

Samples

Notice of Appeal

Check the box for "Superior Court of the State of California" (the other two courts were eliminated after the creation of this form).

FOR COURT USE ONLY

SUPERIOR COURT OF THE STATE OF CALIFORNIA
 MUNICIPAL COURT OF THE STATE OF CALIFORNIA
 JUSTICE COURT OF THE STATE OF CALIFORNIA

Write the name of the county in which you are filing.

COUNTY OF Sacramento

Write the name of the plaintiff in the Labor Commissioner case (typically the employee)

PLAINTIFF Waldo Worker

Write the name of the defendant in the Labor Commissioner case (typically the employer)

DEFENDANT Edward Employer

Write the case number from the Labor Commissioner case.

NOTICE OF APPEAL

Write the date of the ODA

NOTICE OF APPEAL of the Order, Decision or award of the Labor Commissioner in State Case Number 14-01324

Dated 9/19/2014 and served upon the undersigned appellant, Edward Employer Write your name

on 9/22/2014 is given and filed pursuant to Labor Code Section 98.2.

Write the ODA was mailed to you (this date is on the ODA)

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

Write your name, address, and telephone number.

APPELLANT (OR ATTORNEY) (NAME, ADDRESS, TELEPHONE NUMBER)
Edward Employer 916-555-9876
123 Any Street
Sacramento, CA 95814

Write the address and phone number of the State Labor Commissioner.

OFFICE OF THE LABOR COMMISSIONER (ADDRESS AND TELEPHONE NUMBER)
 STATE LABOR COMMISSIONER
2031 Howe Avenue, Suite 100
Sacramento, CA 95825

Write the other side's name, address, and telephone number.

RESPONDENT (OR ATTORNEY) (NAME, ADDRESS, TELEPHONE NUMBER)
Waldo Worker 916-555-1234
321 Another Street
Sacramento, CA 95815

Dated 10/7/2014

Date and sign

Signature of Appellant

State of California
 Department of Industrial Relations
 Division of Labor Standards Enforcement
 DUSE 537 (REV. 3/03) NOTICE OF APPEAL - English L.C. 88
 05 39611

Attach a copy of the ODA. In Sacramento, also attach a copy of the complaint and any answers filed in the Labor Commissioner case.

Notice of Appeal (DSLE-537)



LABOR COMMISSIONER, STATE OF CALIFORNIA Department of Industrial Relations Division of Labor Standards Enforcement 100 Passio de los Angeles Ave. 120 San Jose, CA 95128 FAX(408) 277-9643		For Court
Plaintiff:	Court	
Defendant:		
State Case Number	ORDER, DECISION OR AWARD OF THE LABOR COMMISSIONER	

1. The above-entitled matter came on for hearing before the Labor Commissioner of the State of California as follows:
DATE: _____ CONTINUED TO: _____
CITY: _____

2. IT IS ORDERED THAT:


\$ _____ for wages (with lawful deductions)
 \$ _____ for liquidated damages pursuant to Labor Code Section 1194.2
 \$ _____ Reimbursable business expenses
 \$ _____ for interest pursuant to Labor Code Sections 98.1(c), 1194.2 and/or 2802(b),
 for additional wages accrued pursuant to Labor Code Section 203 as a penalty
and that same shall not be subject to payroll or other deductions.
 \$ _____ for penalties pursuant to Labor Code Section 203 which shall not be subject to payroll or other deductions.
 \$ _____ other (specify): _____
TOTAL AMOUNT OF AWARD \$ _____

3. The herein Order, Decision or Award is based upon the Findings of Fact, Legal Analysis and Conclusions attached hereto and incorporated herein by reference.

4. The parties herein are notified and advised that this Order, Decision or Award of the Labor Commissioner shall become final and enforceable as a judgment in a court of law unless either or both parties exercise their right to appeal to the appropriate court* within ten (10) days of service of this document. Service of this document can be accomplished either by first class mail or by personal delivery and is effective upon mailing or at the time of personal delivery. If service on the parties is made by mail, the ten (10) day appeal period shall be extended by five (5) days. For parties served outside of California, the period of extension is longer (See Code of Civil Procedure Section 1013). In case of appeal, the necessary filing fee must be paid by the appellant and appellant must, immediately upon filing an appeal with the appropriate court, serve a copy of the appeal request upon the Labor Commissioner. If an appeal is filed by a corporation, a non-lawyer agent of the corporation may file the Notice of Appeal with the appropriate court, but the corporation must be represented in any subsequent proceedings by an attorney, licensed to practice in the State of California. Labor Code Section 98.2(c) provides that if the party seeking review by filing an appeal to the court is unsuccessful in such appeal, the court shall determine the costs and reasonable attorney's fees incurred by the other party to the appeal and assess such amount as a cost upon the party filing the appeal. An employee is successful if the court awards an amount greater than zero.

PLEASE TAKE NOTICE: Labor Code Section 98.2(b) requires that as a condition to filing an appeal of an Order, Decision or Award of the Labor Commissioner, the employer shall first post a bond or undertaking with the court in the amount of the ODA; and the employer shall provide written notice to the other parties and the Labor Commissioner of the posting of the undertaking. Labor Code Section 98.2(b) also requires the undertaking contain other specific conditions for dissolution under the bond. While this claim is before the Labor Commissioner, you are required to notify the Labor Commissioner of any changes in your business or personal address within 10 days after any change occurs.

