information about court rules, procedures, and practices.
- We can provide you with the telephone number for local lawyer referral services, legal aid programs, and other services where you can get legal information.
- We can provide court schedules and information on how to get a case scheduled.
- We can give you information from your case file that is not restricted.
- We can provide you with court forms and instructions that are available.
- We can usually answer questions about court filing deadlines.

- We cannot tell you whether you should bring your case to court.
- We cannot tell you what words to use in your court papers or whether they are correct.
- We cannot tell you what to say in court.
- We cannot give you an opinion about what will happen if you bring your case to court.
- We cannot conduct legal research for you.
- We cannot talk to the judge for you or let you talk to the judge outside of court.
- We cannot alter court documents.

Appendix 2

Important Terms

Important Terms

AFFIDAVIT:

This is a paper signed by an individual who swears under oath that the facts or conduct described in the affidavit are true. Beneath the signature of the person signing the affidavit is a statement by a notary public indicating that the person who signed the affidavit presented proof of identity.

ANSWERING BRIEF:

This is the paper filed by the party opposing the appeal (the Respondent) in response to the Opening Brief filed by the party filing the appeal, (the Petitioner). The Answering Brief should contain arguments in support of the ALJ's award and references to the transcripts or hearing exhibits supporting those arguments. (See **Form 8(a) or 8(b)**).

APPEAL:

An appeal begins when a timely Request for Review is filed with the claims division of the ICA after the ALJ issues an award, and then a timely Petition for Special Action-Industrial Commission is filed in Division One of the Court of Appeals in Phoenix after the ALJ issues a Decision upon Review affirming the ALJ's award. Appeals of worker's compensation cases are made from the ICA to the Court of Appeals. The Arizona Supreme Court can be asked to review final decisions of the Court of Appeals. The Arizona Supreme Court may choose to accept or reject review of final decisions of the Court of Appeals.

ARIZONA SUPREME COURT:

This is the highest state appellate court in Arizona. The Court is located in Phoenix and has discretion to review decisions from either Division One or Two of the Court of Appeals.

AWARD:

The finding or decision of an administrative law judge or the ICA as to the amount of compensation or benefit due an injured employee or the dependents of a deceased employee.

BRIEF:

This is an argument in writing that explains why the award of the ALJ should be reversed or affirmed by the Court of Appeals. The Petitioner files an Opening Brief with the Clerk of the Court of Appeals. The Respondent then files an Answering Brief. Afterward, the Petitioner may file a Reply Brief. (See **Form 8(a) or 8(b)**).

BUSINESS DAY:

Each day of the week that is not a Saturday, Sunday, or official state holiday.

CAPTION:

The caption is part of any paper filed with the ICA, the Court of Appeals or the Arizona Supreme Court that states: (1) the ICA or court in which the paper is being filed; (2) the name of the Petitioner and Respondent in the ICA case; (3) the ICA claim number; (4) the insurance carrier claim number; and (5) the case number assigned by the Court of Appeals or the Arizona Supreme Court. An example of the caption used for papers filed in the ICA can be found at **Form 2**, and an example of the caption used for papers filed in the Court of Appeals can be found at **Form 3**.

CERTIFICATE OF COMPLIANCE:

This is a page that must be attached to the end of the Opening Brief, Answering Brief, or Reply Brief. (See **Form 8(a) or 8(b)**). The Certificate of Compliance tells the Court of Appeals that the Brief does not exceed the word count or page limit set by the Arizona Rules of Civil Appellate Procedure.

CLERK’S OFFICE:

All of the appellate courts in Arizona have an office for the “clerk” of that court. The clerk is a public official responsible for filing papers and keeping records of court proceedings. There is a clerk for both Division One and Division Two of the Court of Appeals. There is also a clerk for the Arizona Supreme Court.

DECISION UPON REVIEW:

This review is made by the ALJ after the filing of a Request for Review and is based on the record and the memoranda, if any, submitted by the parties. The ALJ may affirm, reverse, rescind, modify, or supplement the award, and make any disposition of the case that is appropriate. A decision by the ALJ must be made within sixty (60) days after the review has been requested. The Decision upon Review becomes part of the ICA file and a copy is mailed to the parties.

DIVISION ONE OF COURT OF APPEALS:

Division One of the Court of Appeals is located at 1501 W. Washington, Phoenix, Arizona 85007. Division One hears appeals from ALJ awards in Maricopa, Yuma, La Paz, Mohave, Coconino, Yavapai, Navajo, or Apache Counties. All Petitions for Special Action-Industrial Commission are filed in Division One, but petitions are then transferred to Division Two if the case arises from an ALJ award in Pima, Pinal, Cochise, Santa Cruz, Greenlee, Graham, or Gila Counties.

DIVISION TWO OF COURT OF APPEALS:

Division Two of the Court of Appeals is located at 400 W. Congress, Tucson, Arizona 85701. Division Two hears appeals from ALJ awards in the counties of Pima, Pinal, Cochise, Santa Cruz, Greenlee, Graham, and Gila.

EVIDENCE:

Evidence consists of the testimony of witnesses, documents, or items admitted by the ALJ as exhibits, and facts agreed to by the parties. The Court of Appeals and the Arizona Supreme Court will only review evidence and arguments presented to the ALJ.

FILING:

To “file” a paper is to give it to the ICA or the Clerk’s Office at the court where the case is pending. The paper will then become part of the case record. Papers can be filed with the ICA or the clerk of the court in person or by mail. The Clerk’s Office may reject filing papers that do not comply with applicable rules.

FILING FEE FOR THE APPEAL:

An amount of money that the law requires the Petitioner to pay to pursue an appeal. The Court of Appeals will issue a written Notice that explains to the parties the amount of money that must be paid as the filing fee. This filing fee must be paid within the time set forth in the Notice, unless a deferral or waiver of this fee is obtained from the Court of Appeals. (See **Form 7(a) or 7(b)**).

MOTION:

A paper filed with the ICA, the Court of Appeals, or the Arizona Supreme Court requesting that certain relief be granted. For example, a motion can be filed in the Court of Appeals requesting an extension of time to file the Opening Brief. (See **Form 9(a) or 9(b)**).

OPENING BRIEF:

The paper filed by the party pursuing the appeal (the Petitioner). The Opening Brief should contain a procedural history of the case (Statement of the Case), a Statement of Material Facts, Issues Presented for Review, Arguments supporting reversal of the ALJ’s award, a Conclusion, and proof that the Opening Brief was timely filed in the Court of Appeals and copies were hand-delivered or mailed to the party opposing the appeal (Certificate of Compliance). (See **Form 8(a) or 8(b)**).

