

NOTICE OF APPEAL

PLEASE ATTACH APPEAL FEE: \$ 300 (Cashier's Check or Money Order Only)

_____ **Cashier's Check**

_____ **Money Order**

A. Individual/ Organization Filing Appeal (the Appellant):

Name: _____

Address: _____

Home Telephone No.: _____

Home Fax No.: _____

Work Telephone No.: _____

Work Fax No.: _____

Email address: _____

B. Opposing Party/Organization Member Rendering Decision (the Appellee):

Name: _____

Address: _____

Organization Member Telephone No.: _____

Organization Member Fax No.: _____

Name of Organization Member President: _____

C. Date of Decision* being Appealed: _____

** APPELLANT: PLEASE BE SURE TO ATTACH A COPY OF THE DECISION TO THIS NOTICE OF APPEAL.*

D. Please State Briefly the Reasons Why You Are Appealing the Decision:

E. Date Decision was received* by Appellant: _____

** APPELLANT HAS TEN (10) DAYS FROM DATE OF RECEIPT OF THE DECISION WITHIN WHICH TO FILE THIS NOTICE OF APPEAL WITH THE UNITED STATES SOCCER FEDERATION, INC. NATIONAL APPEALS COMMITTEE, TO THE ATTENTION OF THE PERSON AND AT THE ADDRESS SET FORTH BELOW:*

I hereby certify that a true and correct copy of this Notice of Appeal, together with appropriate appeals fee in the amount of \$300 (in the form of a cashier's check or money order), made payable to: The United States Soccer Federation, Inc. , has been sent to:

**The United States Soccer Federation, Inc. National Appeals Committee
c/o Daniel T. Flynn, Secretary General
1801-1811 South Prairie Avenue, Chicago, IL 60616.**

I further certify that a true and correct copy of this Notice of Appeal has been sent to the Organization Member and/or the Organization Member President listed in Section B above.

Dated: _____

Signature of Appellant