UNITED STATES COURT OF APPEALS FOR THE NINTH CIRCUIT Form 1. Notice of Appeal from a Judgment or Order of a United States District Court

Name of U.S. District Court:	US District Co	ourt, Northern District of Calfornia	
U.S. District Court case number: 24-CV-06272-LB			
Date case was first filed in U.S.	District Court:	SEPT 5, 2024	
Date of judgment or order you a	re appealing:	OCTOBER 10TH, 2024	
Fee paid for appeal? (appeal fees are paid at the U.S. District Court)			
• Yes \bigcirc No \bigcirc IFP was g	granted by U.S.	District Court	

List all Appellants (List each party filing the appeal. Do not use "et al." or other abbreviations.)

DENNIS BRUCE ALLUMS
Is this a cross-appeal? \bigcirc Yes \bigcirc No
If Yes, what is the first appeal case number? N/A
Was there a previous appeal in this case? \bigcirc Yes \bigcirc No
If Yes, what is the prior appeal case number? N/A
Your mailing address:
926 Avis Drive
City: El Cerrito State: CA Zip Code: 94530
Prisoner Inmate or A Number (if applicable):
Signature Date 11/08/2024

Complete and file with the attached representation statement in the U.S. District Court Feedback or questions about this form? Email us at forms@ca9.uscourts.gov

UNITED STATES COURT OF APPEALS FOR THE NINTH CIRCUIT

Form 6. Representation Statement

Instructions for this form: http://www.ca9.uscourts.gov/forms/form06instructions.pdf

<u>Appellant(s)</u> (*List each party filing the appeal, do not use "et al." or other abbreviations.*) Name(s) of party/parties:

DENNIS BRUCE ALLUMS

Name(s) of counsel (if any):

PRO PER

Address: 926 Avis Drive

Telephone number(s): |510 -730-5424

Email(s): DennisAllums@gmail.com

Is counsel registered for Electronic Filing in the 9th Circuit? • Yes • No

<u>Appellee(s)</u> (List only the names of parties and counsel who will oppose you on appeal. List separately represented parties separately.)

Name(s) of party/parties:

CITY OF OAKALND
Name(s) of counsel (if any):
JNKNOWN
Address:
Selephone number(s):
Email(s):

To list additional parties and/or counsel, use next page.

Feedback or questions about this form? Email us at <u>forms@ca9.uscourts.gov</u>

Continued list of parties and counsel: (attach additional pages as necessary)

Appellants

Name(s) of party/parties:

Name(s) of counsel (if any):
Address:
Telephone number(s):
Email(s):
Is counsel registered for Electronic Filing in the 9th Circuit? \bigcirc Yes \bigcirc No
Appellees Name(s) of party/parties:
Name(s) of counsel (if any):
Address:
Telephone number(s):
Email(s):
Name(s) of party/parties:
Name(s) of counsel (if any):
Address:
Telephone number(s):
Email(s):
Feedback or questions about this form? Email us at <u>forms@ca9.uscourts.gov</u>