ORAL ARGUMENT:

This is an opportunity for the Respondent and Petitioner to appear in person at a time set by the Court of Appeals to discuss the issues and arguments presented in the briefs with the judges of the Court of Appeals. These judges will decide whether to affirm or reverse the ICA award. (See **Form 11(a) or 11(b)**).

ORDER:

A written direction or command delivered by an ALJ, a court or a judge.

PARTY:

A party is a person or entity that either files or defends a claim for worker's compensation benefits in the ICA. By statute the ICA is always a party.

PETITION FOR REVIEW/RESPONSE TO PETITION FOR REVIEW:

A paper that a party files with the Clerk of the Court of Appeals if that party wants the Arizona Supreme Court to review a decision of the Court of Appeals. The Petition for Review must be filed with the Clerk of the Court of Appeals within thirty (30) days after the Court of Appeals files its decision. If a Petition for Review is filed on time, the opposing side will have thirty (30) days from the date the Petition for Review is served by hand delivery or thirty-five (35) days after service by mail, to file any objections in a paper called a Response to Petition for Review. The Response to the Petition for Review is filed with the Clerk of the Arizona Supreme Court. (See **Forms 13(a) or 13(b) or Form 14(a) or 14(b)**).

PETITION FOR SPECIAL ACTION-INDUSTRIAL COMMISSION:

This is a document entitled "Petition for Special Action-Industrial Commission" (the "petition") that must be filed in Division One of the Court of Appeals in Phoenix, Arizona within thirty (30) days after the ICA mails the Decision upon Review. The caption of the petition must name each party to the award, including the ICA, and appropriately designate each party's interest in the matter. (See **Form 5(a) or 5(b)**). The body of the petition must identify the award sought to be reviewed by the Court of Appeals, including the date it was issued by the ALJ. The body of the petition should also request that the Court of Appeals issue a "Writ of Review" directing the ICA to certify its claims file to the Court of Appeals within ten (10) business days after issuance of the Writ of Review.

PETITIONER:

This is the party filing an appeal. The Petitioner asks the Court of Appeals to review the award of the ALJ after the ALJ has issued the Decision upon Review. The Petitioner files a Petition for Special Action-Industrial Commission with the clerk of the Court of Appeals.

"PRO SE" OR "PRO PER" LITIGANTS:

These are persons who represent themselves before the ICA or in a court of law without the assistance of an attorney.

REPLY BRIEF:

This is an optional paper that the Petitioner may file in response to the Answering Brief. The Reply Brief should respond to the arguments in the Answering Brief and should not merely repeat the same arguments that were made in the Opening Brief. The Reply Brief should refer to the hearing transcripts

or exhibits to show that the facts supporting the argument can be found in the record. (See **Form 8(a) or 8(b)**).

REQUEST FOR REVIEW:

This is a document filed by the Petitioner after the ALJ issues the award. It is filed with the ICA and asks the ALJ to review the evidence previously presented and to reverse, rescind, modify, or supplement the award, and make any disposition of the case that is appropriate. An appeal begins when a timely Request for Review is filed with the same ALJ that handled the hearing after that ALJ issues an Award. (See **Form 2**).

RESPONDENT:

This is any party to the ICA case opposing the appeal.

SERVICE:

Service occurs when one party delivers a copy of a legal paper to the other party or parties. Service may be personal (hand-delivered) or by mail. All papers filed with the clerk of the Court of Appeals or the clerk of the Arizona Supreme Court must be served on the other parties to an appeal. If the other party has an attorney, the papers must be served on the attorney. If the other party does not have an attorney, the papers must be served on the other party at the other party's last known address.

STATEMENT OF COSTS:

This is a paper that the party who wins on appeal can file in order to recover the costs he or she incurred in preparing the appeal from the unsuccessful party. (See **Form 12(a) or 12(b)**).

TIMELY FILE:

To timely file a paper means to file it on or before the last day set forth in this guide or prior to any other date set by the Court of Appeals or the Arizona Supreme Court in a notice sent to the parties. If the last day for timely filing the paper falls on a Saturday, Sunday, or official state holiday, it must be filed on the next day which is not a Saturday, Sunday, or official state holiday.

TRANSCRIPTS:

These are papers prepared by the ICA that contain an exact record of what was said and done in proceedings that took place in the ICA hearings.

WRIT OF REVIEW:

The Clerk of Division One of the Court of Appeals issues the Writ of Review and serves it on the ICA and all other parties to the Special Action on the same or next business day after the petition has been filed. Within ten (10) business days after service of the Writ of Review on the ICA, it transmits the entire claims file to the appropriate division of the Court of Appeals, together with an affidavit certifying that the claims file is the full, true, and complete record before the ICA.

Appendix 3

FORMS

INDEX OF ICA FORMS

SPECIAL NOTE:

IF THE PETITIONER IS THE APPLICANT/EMPLOYEE THEN FORM (a) SHOULD BE USED.

IF THE PETITIONER IS THE EMPLOYER/INSURANCE CARRIER, THEN FORM (b) SHOULD BE USED.

Information to complete the forms should be TYPED rather than hand-written.

- Form 1 Notice of Change of Address with the ICA
- Form 2 Request for Review
- Form 3(a) Notice of Change of Address (Court of Appeals)
- Form 3(b) Notice of Change of Address (Court of Appeals)
- Form 4(a) Notice of Change of Address (Arizona Supreme Court)
- Form 4(b) Notice of Change of Address (Arizona Supreme Court)
- Form 5(a) Petition for Special Action – Industrial Commission
- Form 5(b) Petition for Special Action – Industrial Commission
- Form 6(a) Notice of Appearance
- Form 6(b) Notice of Appearance
- Form 7(a) Application for Deferral or Waiver of Court Fees and/or Costs
- Form 7(b) Application for Deferral or Waiver of Court Fees and/or Costs
- Form 8(a) Petitioner’s Opening Brief / Respondent’s Answering Brief / Petitioner’s Reply Brief
- Form 8(b) Petitioner’s Opening Brief / Respondent’s Answering Brief / Petitioner’s Reply Brief
- Form 9(a) Motion for Extension of Time to File Brief
- Form 9(b) Motion for Extension of Time to File Brief
- Form 10(a) Stipulation for Extension of Time to File Brief
- Form 10(b) Stipulation for Extension of Time to File Brief

