Litigation Strategies for Commitment Hearings
Civil Commitment Conference / January 25, 2013

David Andrews
Assistant Appellate Defender
Office of the Appellate Defender
(919) 354-7210
David.W.Andrews@nccourts.org

Kristen Todd
Special Counsel
Office of Special Counsel
(919) 733-5544
Kristen.L.Todd@nccourts.org

I. Ground Rules

The main protection for respondents in civil commitment and voluntary admission cases is the Fourteenth Amendment Due Process Clause. The United States Supreme Court has made clear that "[c]ivil commitment for any purpose constitutes a significant deprivation of liberty that requires due process protection." *Addington v. Texas*, 441 U.S. 418, 426, 60 L. Ed. 2d 323, 300-31 (1979). In addition, the North Carolina Court of Appeals has determined that juvenile respondents in commitment hearings are "entitled to the protection of due process…." *In re Long*, 25 N.C. App. 702, 707, 214 S.E.2d 626, 629 (1975). As a result, if you file a motion or make an objection in a commitment hearing, be sure to include due process as support for your argument.

II. Pre-Hearing Considerations

There are two primary issues that you should consider before the commitment hearing. First, be sure that the district court has subject matter jurisdiction over the case. In involuntary commitment cases, the petition must contain facts indicating that the respondent is mentally ill and dangerous to herself or others, or in need of treatment in order to prevent disability or deterioration that would predictably result in dangerousness. N.C. Gen. Stat. § 122C-261. The petition must also be sworn under oath. *Id*. If the petition is not sworn or fails to contain sufficient allegations, the case is subject to dismissal. *In re Ingram*, 74 N.C. App. 579, 581, 328 S.E.2d 588, 589 (1985); *In re Reed*, 39 N.C. App. 227, 229, 249 S.E.2d 864, 866 (1978). For voluntary admission cases, there must be a written application signed by the legally responsible person for the minor. N.C. Gen. Stat. §§ 122C-211 and 122C-221. To warrant admission, the minor must be (1) mentally ill or a substance abuser and (2) in need of treatment. N.C. Gen. Stat. § 122C-221(a).

The second issue is whether the respondent was properly examined after being taken into custody. Under N.C. Gen. Stat. § 122C-263, the respondent must be examined by a doctor or psychologist within 24 hours of arrival at an area facility. Under N.C. Gen. Stat. § 122C-266, the respondent must then be examined by a doctor within 24 hours of arrival at a 24-hour facility. If the State fails to properly complete the examination process, the case is subject to dismissal. *See In re Barnhill*, 72 N.C. App. 530, 532, 325 S.E.2d 308, 309 (1985). A minor must also be

examined upon admission to a mental health facility. N.C. Gen. Stat. § 211(a). If the minor is not examined, the case is arguably subject to dismissal under the same grounds described in *Barnhill*.

Be sure to check with the clerk that the commitment hearing will be recorded. A respondent is entitled to a transcript of the commitment hearing under N.C. Gen. Stat. §§ 224.3(e), 267(g), 268(i), and 268.1(h). Usually, the clerk makes a recording of the commitment hearing and sends the recording to a court reporter to transcribe after the order of appellate entries is issued.

III. Preserving Errors for Appeal

It is imperative to properly object to inadmissible evidence during commitment hearings because if you fail to do so, you will waive your client's right to challenge the evidence on appeal. Please consider incorporating the following principles into your practice during commitment hearings.

First, be sure to object to <u>any</u> testimony that you suspect is inadmissible. Plain error is not allowed in civil appeals. *Durham v. Quincy Mut. Fire Ins. Co.*, 311 N.C. 361, 367, 317 S.E.2d 372, 377 (1984). Thus, if you fail to object to inadmissible evidence, the evidence cannot be challenged on appeal.

Second, be sure to specify the grounds for any objections that you make. A general objection is <u>not</u> sufficient to preserve an error for appeal. *State v. Hammett*, 361 N.C. 92, 98, 637 S.E.2d 518, 522 (2006). There are several possible grounds for objections in commitment hearings. For example, respondents have a statutory right to confrontation. *See* N.C. Gen. Stat. §§ 122C-224.3(c) and 122C-268(f). Additionally, the Rules of Evidence apply at commitment hearings. *See* N.C. R. Evid. 1101. Possible evidentiary objections include, but are not limited to: relevance, lack of personal knowledge, improper opinion, and hearsay.

