	IN THE SUPREME	REGISTRY LOCATION		
				SMALL CLAIMS REGISTRY NO.
				SMALL CLAIMS REGISTRY
BETWEEN:				
	NAME			APPELLANT(S)
	ADDRESS			
	CITY, TOWN, MUNICIPALITY	PROV.	POSTAL CODE	TEL.#
AND:				
				RESPONDENT(S)
	ADDRESS			
	ADDRESS			
	CITY, TOWN, MUNICIPALITY	PROV.	POSTAL CODE	TEL. #
			1 COME CODE	
	NOTICE OF APPEAL			
	WHEREAS on the of , Judge			
	I	MONTH MONTH	YEAR	
	of the Provincial Court of British Columbia made the following decision: (state clearly and concisely the decision or order appealed from)			
	AND WHEREAS an appeal lies to this Court pursuant to section 5 of the Small Claims Act.			
	TAKE NOTICE THAT			
	hereby appeals from the decision on the following grounds: (state clearly and concisely the grounds of appeal)			
	Dated			
	DAY	MONTH YEA	AR	SIGNATURE OF APPLICANT (OR SOLICITOR)
SCL 027 (01/97)				
1-SUPREME COURT 2-PROVINCIAL COURT COPY 3-RESPONDENT'S COPY				
4–SERVICE COPY 5–APPELLANT COPY				

COURT FILE NUMBER