INDEX OF ICA FORMS

Form 11(a) Request for Oral Argument

Form 11(b) Request for Oral Argument

Form 12(a) Statement of Costs

Form 12(b) Statement of Costs

Form 13(a) Petition for Review (filed in the Court of Appeals)

Form 13(b) Petition for Review (filed in the Court of Appeals)

Form 14(a) Response to Petition for Review (filed in the Arizona Supreme Court)

Form 14(b) Response to Petition for Review (filed in the Arizona Supreme Court)

SPECIAL NOTE:

**IF AN OPPOSING PARTY IS REPRESENTED BY AN ATTORNEY,
THESE FORMS MUST BE SERVED ON THE ATTORNEY FOR THE PARTY,
RATHER THAN ON THE OPPOSING PARTY.**

[Date]: _____

Industrial Commission of Arizona
2675 E. Broadway
Tucson, AZ 85716

Industrial Commission of Arizona
800 W. Washington Street
Phoenix, AZ 85007

Re: Applicant: _____
ICA Claim No.: _____
Ins. Claim No.: _____
Date of Injury: _____

Dear Sir/Madam:

This is to inform you of a change of address effective [date] _____ ,
200__ for [Applicant/Employer] _____. Please change address
from:

Old Address: _____

To New Address: _____

Sincerely,

[Applicant/Employer]

PROOF OF SERVICE

The undersigned _____ [Applicant/Employer] on the ____ day of _____, 200____, mailed an Original of the Notice of Change of Address either the Tucson or Phoenix office of the ICA; and mailed a copy to the following parties:

[Petitioner/Respondent or Counsel]

Address

City, State, Zip Code

Insurance Carrier or Counsel

Address

City, State, Zip Code

Dated: _____

[Applicant/Employer]

THE INDUSTRIAL COMMISSION OF ARIZONA

	Applicant,
v.	
	Respondent
EMPLOYER	
INSURANCE CARRIER	
	Respondent

ICA Claim No. _____
 Ins. Claim No. _____
 Date of Injury: _____

REQUEST FOR REVIEW

(The Honorable _____)

Pursuant A.R.S. § 23-942(D) and A.R.S. § 23-943(A) and (B),
 _____ [Petitioner/Respondent] files his/her Request for Review of
 the Decision Upon Hearing and Findings and Award dated _____, 200__ and
 maintains that the Award is not justified by the evidence and is contrary to law.*

Dated: _____

Print Name [Petitioner/Respondent]

Signature

Address

*This request may be accompanied by a memorandum of points and authority in support of the Request.

PROOF OF SERVICE

The undersigned _____ [Petitioner/Respondent]
on the ____ day of _____, 200 ____, filed an Original of the Request for Review in
the ICA; and mailed a copy to the following parties:

[Petitioner/Respondent or Counsel]

Address

City, State, Zip Code

Industrial Commission of Arizona

Address

City, State, Zip Code

Dated: _____

[Petitioner/Respondent]

IN THE COURT OF APPEALS
STATE OF ARIZONA
DIVISION ____

APPLICANT,

Petitioner,

v.

THE INDUSTRIAL
COMMISSION OF ARIZONA,
Respondent,

EMPLOYER
Respondent

INSURANCE CARRIER
Respondent

No. __ CA-IC _____

ICA No. _____

Carrier No. _____

NOTICE OF CHANGE OF ADDRESS

The party signing this document is the _____

[Petitioner/ Respondent]. This party advises this Court that _____ [his/her]

address has changed. This party's current address is as follows:

[Full address and phone number].

Dated: _____

Print Name [Petitioner/ Respondent]

Signature

Address

PROOF OF SERVICE

The undersigned _____ [Petitioner/Respondent] on the ____ day of _____, 200____, filed an Original and four (4) copies of the Notice of Change of Address in the Court of Appeals; and mailed a copy to the following parties:

[Petitioner/Respondent or Counsel]

Address

City, State, Zip Code

Industrial Commission of Arizona

Address

City, State, Zip Code

Dated: _____

[Petitioner/ Respondent]

IN THE COURT OF APPEALS
STATE OF ARIZONA
DIVISION _____

EMPLOYER

Petitioner,

No. __ CA-IC _____

ICA No. _____

Carrier No. _____

INSURANCE CARRIER

Petitioner,

NOTICE OF CHANGE OF ADDRESS

v.

THE INDUSTRIAL
COMMISSION OF ARIZONA,

Respondent,

APPLICANT

Respondent

The party signing this document is the _____

[Petitioner/ Respondent]. This party advises this Court that _____ [his/her]

address has changed. This party's current address is as follows:

[Full address and phone number].

Dated: _____

Print Name [Petitioner/ Respondent]

Signature

Address

PROOF OF SERVICE

The undersigned _____ [Petitioner/Respondent] on the ____ day of _____, 200____, filed an Original and four (4) copies of the Notice of Change of Address in the Court of Appeals; and mailed a copy to the following parties:

[Petitioner/Respondent or Counsel]

Address

City, State, Zip Code

Industrial Commission of Arizona

Address

City, State, Zip Code

Dated: _____

[Petitioner/ Respondent]

ARIZONA SUPREME COURT

APPLICANT,

Petitioner,

v.

THE INDUSTRIAL COMMISSION
OF ARIZONA,

Respondent,

EMPLOYER

Respondent

INSURANCE CARRIER

Respondent

No. ____ CA-IC _____

ICA No. _____

Carrier No. _____

**NOTICE OF CHANGE OF
ADDRESS**

The party signing this document is the _____ [Petitioner/
Respondent]. This party advises this Court that _____ [his/her] address has changed. This
party's current address is as follows: _____

[Full address and phone number].

Dated: _____

Print Name [Petitioner/ Respondent]

Signature

Address

PROOF OF SERVICE

The undersigned _____ [Petitioner/Respondent] on the ____ day of _____, 200____, filed an Original and seven (7) copies of the Notice of Change of Address in the Arizona Supreme Court; and mailed a copy to the following parties:

[Petitioner/Respondent or Counsel]

Address

City, State, Zip Code

Industrial Commission of Arizona

Address

City, State, Zip Code

Dated: _____

[Petitioner/ Respondent]

ARIZONA SUPREME COURT

_____	No. ____ CA-IC _____
EMPLOYER	
Petitioner,	ICA No. _____
_____	Carrier No. _____
INSURANCE CARRIER	
Petitioner,	
v.	NOTICE OF CHANGE OF ADDRESS
THE INDUSTRIAL COMMISSION OF ARIZONA,	
Respondent,	

APPLICANT	
Respondent	

The party signing this document is the _____ [Petitioner/ Respondent]. This party advises this Court that _____ [his/her] address has changed. This party's current address is as follows: _____

[Full address and phone number].

