**FORM 11a**

CACV \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IN THE COURT OF APPEAL FOR SASKATCHEWAN

BETWEEN:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Appellant   
(*insert status in court appealed from*)

AND:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Respondent   
(*insert status in court appealed from*)

**NOTICE OF APPOINTMENT FOR TAXATION OF COSTS**

TO: [*Party obligated to pay costs*]

I HAVE MADE AN APPOINTMENT to tax the costs of the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ before

the Registrar of the Court of Appeal for Saskatchewan on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at \_\_\_\_\_\_\_ a.m., at the

(*date*)

Court House, 2425 Victoria Avenue, Regina, Saskatchewan.

A copy of the proposed Bill of Costs and an affidavit of disbursements are attached to this Notice   
of Appointment.

If you have been served with this Notice of Appointment and fail to attend, the Registrar may proceed with the taxation in your absence.

DATED at Regina, Saskatchewan, on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ .  
 (*date*)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Deputy Registrar

**TO:** Appellant [or] Respondent \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TO:** REGISTRAR

COURT OF APPEAL FOR SASKATCHEWAN

2425 VICTORIA AVENUE

REGINA, SASKATCHEWAN

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Telephone: 306-787-5382

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**THIS DOCUMENT IS FILED BY:**

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| --- | --- |
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| Lawyer in charge of the file (*if any*): |  |
| Name of self-represented individual (*if any*): |  |
| Address for service: |  |
|  | (*office address for represented individual, or, residential or business address for self-represented individual*) |
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| Email address: |  |
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