Third, be sure to include constitutional grounds in your objections. If you fail to do so, any possible constitutional grounds cannot be raised on appeal. *See State v. Benson*, 323 N.C. 318, 322, 372 S.E.2d 517, 519 (1988) ("Constitutional issues not raised and passed upon at trial will not be considered for the first time on appeal."). As described above, the overriding constitutional concern during commitment hearings is whether the respondent received due process before being committed to a mental health facility. *See In re Mikels*, 31 N.C. App. 470, 474, 230 S.E.2d 155, 158 (1976) ("Chapter 122 was written to provide constitutionally defensible procedural and evidentiary rules."). Therefore, if you make an evidentiary objection, you should consider asserting that an adverse ruling would also violate the respondent's right to due process.

Fourth, if the district court prevents you from presenting evidence, be sure to make an offer of proof. If you fail to do so, any argument about the evidence will be dismissed on appeal because the appellate court will not have enough information to rule on the court's decision to exclude the evidence. *State v. Williams*, 355 N.C. 501, 565 S.E.2d 609 (2002). The best way to make an offer of proof is by eliciting testimony from the witness or tendering an exhibit to the court. Unfortunately, summarizing what a witness would have said or what an exhibit would have

shown is likely not sufficient. *See State v. Long*, 113 N.C. App. 765, 768-69, 440 S.E.2d 576, 578 (1994).

IV. Limiting Expert Testimony

Commitment cases are often decided by what the respondent's doctor believes is warranted. However, there are limits to the doctor's testimony. First, be sure to object if the State or hospital attorney asks the doctor whether the respondent is dangerous to himself or others. It is well-settled that an expert witness may not testify that a legal standard has been met. *Smith v. Childs*, 112 N.C. App. 672, 680, 437 S.E.2d 500, 506 (1993). Whether the respondent is dangerous to himself or others is a legal question. Indeed, the General Assembly laid out a lengthy and detailed definition of the term in N.C. Gen. Stat. § 122C-3(11). A doctor or an expert in mental health is not qualified to decide whether the respondent satisfies this legal definition. Ultimately, it is for the district court judge to decide whether the respondent satisfies that definition. If the State asks an expert witness whether the respondent is dangerous, you should object on improper opinion and due process grounds.

Second, be sure to object if the doctor or expert witness testifies about out-of-court statements. Out-of-court statements relied on by an expert are admissible "to show the basis for the expert's opinion." *State v. Huffstetler*, 312 N.C. 92, 107, 322 S.E.2d 110, 120 (1984). However, such statements are not admissible as substantive evidence. *State v. Wade*, 296 N.C. 454, 464, 251 S.E.2d 407, 412 (1979). If the expert witness testifies about out-of-court statements, be sure to object on hearsay grounds. If the judge overrules the objection, be sure to point out that the statements are not admissible for their truth. You should also consider reminding the judge during the argument at the end of the hearing that the statements cannot be relied on a substantive evidence to commit the respondent.

V. Argument, Order, and Disposition

At the end of the commitment hearing, be sure to argue that the State failed to present sufficient evidence of each of the criteria for commitment or admission. Also, be sure to assert that committing the respondent or concurring in the respondent's admission would violate the respondent's right to due process. If you fail to raise due process during the argument, the respondent will not be able to elevate any possible argument about the sufficiency of the evidence to a due process argument on appeal.

In addition, while the district court judge is required to make findings of fact in involuntary commitment cases, N.C. Gen. Stat. § 122C-268(j), there is no such requirement for voluntary admission cases. *See* N.C. Gen. Stat. § 122C-224.3. However, North Carolina case law suggests that if you ask the judge to make findings of fact, the judge must provide them. For instance, in *Watkins v. Hellings*, 321 N.C. 78, 82, 361 S.E.2d 568, 571 (1987), the North Carolina Supreme Court stated that a party can "compel" the trial judge to make findings of fact through the "the simple mechanism of so requesting." Findings of fact also serve to sharpen the court's ruling. When the court is required to reduce its ruling to writing, the written order "ensure[s] that the trial court…carefully considers" the legal criteria that applies to the case. *In re L.B.*, 184 N.C. App. 442, 447, 646 S.E.2d 411, 413 (2007). Consequently, findings of fact might alter the outcome of the commitment hearing or provide grounds for reversal on appeal.

Finally, it is important to make sure that the judge imposes a proper commitment period. If the judge imposes an improper commitment period, you should quickly seek to remedy the problem. As appeals usually take 12-18 months to complete, most commitment periods will expire before the appeal ends. Thus, any challenge to an improper commitment period on appeal will be deemed moot. In addition, if a prior commitment period was too long, the respondent cannot challenge that prior period at a later commitment hearing. *In re Webber*, 201 N.C. App. 212, 219, 689 S.E.2d 468, 474 (2009). As a result, if an improper commitment period is not corrected when it is imposed, there is little that can be done at a later time to correct the problem. Please see the attached charts for permissible commitment periods.