Dated: _____

Print Name [Petitioner/ Respondent]

Signature

Address

PROOF OF SERVICE

The undersigned _____ [Petitioner/Respondent] on the ____ day of _____, 200____, filed an Original and seven (7) copies of the Notice of Change of Address in the Arizona Supreme Court; and mailed a copy to the following parties:

[Petitioner/Respondent or Counsel]

Address

City, State, Zip Code

Industrial Commission of Arizona

Address

City, State, Zip Code

Dated: _____

[Petitioner/ Respondent]

IN THE COURT OF APPEALS
STATE OF ARIZONA
DIVISION ONE

_____	No. ___ CA-IC _____
APPLICANT,	ICA No. _____
	Carrier No. _____
Petitioner,	
v.	
THE INDUSTRIAL	PETITION FOR SPECIAL ACTION –
COMMISSION OF ARIZONA,	INDUSTRIAL COMMISSION
Respondent,	

EMPLOYER	
Respondent	

INSURANCE CARRIER	
Respondent	

Petitioner(s) request that the Court of Appeals review the award of the Industrial Commission in ICA No. _____, dated _____, and the decision on review, dated _____, and that the Clerk of the Court of Appeals issue a Writ of Review directing the Industrial Commission to certify its records, proceedings and evidence in this matter to the Court of Appeals.

Dated: _____

Print Name [Petitioner/ Respondent]

Signature

Address

PROOF OF SERVICE

The undersigned _____ [Petitioner/Respondent]
on the ____ day of _____, 200____, filed an Original and six (6) copies of the
Petition for Special action – Industrial Commission in the Court of Appeals; and
mailed a copy to the following parties:

[Petitioner/Respondent or Counsel]

Address

City, State, Zip Code

Industrial Commission of Arizona

Address

City, State, Zip Code

Dated: _____

[Petitioner/ Respondent]

IN THE COURT OF APPEALS
STATE OF ARIZONA
DIVISION ONE

EMPLOYER

Petitioner,

No. ____ CA-IC _____

ICA No. _____

INSURANCE CARRIER

Petitioner,

Carrier No. _____

v.

THE INDUSTRIAL COMMISSION
OF ARIZONA,

Respondent,

**PETITION FOR SPECIAL ACTION –
INDUSTRIAL COMMISSION**

APPLICANT

Respondent

Petitioner(s) request that the Court of Appeals review the award of the Industrial Commission in ICA No. _____, dated _____, and the decision on review, dated _____, and that the Clerk of the Court of Appeals issue a Writ of Review directing the Industrial Commission to certify its records, proceedings and evidence in this matter to the Court of Appeals.

Dated: _____

Print Name [Petitioner/ Respondent]

Signature

Address

PROOF OF SERVICE

The undersigned _____ [Petitioner/Respondent] on the ____ day of _____, 200____, filed an Original and six (6) copies of the Petition for Special action – Industrial Commission in the Court of Appeals; and mailed a copy to the following parties:

[Petitioner/Respondent or Counsel]

Address

City, State, Zip Code

Industrial Commission of Arizona

Address

City, State, Zip Code

Dated: _____

[Petitioner/ Respondent]

IN THE COURT OF APPEALS
STATE OF ARIZONA
DIVISION _____

_____ APPLICANT, Petitioner, v. THE INDUSTRIAL COMMISSION OF ARIZONA, Respondent, _____ EMPLOYER Respondent _____ INSURANCE CARRIER Respondent	No. __ CA-IC _____ ICA No. _____ Carrier No. _____ NOTICE OF APPEARANCE
--	---

Pursuant to Rule 10(f), Rules of Procedure for Special actions, Respondent(s) give(s) notice of intention to participate in the determination of the above-captioned matter before the Court of Appeals.

Dated: _____

Print Name [Petitioner/ Respondent]

Signature

Address

PROOF OF SERVICE

The undersigned _____ [Petitioner/Respondent]
on the ____ day of _____, 200____, filed an Original and four (4) copies of the
Notice of Appearance in the Court of Appeals; and mailed a copy to the following
parties:

[Petitioner/Respondent or Counsel]

Address

City, State, Zip Code

Industrial Commission of Arizona

Address

City, State, Zip Code

Dated: _____

[Petitioner/ Respondent]

IN THE COURT OF APPEALS
STATE OF ARIZONA
DIVISION _____

EMPLOYER

Petitioner,

INSURANCE CARRIER

Petitioner,

v.

THE INDUSTRIAL
COMMISSION OF ARIZONA,
Respondent,

APPLICANT

Respondent

No. __ CA-IC _____

ICA No. _____

Carrier No. _____

NOTICE OF APPEARANCE

Pursuant to Rule 10(f), Rules of Procedure for Special actions, Respondent(s) give(s) notice of intention to participate in the determination of the above-captioned matter before the Court of Appeals.

Dated: _____

Print Name [Petitioner/ Respondent]

Signature

Address

PROOF OF SERVICE

The undersigned _____ [Petitioner/Respondent]
on the ____ day of _____, 200____, filed an Original and four (4) copies of the
Notice of Appearance of Address in the Court of Appeals; and mailed a copy to the
following parties:

[Petitioner/Respondent or Counsel]

Address

City, State, Zip Code

Industrial Commission of Arizona

Address

City, State, Zip Code

Dated: _____

[Petitioner/ Respondent]

2. _____ FURTHER DEFERRAL

- _____ a. I receive government assistance from the state/federal program(s) checked below:
- _____ Temporary Assistance for Needy Families (TANF)
 - _____ Food Stamps
 - _____ Supplemental Security Income (SSI)
 - _____ General Assistance (GA)

If you checked any of the above boxes in 1 or 2, you must complete the Financial Questionnaire. You must submit proof that you receive government assistance. If you are submitting this application by mail or a third party, you must attach a photocopy of that proof.

OR

- _____ b. My income is sufficient or is barely sufficient to meet the daily essentials of life, and includes no allotment that could be budgeted for the fees and costs that are required to gain access to the court.