*superior court of california county of san mateo
 UNLIMITED COURT CASE
 400 County Center First Floor, Room A
 Redwood City, CA 94063

LABOR COMMISSIONER, STATE OF CALIFORNIA
 BY: 
 Karyn Fox DEPUTY LABOR COMMISSIONER

DATED: _____
 DLSE 535 (Rev. 1/12) ORDER, DECISION OR AWARD OF THE LABOR COMMISSIONER L.C. 98

Sample Order, Decision or Award (DLSE 535)



Civil Case Cover Sheet

CM-010

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address) Edward Employer 123 Any Street Sacramento, CA 95814		FOR COURT USE ONLY Your name, address, and telephone number.
TELEPHONE NO.: 916-555-9876 ATTORNEY FOR (Name): In Pro Per	FAX NO.: _____	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Sacramento STREET ADDRESS: 720 Ninth Street MAILING ADDRESS: 720 Ninth Street CITY AND ZIP CODE: Sacramento, CA 95814 BRANCH NAME: Civil		
CASE NAME: Worker v. Employer Case name is abbreviated appellant name versus appellee.		
CIVIL CASE COVER SHEET <input checked="" type="checkbox"/> Unlimited (Amount demanded exceeds \$25,000) <input type="checkbox"/> Limited (Amount demanded is \$25,000 or less)	Complex Case Designation <input type="checkbox"/> Counter <input type="checkbox"/> Joinder Filed with first appearance by defendant (Cal. Rules of Court, rule 3.402)	CASE NUMBER: JUDGE: DEPT.:

Items 1-6 below must be completed (see instructions on page 2).

- Check one box below for the case type that best describes this case:

Auto Tort <input type="checkbox"/> Auto (22) <input type="checkbox"/> Uninsured motorist (46)	Contract <input type="checkbox"/> Eminent domain/inverse condemnation (14) <input type="checkbox"/> Wrongful eviction (33) <input type="checkbox"/> Other real property (26)	Provisionally Complex Civil Litigation (Cal. Rules of Court, rules 3.400-3.403) <input type="checkbox"/> Antitrust/Trade regulation (03) <input type="checkbox"/> Construction defect (10) <input type="checkbox"/> Mass tort (40) <input type="checkbox"/> Securities litigation (28) <input type="checkbox"/> Environmental/Toxic tort (30) <input type="checkbox"/> Insurance coverage claims arising from the above listed provisionally complex case types (41)
Other P/IPD/WD (Personal Injury/Property Damage/Wrongful Death) Tort <input type="checkbox"/> Asbestos (04) <input type="checkbox"/> Product liability (24) <input type="checkbox"/> Medical malpractice (45) <input type="checkbox"/> Other P/IPD/WD (23)	Real Property <input type="checkbox"/> Commercial (31) <input type="checkbox"/> Residential (32) <input type="checkbox"/> Drugs (38)	Enforcement of Judgment <input type="checkbox"/> Enforcement of Judgment (20)
Non-P/IPD/WD (Other) Tort <input type="checkbox"/> Business tort/unfair business practice (07) <input type="checkbox"/> Civil rights (08) <input type="checkbox"/> Detamation (13) <input type="checkbox"/> Fraud (16) <input type="checkbox"/> Intellectual property (19) <input type="checkbox"/> Professional negligence (25) <input type="checkbox"/> Other non-P/IPD/WD tort (35)	Unlawful Detainer <input type="checkbox"/> Acc't tort/feltony (05) <input type="checkbox"/> Position re. arbitration award (11) <input type="checkbox"/> Writ of mandate (02)	Miscellaneous Civil Complaint <input type="checkbox"/> RICO (27) <input type="checkbox"/> Other complaint (not specified above) (42)
Employment <input type="checkbox"/> Wrongful termination (36) <input type="checkbox"/> Other employment (15)	Judicial Review <input checked="" type="checkbox"/> Other judicial review (39)	Miscellaneous Civil Petition <input type="checkbox"/> Partnership and corporate governance (21) <input type="checkbox"/> Other petition (not specified above) (43)
- This case is is not complex under rule 3.400 of the California Rules of Court. If the case is complex, mark the factors requiring exceptional judicial management:

a. <input type="checkbox"/> Large number of separately represented parties b. <input type="checkbox"/> Extensive motion practice raising difficult or novel issues that will be time-consuming to resolve c. <input type="checkbox"/> Substantial amount of documentary evidence	d. <input type="checkbox"/> Large number of parties e. <input type="checkbox"/> Coordination in other courts f. <input type="checkbox"/> Substantive issues
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- Remedies sought (check all that apply): a. monetary b. nonmonetary
- Number of causes of action (specify): 1
- This case is is not a class action suit.
- If there are any known related cases, file and serve a notice of related case. (You may use form CM-015.)

Date: **10/7/2014**
Edward Employer (TYPE OR PRINT NAME) _____ (SIGNATURE OF PARTY OR ATTORNEY FOR PARTY)

Date, print your name and sign (except small claims cases or cases filed under the Probate Code, Family Code, or Welfare and Institutions Code). (Cal. Rules of Court, rule 3.220.) Failure to file may result in sanctions.

- Plaintiff must file this cover sheet with the court (except small claims cases or cases filed under the Probate Code, Family Code, or Welfare and Institutions Code). (Cal. Rules of Court, rule 3.220.) Failure to file may result in sanctions.
- File this cover sheet in addition to any cover sheet required by local court rule.
- If this case is complex under rule 3.400 et seq. of the California Rules of Court, you must serve a copy of this cover sheet on all other parties to the action or proceeding.
- Unless this is a collections case under rule 3.740 or a complex case, this cover sheet will be used for statistical purposes only.

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Form Adopted for Mandatory Use by the Judicial Branch of California CM-010 (Rev. July 1, 2007) **ESSENTIAL FORMS™** Cal. Rules of Court, rules 2.26, 3.220, 3.400-3.403, 3.740; Cal. Standards of Judicial Administration, §§ 3.10 www.courtinfo.ca.gov

Civil Case Cover Sheet (CM-010)

(<http://www.dir.ca.gov/dlse/DLSE-537.pdf>)