VI. Appeal

A respondent has the right to appeal a commitment order under N.C. Gen. Stat. §§ 122C-224.3(h) (voluntary admission of a minor), 122C-272 (mental illness), and 122C-288 (substance abuse). The appeal goes to the Court of Appeals; not to superior court.

Notice of appeal in civil commitment cases is governed by Rule 3 of the North Carolina Rules of Appellate Procedure. Under Appellate Rule 3, the notice of appeal:

1. Must be entered within 30 days after entry of judgment.
2. Must be in writing.
3. Must specify the party appealing.
4. Must designate the judgment from which the appeal is taken.
5. Must designate the court to which the appeal is taken.
6. Must be signed by counsel or the party taking the appeal.
7. Must contain proof of service on the opposing party.

A sample notice of appeal is included with this handout. If neither the State nor the petitioner are represented at the commitment hearing, you can serve the notice of appeal on Richard Slipsky or Lisa Corbett at the Mental Health Unit of the North Carolina Department of Justice. Their address is: North Carolina Department of Justice, P.O. Box 629, Raleigh, North Carolina 27602-0629. After you enter notice of appeal, the district court must issue an order of appellate entries, which appoints the Office of the Appellate Defender to handle the appeal and orders a court reporter to transcribe the commitment proceedings. A blank order of appellate entries is attached to this handout.

VII. Summary of Recent Case Law

The biggest thing we have all learned over the last few years of appellate case law in the involuntary commitment arena is that trial courts MUST make sufficient written findings of fact to support their conclusions of law that a respondent is mentally ill and dangerous. The first opinion on this issue was *In re Booker*, 193 N.C. App. 433, 667 S.E.2d 302 (2008). While this is certainly an important point for trial courts to remember, and an issue which gives us much success on appeal, it is not a great help to you as trial lawyers.

On that note, we have picked three recent cases which, while reversed due to insufficient findings of fact, have some additional facets which makes them unique, and very important. All of these cases contain important points of law for you to think about in your trial practice because, while they were decided based on insufficient findings of fact, the theories can be

translated to sufficiency of the evidence arguments. They are also great reminders of some of the somewhat forgotten points in involuntary commitment practice. Most importantly, the Court of Appeals gave us some great language to work from in crafting our own arguments. Two of these cases are unpublished, but they provide useful arguments and can be cited pursuant to Rule 30(e) of the North Carolina Rules of Appellate Procedure.

The fourth case, *Webber*, is also more helpful to trial practice, as it highlights the importance of making sure that the commitment period entered by the court is proper. The Court of Appeals held in *Webber* that the commitment period cannot be collaterally attacked on appeal. Therefore, if an improper commitment period is imposed, little can be done at a later time to correct the problem.

Finally, the last case, *Watson*, addresses a very important issue for involuntary commitment hearings: a respondent's right to self-representation. It is important for you as trial lawyers to know two things: 1) your client likely can represent themselves at their hearing and 2) there are certain requirements the trial court must meet before it allows them to do so.

***In re Church*, No. COA09-1058, 2010 N.C. App. LEXIS 1282 (July 20, 2010):** Mr. Church was charged with first-degree murder in connection with the shooting death of his wife. He was found incapable of proceeding to trial and was committed and recommitted to Broughton Hospital four times between October 2007 and March 2009. This appeal was from the March 2009 recommitment order.

The issue in the case was whether the trial court's findings of fact were sufficient to support its conclusion of law that Mr. Church was dangerous to others. The Court of Appeals found that they were not and, therefore, reversed the recommitment order. However, a closer look at the findings reveals some important points to remember when dealing with respondents who have been accused of, and committed based on, a homicide.

The following were the findings made by the trial court: The Court heard from Dr JoAnna Gaworowski, the staff psychiatrist at Broughton Hospital. Dr. Gaworowski stated that she could not say that [Respondent] is not dangerous. She further stated that [Respondent] is mentally ill. [Respondent] is currently charged with first degree murder. Dr Gaworowski stated that without medical attention, [Respondent] would deteriorate which would predictably result in dangerousness to others. The respondent therefore meets the defin[i]tion of dangerousness to others.

The Court of Appeals held that "[t]he trial court's order [was] completely devoid of any indication that Respondent [had] 'within the relevant past,' inflicted or attempted to inflict or threatened to inflict serious bodily harm on another, or has acted in such a way as to create a substantial risk of serious bodily harm to another, or has engaged in extreme destruction of property." It also held that "the fact that Respondent [had] been charged with first degree murder [did] not constitute a finding that he actually committed the homicide with which he [had] been charged. On the contrary …the fact that he had been indicted for first degree murder simply [established] that the Ashe County grand jury found probable cause to believe that he had committed the offense[.]"