To determine whether income is sufficient or barely sufficient, the court will review your income and expenses. Among the factors the court may consider are:

1. Whether your gross income as computed on a monthly basis is 150% or less of the current federal poverty level. Gross monthly income includes your share of community property income if available to you.
2. Although your income is greater than 150% of the poverty level, you have proof of extraordinary expenses, including medical expenses, costs of care for elderly or disabled family members or other expenses that the court finds are extraordinary and that reduce your gross monthly income to at or below 150% of the poverty level.

OR

- _____ c. I do not have the money to pay court filing fees and/or costs now. I can pay the filing fees and/or costs at a later date. Explain: _____
- _____
- _____

If you checked either boxes 2b or 2c, you must complete the Financial Questionnaire.

FINANCIAL QUESTIONNAIRE

SUPPORT RESPONSIBILITIES: List all persons you support (including those for whom you pay child support and/or spousal maintenance/support).

NAME	RELATIONSHIP
_____	_____
_____	_____
_____	_____
_____	_____

STATEMENT OF INCOME AND EXPENSES

ASSISTANCE: I receive assistance from:
_____ Arizona Health Care Cost Containment System (AHCCCS)
_____ Arizona Long Term Care System (ALTUS)
_____ Other (explain):

MONTHLY INCOME: My monthly income is:
Monthly gross income: \$ _____
Employer name: _____
Employer address: _____
Employed since (month/year): _____

Other current monthly income including spousal maintenance/support, retirement, rental, interest, pensions, scholarships, grants, royalties, lottery winnings (explain amount and source): \$ _____

My spouse's monthly gross income (if available to me): \$ _____

MONTHLY EXPENSES AND DEBTS: My monthly expenses and debts are:

	Payment Amount	Loan Balance
Rent/Mortgage Payment	\$ _____	\$ _____
Car Payment	\$ _____	\$ _____
Credit Card Payments	\$ _____	\$ _____
Other Payments and Debts	\$ _____	\$ _____
Explain:		
Food/Household supplies	\$ _____	
Utilities/Telephone	\$ _____	
Clothing	\$ _____	
Medical/Dental/Drugs	\$ _____	
Health Insurance	\$ _____	
Nursing Care	\$ _____	
Laundry	\$ _____	
Child Support	\$ _____	
Child Care	\$ _____	
Spousal Maintenance	\$ _____	
Car Insurance	\$ _____	
Gasoline/Bus Fare	\$ _____	
Contributions to Employer or other retirement account	\$ _____	
TOTAL MONTHLY PAYMENTS:	\$ _____	

STATEMENT OF ASSETS. List only those assets available to you and accessible without financial penalty. Equity is defined as market value minus any liens or loans.

	ESTIMATED VALUE
Cash and Bank Accounts	\$ _____
Credit Union Accounts	\$ _____
Equity in:	
Home	\$ _____
Other Property	\$ _____
Cars and other vehicles	\$ _____
Other, including stocks, bonds, etc.	\$ _____
Retirement Accounts	\$ _____
TOTAL ASSETS:	\$ _____

EXTRAORDINARY EXPENSES: For example, unusual medical needs, financial hardship, costs of care of elderly or disabled family members. (Proof must be submitted.)

DESCRIPTION	AMOUNT
	\$ _____
	\$ _____
TOTAL EXTRAORDINARY EXPENSES:	\$ _____

SIGNATURE UNDER PENALTY OF PERJURY

Dated: _____

Print Name

Signature [**Applicant/Employer**]

PROOF OF SERVICE

The undersigned _____ [Petitioner/Respondent] on the ____ day of _____, 200____, filed an Original and four (4) copies of the Application for Deferral or Waiver of Court Fees and/or Costs in the Court of Appeals; and mailed a copy to the following parties:

[Petitioner/Respondent or Counsel]

Address

City, State, Zip Code

Industrial Commission of Arizona

Address

City, State, Zip Code

Dated: _____

[Petitioner/Respondent]

2. _____ FURTHER DEFERRAL

- _____ a. I receive government assistance from the state/federal program(s) checked below:
- _____ Temporary Assistance for Needy Families (TANF)
 - _____ Food Stamps
 - _____ Supplemental Security Income (SSI)
 - _____ General Assistance (GA)

If you checked any of the above boxes in 1 or 2, you must complete the Financial Questionnaire. You must submit proof that you receive government assistance. If you are submitting this application by mail or a third party, you must attach a photocopy of that proof.

OR

- _____ b. My income is sufficient or is barely sufficient to meet the daily essentials of life, and includes no allotment that could be budgeted for the fees and costs that are required to gain access to the court.

To determine whether income is sufficient or barely sufficient, the court will review your income and expenses. Among the factors the court may consider are:

1. Whether your gross income as computed on a monthly basis is 150% or less of the current federal poverty level. Gross monthly income includes your share of community property income if available to you.
2. Although your income is greater than 150% of the poverty level, you have proof of extraordinary expenses, including medical expenses, costs of care for elderly or disabled family members or other expenses that the court finds are extraordinary and that reduce your gross monthly income to at or below 150% of the poverty level.

OR

- _____ c. I do not have the money to pay court filing fees and/or costs now. I can pay the filing fees and/or costs at a later date. Explain: _____
- _____
- _____
- _____

If you checked either boxes 2b or 2c, you must complete the Financial Questionnaire.

FINANCIAL QUESTIONNAIRE

SUPPORT RESPONSIBILITIES: List all persons you support (including those for whom you pay child support and/or spousal maintenance/support).

NAME	RELATIONSHIP
_____	_____
_____	_____
_____	_____
_____	_____

STATEMENT OF INCOME AND EXPENSES

ASSISTANCE: I receive assistance from:

- _____ Arizona Health Care Cost Containment System (AHCCCS)
- _____ Arizona Long Term Care System (ALTUS)
- _____ Other (explain):

MONTHLY INCOME: My monthly income is:

Monthly gross income: \$ _____
Employer name: _____
Employer address: _____
Employed since (month/year): _____

Other current monthly income including spousal maintenance/support, retirement, rental, interest, pensions, scholarships, grants, royalties, lottery winnings (explain amount and source): \$ _____

My spouse's monthly gross income (if available to me): \$ _____

MONTHLY EXPENSES AND DEBTS: My monthly expenses and debts are:

	Payment Amount	Loan Balance
Rent/Mortgage Payment	\$ _____	\$ _____
Car Payment	\$ _____	\$ _____
Credit Card Payments	\$ _____	\$ _____
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Clothing	\$ _____	
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Nursing Care	\$ _____	
Laundry	\$ _____	
Child Support	\$ _____	
Child Care	\$ _____	
Spousal Maintenance	\$ _____	
Car Insurance	\$ _____	
Gasoline/Bus Fare	\$ _____	
Contributions to Employer or other retirement account	\$ _____	
TOTAL MONTHLY PAYMENTS:	\$ _____	

STATEMENT OF ASSETS. List only those assets available to you and accessible without financial penalty. Equity is defined as market value minus any liens or loans.

