



**New Jersey Judiciary  
Superior Court - Appellate Division  
NOTICE OF APPEAL**

Type or clearly print all information. Attach additional sheets if necessary.		ATTORNEY / LAW FIRM / PRO SE LITIGANT			
TITLE IN FULL (AS CAPTIONED BELOW): Tina Renna, Plaintiff v. County of Union, Defendant		NAME Walter M. Luers, Esq.			
		STREET ADDRESS Suite C203, 23 West Main Street			
		CITY Clinton	STATE NJ	ZIP 08809	PHONE NUMBER 908-894-5656
		EMAIL ADDRESS wluers@luerslaw.com			

ON APPEAL FROM		
TRIAL COURT JUDGE Hon. Regina Caulfield, J.S.C.	TRIAL COURT OR STATE AGENCY Superior Court, Law Division	TRIAL COURT OR AGENCY NUMBER UNN-L-001431-12

Notice is hereby given that Plaintiff Tina Renna appeals to the Appellate Division from a  Judgment or  Order entered on August 6, 2012 in the  Civil  Criminal or  Family Part of the Superior Court or from a  State Agency decision entered on \_\_\_\_\_.

If not appealing the entire judgment, order or agency decision, specify what parts or paragraphs are being appealed.

Have all issues, as to all parties in this action, before the trial court or agency been disposed of? (In consolidated actions, all issues as to all parties in all actions must have been disposed of.)  Yes  No

If not, has the order been properly certified as final pursuant to R. 4:42-2?  Yes  No

For criminal, quasi-criminal and juvenile actions only:

Give a concise statement of the offense and the judgment including date entered and any sentence or disposition imposed:

This appeal is from a  conviction  post judgment motion  post-conviction relief.  
If post-conviction relief, is it the  1st  2nd  other \_\_\_\_\_  
specify

Is defendant incarcerated?  Yes  No

Was bail granted or the sentence or disposition stayed?  Yes  No

If in custody, name the place of confinement:

Defendant was represented below by:  
 Public Defender  self  private counsel \_\_\_\_\_  
specify

Notice of appeal and attached case information statement have been served where applicable on the following:

	<b>Name</b>	<b>Date of Service</b>
Trial Court Judge	Hon. Regina Caulfield, J.S.C.	9/19/12
Trial Court Division Manager	Ms. Sandra Thaler-Gerber	9/19/12
Tax Court Administrator State Agency		
Attorney General or Attorney for other Governmental body pursuant to R. 2:5-1(a), (e) or (h)		
Other parties in this action:		

<b>Name and Designation</b>	<b>Attorney Name, Address and Telephone No.</b>	<b>Date of Service</b>
County of Union, Defendant	Carolyn Sullivan Kropp, Esq., Office of County Counsel, Elizabethtown Plaza, Elizabeth, NJ 07207 908-527-4250	December 31, 2011

Attached transcript request form has been served where applicable on the following:

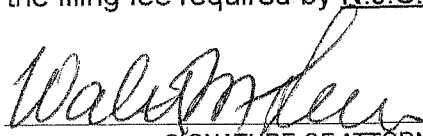
	<b>Name</b>	<b>Date of Service</b>	<b>Amount of Deposit</b>
Trial Court Transcript Office	Tawana Finch	9/19/12	300.00
Court Reporter (if applicable)			
Supervisor of Court Reporters			
Clerk of the Tax Court			
State Agency			

Exempt from submitting the transcript request form due to the following:

- No verbatim record.
- Transcript in possession of attorney or pro se litigant (four copies of the transcript must be submitted along with an electronic copy).  
List the date(s) of the trial or hearing:
- Motion for abbreviation of transcript filed with the court or agency below. Attach copy.
- Motion for free transcript filed with the court below. Attach copy.

I certify that the foregoing statements are true to the best of my knowledge, information and belief. I also certify that, unless exempt, the filing fee required by N.J.S.A. 22A:2 has been paid.

9/19/12  
\_\_\_\_\_  
DATE

  
\_\_\_\_\_  
SIGNATURE OF ATTORNEY OR PRO SE LITIGANT