So what should we take away from this case? I think the Court of Appeals actually said it best when it said, "Put another way, the fact that someone has been charged with a crime does not suffice to support a finding of the type required to sustain an involuntary commitment order." Section 122C-3(11)(b) provides that "clear, cogent, and convincing evidence that an individual has committed a homicide in the relevant past is prima facie evidence of dangerousness to others." However, as an indictment is only based on "probable cause," it is not sufficient to meet the higher standard of "clear, cogent, and convincing evidence."

As an aside, the Court of Appeals also said in its opinion that testimony that it cannot be said that someone is not dangerous is not the same as saying that they are dangerous. Therefore, the finding that the doctor "could not say that Mr. Church was not dangerous" did not support a conclusion that he was in fact dangerous to others.

***In re Whatley*, No. COA12-716, 2012 N.C. App. LEXIS 1464 (December 18, 2012), and *In re McCray*, No. COA09-1623, 2010 N.C. App. LEXIS 1086 (July 6, 2010):** These two cases essentially stand for the same rule of law. While the discussion in McCray was much more in depth and gave us some much better language to work with, it was unpublished. *Whatley*, on the other hand, was decided very recently and was published by the Court of Appeals. Both cases focus on findings of fact on the second prongs of the definitions of danger to self and danger to others.

First, Ms. Whatley was involuntarily committed to an inpatient facility for a period not to exceed fifteen days, and to outpatient treatment for a period not to exceed ninety days. Her commitment was based on conclusions of law that he was both dangerous to herself and dangerous to others. The Court of Appeals reversed Ms. Whatley's commitment, holding that the trial court had failed to make sufficient written findings of fact to support its conclusions that she was dangerous. In particular, it focused on the second prongs of each of the definitions.

For danger to self, the Court explained that the trial court must make findings of fact that establish that there is a "reasonable probability of [the respondent] suffering serious physical debilitation within the near future unless adequate treatment is given." It found the trial court's finding on this element insufficient. For danger to others, the Court focused on the requirement that there be a "reasonable probability that [the respondent's] behavior will be repeated. It also found the trial court's findings on this element of danger to others to be insufficient.

While the decision in *Whatley* was based on insufficiency of the findings of fact, this opinion can easily be used to make effective sufficiency arguments regarding dangerousness. The second prongs of both definitions are often overlooked and rarely proven. That makes these elements of danger to self and danger to others great places to focus your arguments about the insufficiency of the evidence against your client.

In addition, it is interesting to note that the findings in *Whatley* were actually quite extensive and somewhat damaging to Ms. Whatley, yet were still found to be insufficient. The trial court's findings in *Whatley* included the following: "Respondent was exhibiting psychotic behavior that endangered her and her newborn child. She is bipolar and was experiencing a manic stage. She

was initially noncompliant in taking her medications but has been compliant over the past 7 days. Respondent continues to exhibit disorganized thinking that causes her not to be able to properly care for herself. She continues to need medication monitoring. Respondent has been previously involuntarily committed." The trial court also found, pursuant to the findings in the doctor's report, that Ms. Whatley had been admitted with psychosis while taking care of her two month old son; had a history of bipolar disorder, remained paranoid, disorganized, and intrusive; did not plan to follow up with outpatient treatment; had very poor insight and judgment; and needed continued stabilization. It is somewhat striking to think that despite all of these findings of fact, the Court of Appeals still reversed the commitment order.

Several years prior to *Whatley*, the Court of Appeals decided *In re McCray*. Ms. McCray was originally committed to Central Regional Hospital in November 2008. She was them recommitted on December 18, 2008. This appeal was from the recommitment order.

The issue in this case was, again, whether the trial court's findings of fact were sufficient to support its conclusions of law that Ms. McCray was dangerous to both herself and others. The Court of Appeals held that they were not and reversed the recommitment order. Again, the reasons why the Court came to this conclusion are very important and can be applied to sufficiency arguments.

The criteria for dangerousness to self and dangerousness to others both have a second prong which can often be overlooked. In order to be found dangerous to others, a respondent must not only have committed some harm, attempted some harm, or threatened some harm, but there must be a "reasonable probability that this conduct will be repeated." Moreover, in order to be found dangerous to himself, a respondent must not only be unable to care for himself, but there must also be a "reasonable probability of his suffering serious physical debilitation within the near future unless adequate treatment in given."