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Cash and Bank Accounts	\$ _____
Credit Union Accounts	\$ _____
Equity in:	
Home	\$ _____
Other Property	\$ _____
Cars and other vehicles	\$ _____
Other, including stocks, bonds, etc.	\$ _____
Retirement Accounts	\$ _____
TOTAL ASSETS:	\$ _____

EXTRAORDINARY EXPENSES: For example, unusual medical needs, financial hardship, costs of care of elderly or disabled family members. (Proof must be submitted.)

DESCRIPTION	AMOUNT
	\$ _____
	\$ _____
TOTAL EXTRAORDINARY EXPENSES:	\$ _____

SIGNATURE UNDER PENALTY OF PERJURY

Dated: _____

Print Name

Signature [**Applicant/Employer**]

PROOF OF SERVICE

The undersigned _____ [Applicant/Employer] on the _____ day of _____, 200____, filed an Original and four (4) copies of the Application for Deferral or Waiver of Court Fees and/or Costs in the Court of Appeals; and mailed a copy to the following parties:

[Petitioner/Respondent or Counsel]

Address

City, State, Zip Code

Industrial Commission of Arizona

Address

City, State, Zip Code

Dated: _____

[Applicant/Employer]

IN THE COURT OF APPEALS
STATE OF ARIZONA
DIVISION _____

_____	No. ____ CA-IC _____
APPLICANT,	ICA No. _____
	Carrier No. _____
Petitioner,	
v.	
THE INDUSTRIAL	
COMMISSION OF ARIZONA,	
Respondent,	

EMPLOYER	
Respondent	

INSURANCE CARRIER	
Respondent	

**[PETITIONER’S OPENING BRIEF] [RESPONDENT’S ANSWERING BRIEF]
OR [PETITIONER’S REPLY BRIEF]**

Print Name [Petitioner/Respondent]

Signature

Address

[USE APPROPRIATE COLOR FOR THE COVER]
Cover page of Opening Brief is BLUE
Cover page of Answering Brief is RED
Cover page of Reply Brief is GRAY

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STATEMENT OF THE CASE

(*Add additional sheets of paper as necessary to complete this section)

STATEMENT OF FACTS

(*Add additional sheets of paper as necessary to complete this section)

ISSUE(S) PRESENTED

(*Add additional sheets of paper as necessary to complete this section)

ARGUMENT

(*Add additional sheets of paper as necessary to complete this section)

CONCLUSION

[Date]

[Print Name] [Petitioner/Respondent]

[Signature]

[Address]

CERTIFICATE OF COMPLIANCE

Pursuant to ARCAP 14(b), I certify that the attached brief:

- _____ Uses proportionately spaced type of 14 points or more, is double spaced using a Roman font, and contains _____ words; OR
- _____ Uses monospaced type of no more than 10.5 characters per inch and
- _____ Does not exceed 40 pages [if Opening or Answering Brief]
- _____ Does not exceed 20 pages [if Reply Brief]

Dated: _____

Print Name [Petitioner/Respondent]

Signature

Address

PROOF OF SERVICE

The undersigned _____ [Petitioner/Respondent]
on the ____ day of _____, 200__, filed an Original and six (6) copies of the
_____ [Petitioner's Opening Brief,
Respondent's Answering Brief, or Petitioner's Reply Brief] in the Court of Appeals;
and mailed a copy to the following parties:

[Petitioner/Respondent or Counsel]

Address

City, State, Zip Code

Industrial Commission of Arizona

Address

City, State, Zip Code

Dated: _____

[Petitioner/Respondent]

IN THE COURT OF APPEALS
STATE OF ARIZONA
DIVISION _____

_____ EMPLOYER Petitioner,	No. ____ CA-IC _____ ICA No. _____ Carrier No. _____
_____ INSURANCE CARRIER Petitioner,	
v.	
THE INDUSTRIAL COMMISSION OF ARIZONA, Respondent,	
_____ APPLICANT Respondent	

**[PETITIONER’S OPENING BRIEF] [RESPONDENT’S ANSWERING BRIEF]
OR [PETITIONER’S REPLY BRIEF]**

Print Name [Petitioner/Respondent]

Signature

Address

[USE APPROPRIATE COLOR FOR THE COVER]

Cover page of Opening Brief is BLUE
Cover page of Answering Brief is RED
Cover page of Reply Brief is GRAY

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B.

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A. Standards of Appellate Review

B.....

Conclusion

Certificate of Compliance

Certificate of Service

STATEMENT OF THE CASE

(*Add additional sheets of paper as necessary to complete this section)

STATEMENT OF FACTS

(*Add additional sheets of paper as necessary to complete this section)

ISSUE(S) PRESENTED

(*Add additional sheets of paper as necessary to complete this section)

ARGUMENT

(*Add additional sheets of paper as necessary to complete this section)

CONCLUSION

[Date]

[Print Name] [Petitioner/Respondent]

[Signature]

[Address]

CERTIFICATE OF COMPLIANCE

Pursuant to ARCAP 14(b), I certify that the attached brief:

- _____ Uses proportionately spaced type of 14 points or more, is double spaced using a Roman font, and contains _____ words; OR
- _____ Uses monospaced type of no more than 10.5 characters per inch and
- _____ Does not exceed 40 pages [if Opening or Answering Brief]
- _____ Does not exceed 20 pages [if Reply Brief]

Dated: _____

Print Name [Petitioner/Respondent]

Signature

Address

PROOF OF SERVICE

The undersigned _____ [Petitioner/Respondent]
on the ____ day of _____, 200____, filed an Original and six (6) copies of the
_____ [Petitioner's Opening Brief,
Respondent's Answering Brief, or Petitioner's Reply Brief] in the Court of Appeals; and
mailed a copy to the following parties:

[Petitioner/Respondent or Counsel]

Address

City, State, Zip Code

Industrial Commission of Arizona

Address

City, State, Zip Code

Dated: _____

[Petitioner/Respondent]

IN THE COURT OF APPEALS
STATE OF ARIZONA
DIVISION _____

APPLICANT,

Petitioner,

v.

