

Appeal to: ☐ Gaming Disputes Court      Party Appealing: ☐ Claimant  
☐ Mohegan Tribal Court      ☐ Employer

- ☐ Finding & Award/Dismissal
- ☐ Ruling on Motion
- ☐ Order

Respondent/Employer

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Insurer: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

☐ Yes ☐ No ☐ Not known at this time

CERTIFICATION: I hereby certify that a copy of the foregoing to all counsel of record and pro se parties listed on the attached docketing statement on \_\_\_\_\_, 20\_\_\_\_ (*attach statement setting forth the names and addresses of all parties to this matter and their attorneys of record*).

FILING DATE

FILING FEE PAID	<input type="checkbox"/> NO FEE	DOCKET NO.:
-----------------	---------------------------------	-------------