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[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[Clerk of the Court's Name]
[Small Claims Court]
[Court Address]
[City, State, Zip Code]
Dear [Clerk of the Court's Name],
Subject: Appeal of Small Claims Court Decision - Case No. [Case Number]
I am writing to formally appeal the decision made by the Small Claims
Court on [Date of Decision] regarding case number [Case Number]. I was
the [Plaintiff/Defendant] in this case, and I believe that there were
[briefly state the grounds for your appeal, e.g., errors in judgment,
misinterpretation of the law, introduction of new evidence].
[Provide a detailed explanation of your reasons for the appeal. Refer to
specific facts, evidence, or legal precedents that support your case.]
I respectfully request that the court review the details of my appeal and
consider overturning the previous decision. Enclosed are copies of [list
any documents enclosed, such as the original judgment, evidence, or any
other supporting documents].
Thank you for your attention to this matter. I look forward to your
prompt response.
Sincerely,
[Your Signature (if sending a hard copy)]
[Your Typed Name]
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