THE INDUSTRIAL
COMMISSION OF ARIZONA,
Respondent,

EMPLOYER
Respondent

INSURANCE CARRIER
Respondent

No. __ CA-IC _____

ICA No. _____

Carrier No. _____

**MOTION FOR EXTENSION OF
TIME TO FILE BRIEF**

_____ [Petitioner/Respondent] requests an extension of time
within which to file _____ [his/hers] _____ [Opening/
Answering/Reply] Brief from _____ [Date Currently Due] to
_____ [New Date] for the reasons that

_____ [Set Forth Reasons].

Dated: _____

Print Name [Petitioner/Respondent]

Signature

Address

PROOF OF SERVICE

The undersigned _____ [Petitioner/Respondent]
on the ____ day of _____, 200____, filed an Original and four (4) copies of the
Motion for Extension of Time to File Brief in the Court of Appeals; and mailed a copy
to the following parties:

[Petitioner/Respondent or Counsel]

Address

City, State, Zip Code

Industrial Commission of Arizona

Address

City, State, Zip Code

Dated: _____

[Petitioner/Respondent]

IN THE COURT OF APPEALS
STATE OF ARIZONA
DIVISION _____

EMPLOYER

Petitioner,

No. __ CA-IC _____

ICA No. _____

INSURANCE CARRIER

Petitioner,

Carrier No. _____

v.

THE INDUSTRIAL
COMMISSION OF ARIZONA,
Respondent,

**MOTION FOR EXTENSION OF
TIME TO FILE BRIEF**

APPLICANT

Respondent

_____ [Petitioner/Respondent] requests an extension of time
within which to file _____ [his/hers] _____ [Opening/
Answering/Reply] brief from _____ [Date Currently Due] to
_____ [New Date] for the reasons that

_____ [Set Forth Reasons].

Dated: _____

Print Name [Petitioner/Respondent]

Signature

Address

PROOF OF SERVICE

The undersigned _____ [Petitioner/Respondent] on the ____ day of _____, 200____, filed an Original and four (4) copies of the Motion for Extension of Time to File Brief in the Court of Appeals; and mailed a copy to the following parties:

[Petitioner/Respondent or Counsel]

Address

City, State, Zip Code

Industrial Commission of Arizona

Address

City, State, Zip Code

Dated: _____

[Petitioner/Respondent]

IN THE COURT OF APPEALS
STATE OF ARIZONA
DIVISION _____

APPLICANT,

Petitioner,

v.

THE INDUSTRIAL
COMMISSION OF ARIZONA,
Respondent,

EMPLOYER
Respondent

INSURANCE CARRIER
Respondent

No. ____ CA-IC _____

ICA No. _____

Carrier No. _____

**STIPULATION FOR EXTENSION
OF TIME FOR FILE BRIEF**

The undersigned stipulate and agree that _____
[Petitioner's/Respondent's] time for filing the _____ [Opening/
Answering/Reply] Brief in this matter may be extended from _____
[Current Due Date] to _____ [New Date Desired]. This
extension is requested because _____

_____ [List Reasons].

Dated: _____

Print Name [Petitioner/Respondent]

Print Name [Petitioner/Respondent]

Signature

Signature

Address

Address

PROOF OF SERVICE

The undersigned _____ [Petitioner/Respondent]
on the ____ day of _____, 200____, filed an Original and four (4) copies of the
Stipulation for Extension of time for File Brief in the Court of Appeals; and mailed a
copy to the following parties:

[Petitioner/Respondent or Counsel]

Address

City, State, Zip Code

Industrial Commission of Arizona

Address

City, State, Zip Code

Dated: _____

[Petitioner/Respondent]

IN THE COURT OF APPEALS
STATE OF ARIZONA
DIVISION ____

EMPLOYER

Petitioner,

INSURANCE CARRIER

Petitioner,

v.

THE INDUSTRIAL COMMISSION
OF ARIZONA,

Respondent,

APPLICANT

Respondent

No. ____ CA-IC _____

ICA No. _____

Carrier No. _____

**STIPULATION FOR EXTENSION
OF TIME FOR FILE BRIEF**

The undersigned stipulate and agree that _____ [Petitioner's/
Respondent's] time for filing the _____ [Opening/ Answering/Reply]
Brief in this matter may be extended from _____ [Current Due
Date] to _____ [New Date Desired]. This extension is
requested because _____

_____ [List Reasons].

Dated: _____

Print Name [Petitioner/Respondent]

Print Name [Petitioner/Respondent]

Signature

Signature

Address

Address

PROOF OF SERVICE

The undersigned _____ [Petitioner/Respondent] on the ____ day of _____, 200____, filed an Original and four (4) copies of the Stipulation for Extension of time for File Brief in the Court of Appeals; and mailed a copy to the following parties:

[Petitioner/Respondent or Counsel]

Address

City, State, Zip Code

Industrial Commission of Arizona

Address

City, State, Zip Code

Dated: _____

[Petitioner/Respondent]

IN THE COURT OF APPEALS
STATE OF ARIZONA
DIVISION ____

APPLICANT,

Petitioner,

v.

THE INDUSTRIAL
COMMISSION OF ARIZONA,
Respondent,

EMPLOYER
Respondent

INSURANCE CARRIER
Respondent

No. ____ CA-IC _____

ICA No. _____

Carrier No. _____

REQUEST FOR ORAL ARGUMENT

Pursuant to ARCAP 18, the _____ [Petitioner/Respondent] requests
oral argument in the above-entitled matter.

Dated: _____

Print Name [Petitioner/Respondent]

Signature

Address

PROOF OF SERVICE

The undersigned _____ [Petitioner/Respondent]
on the ____ day of _____, 200__, filed an Original and six (6) copies of the
Request for Oral Argument in the Court of Appeals; and mailed a copy to the following
parties:

[Petitioner/Respondent or Counsel]

Address

City, State, Zip Code

Industrial Commission of Arizona

Address

City, State, Zip Code

Dated: _____

[Petitioner/Respondent]

IN THE COURT OF APPEALS
STATE OF ARIZONA
DIVISION ____

EMPLOYER

Petitioner,

INSURANCE CARRIER

Petitioner,

v.

THE INDUSTRIAL COMMISSION
OF ARIZONA,

Respondent,

APPLICANT

Respondent

No. ____ CA-IC _____

ICA No. _____

Carrier No. _____

REQUEST FOR ORAL ARGUMENT

Pursuant to ARCAP 18, the _____ [Petitioner/Respondent] requests
oral argument in the above-entitled matter.

Dated: _____

Print Name [Petitioner/Respondent]

Signature

Address

PROOF OF SERVICE

The undersigned _____ [Petitioner/Respondent] on the ____ day of _____, 200____, filed an Original and six (6) copies of the Request for Oral Argument in the Court of Appeals; and mailed a copy to the following parties:

[Petitioner/Respondent or Counsel]

Address

City, State, Zip Code

Industrial Commission of Arizona

Address

City, State, Zip Code

Dated: _____

[Petitioner/Respondent]

IN THE COURT OF APPEALS
STATE OF ARIZONA
DIVISION _____

APPLICANT,

Petitioner,

v.

THE INDUSTRIAL
COMMISSION OF ARIZONA,
Respondent,

EMPLOYER
Respondent

INSURANCE CARRIER
Respondent

No. ____ CA-IC _____

ICA No. _____

Carrier No. _____

STATEMENT OF COSTS

To: The Clerk of this Court and attorneys for the _____ [Petitioner/Respondent]:

The undersigned _____ [Petitioner/Respondent] requests taxation of costs in the sum of \$ _____ [Dollar Amount] for the following expenses:

- 1. Clerk’s fees \$ _____
- 2. Briefs \$ _____
- 3. [Other]..... \$ _____
- TOTAL \$ _____

Dated: _____

Print Name [Petitioner/Respondent]

Signature

Address

PROOF OF SERVICE

The undersigned _____ [Petitioner/Respondent]
on the ____ day of _____, 200____, filed an Original and six (6) copies of the
Statement of Costs in the Court of Appeals; and mailed a copy to the following parties:

[Petitioner/Respondent or Counsel]

Address

City, State, Zip Code

Industrial Commission of Arizona

Address

City, State, Zip Code

Dated: _____

[Petitioner/Respondent]

IN THE COURT OF APPEALS
STATE OF ARIZONA
DIVISION _____

EMPLOYER

Petitioner,

INSURANCE CARRIER

Petitioner,

v.

THE INDUSTRIAL COMMISSION
OF ARIZONA,

Respondent,

APPLICANT

Respondent

No. ____ CA-IC _____

ICA No. _____

Carrier No. _____

STATEMENT OF COSTS

To: The Clerk of this Court and attorneys for the _____ [Petitioner/Respondent]:

The undersigned _____ [Petitioner/Respondent] requests taxation of costs in the sum of \$ _____ [Dollar Amount] for the following expenses:

- 1. Clerk's fees \$ _____
- 2. Briefs \$ _____
- 3. [Other]..... \$ _____
- TOTAL \$ _____

Dated: _____

Print Name [Petitioner/Respondent]

Signature

Address

AFFIDAVIT SUPPORTING STATEMENT OF COSTS

STATE OF ARIZONA)
) ss.
_____ COUNTY)

_____ [Name], being first sworn upon oath,
deposes and says:
_____ [He/She] is the _____ [Petitioner/Respondent] in this action, is
better informed than the _____ [Petitioner/Respondent] of the costs in this
appeal. The amounts listed above have actually been expended in connection with
this case.

[Signed]

SUBSCRIBED AND SWORN TO before me on [Date].

[seal]

Notary Public

Copy of the foregoing was mailed
on _____ [Date] to

Name

Address

PROOF OF SERVICE

The undersigned _____ [Petitioner/Respondent]
on the ____ day of _____, 200 ____, filed an Original and six (6) copies of the
Statement of Costs in the Court of Appeals; and mailed a copy to the following parties:

[Petitioner/Respondent or Counsel]

Address

City, State, Zip Code

Industrial Commission of Arizona

Address

City, State, Zip Code

Dated: _____

[Petitioner/Respondent]

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[Party filing the Petition for Review must attach a copy of the Court of Appeals decision to the Petition]

ISSUES PRESENTED FOR REVIEW

(*Add additional sheets of paper as necessary to complete this section)

**LIST OF ADDITIONAL ISSUES PRESENTED TO, BUT NOT DECIDED BY
COURT OF APPEALS AND WHICH MAY NEED TO BE DECIDED IF REVIEW
IS GRANTED**

(*Add additional sheets of paper as necessary to complete this section)

STATEMENT OF FACTS

(*Add additional sheets of paper as necessary to complete this section)

REASONS FOR GRANTING THIS PETITION

(*Add additional sheets of paper as necessary to complete this section)

CONCLUSION

[Date]

[Print Name] [Petitioner/Respondent]

[Signature]

[Address]

PROOF OF SERVICE

The undersigned _____ [Petitioner/Respondent] on the ____ day of _____, 200____, filed an Original and seven (7) copies of the Petition for Review in the Court of Appeals; and mailed a copy to the following parties:

[Petitioner/Respondent or Counsel]

Address

City, State, Zip Code

Industrial Commission of Arizona

Address

City, State, Zip Code

Dated: _____

[Petitioner/Respondent]

[NOTE: LIMIT FOR THIS DOCUMENT IS 12 PAGES]

IN THE COURT OF APPEALS
STATE OF ARIZONA
DIVISION _____

_____ EMPLOYER Petitioner,	No. ____ CA-IC _____
_____ INSURANCE CARRIER Petitioner,	ICA No. _____
v.	Carrier No. _____
THE INDUSTRIAL COMMISSION OF ARIZONA, Respondent,	
_____ APPLICANT Respondent	

PETITION FOR REVIEW

Print Name [Petitioner/Respondent]

Signature

Address

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[Party filing the Petition for Review must attach a copy of the Court of Appeals decision to the Petition]

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ARIZONA SUPREME COURT

_____	No. ___ CA-IC _____
APPLICANT,	ICA No. _____
	Carrier No. _____
v.	
THE INDUSTRIAL	
COMMISSION OF ARIZONA,	
Respondent,	

EMPLOYER	
Respondent	

INSURANCE CARRIER	
Respondent	

RESPONSE TO PETITION FOR REVIEW

Print Name [Petitioner/Respondent]

Signature

Address

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City, State, Zip Code

Industrial Commission of Arizona

Address

City, State, Zip Code

Dated: _____

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ARIZONA SUPREME COURT

_____	No. ____ CA-IC _____
APPLICANT,	ICA No. _____
	Carrier No. _____
Petitioner,	
v.	
THE INDUSTRIAL	
COMMISSION OF ARIZONA,	
Respondent,	

EMPLOYER	
Respondent	

INSURANCE CARRIER	
Respondent	

RESPONSE TO PETITION FOR REVIEW

Print Name [Petitioner/Respondent]

Signature

Address

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