In *McCray*, the Court of Appeals held that the trial court's findings on these second prongs of dangerousness were insufficient. With regards to dangerousness to others, the Court found that the trial court had failed to make any findings that there was a reasonable probability that Ms. McCray's threatening conduct would be repeated. Additionally, in its analysis of the findings for dangerousness to self, it specifically stated that "[a] danger that may not manifest itself for several years does not meet the statutory requirement of a serious risk 'within the near future.'" While Ms. McCray was resistant to taking her medications, there were no findings establishing that failure to take such medication would create any probability of physical debilitation within the near future.

Even more interestingly, the Court of Appeals addressed a line of cases which stood for the proposition that failure of a respondent to care for her medical needs, diet, grooming, and general affairs meets the criteria for dangerousness to self. The Court explained that these cases, beginning with *In re Lee*, 35 N.C. App. 655, 242 S.E.2d 211 (1978), and including *In re Medlin*, 59 N.C. App. 33, 295 S.E.2d 604 (1982) and *In Re Lowery*, 110 N.C. App. 67, 428 S.E.2d 861 (1993), were based on the old version of the statute. The statute was amended in 1979 to reflect the current definition of dangerousness to self. However, the Court of Appeals had continued to rely on *Medlin* without realizing that its statutory basis had been removed. The Court of Appeals

concluded, therefore, that *Medlin* provided "no route to bypass the statute's requirement of a finding 'that there is a reasonable probability of [Respondent's] suffering serious physical debilitation within the near future."

***In re Webber*, 201 N.C. App. 212, 689 S.E.2d 468 (2009):** This appeal was of Mr. Webber's third 180-day period of involuntary outpatient treatment. Mr. Webber contended that, because his initial commitment order provided for a term of commitment that exceeded the period authorized, the initial commitment period expired as a matter of law, and, therefore, the trial court lacked jurisdiction to enter subsequent commitment orders.

The Court of Appeals held that, because Mr. Webber had failed to appeal from the initial order or request a supplemental hearing, his appeal of the present commitment was an impermissible collateral attack on the prior order. The Court held that in order to challenge the improper commitment period contained in the original order, Mr. Webber was required to appeal that order or to request a supplemental hearing. He could not, however, undo subsequent recommitment by challenging the prior order – entered by a court with jurisdiction – that he elected not to appeal.

Mr. Webber also argued that the evidence was insufficient to show that his condition would deteriorate and he would become a danger to himself or others if he did not continue treatment. The Court of Appeals held that the doctor's opinion that Mr. Webber would decompensate and become dangerous provided a sufficient basis to commit Mr. Webber. The Court also held that it was proper for the doctor to base his opinion in part on hearsay.

***In re Watson*, 209 N.C. App. 507, 706 S.E.2d 296 (2011):** This appeal was from Mr. Watson's combined thirty day inpatient, sixty day outpatient commitment. The trial court allowed Mr. Watson to represent himself at his commitment hearing without making any inquiry or going through any type of colloquy with him. Mr. Watson presented two arguments regarding the counsel issue on appeal: 1) that the commitment statutes do not allow a respondent to represent himself, and 2) in the alternative, that the trial court erred by not making the required findings that he was acting with full awareness of his rights and the consequences of his waiver, by not inquiring into his mental condition or the complexity of the matter before allowing him to waive his right to counsel, and by not acquiring such waiver in writing.

The Court of Appeals ultimately agreed with Mr. Watson's second argument, holding that the trial court had erred by failing to conduct a thorough inquiry with him. Its discussion of the issue seems to presume that an involuntary commitment respondent can represent himself at his commitment hearing but does not really address the issue directly. The Court did state, however, that the trial court should have, based on the documents and evidence before it, questioned Mr. Watson's capacity to waive counsel and considered whether he should have been precluded from self-representation. It went on to hold that the trial court was required to comply with the requirements of N.C. Gen. Stat. §15A-1242 and that its failure to do so required that the commitment order be vacated.

VIII. Oldies but Goodies

***In re Hogan*, 32 N.C. App. 429, 232 S.E.2d 492 (1977) and *In re Mackie*, 36 N.C. App. 638, 244 S.E.2d 450 (1978):** These two cases stand for the proposition that a respondent in an

involuntary commitment proceeding has a right to confront and cross-examine the witnesses against them. This right to confrontation means that if a physician's report is to be admitted into evidence or incorporated by reference into the trial court's order, the physician must testify at the commitment hearing. This right is also directly protected by N.C. Gen. Stat. §122C-268(f), which states that while "certified copies of reports and findings of physicians and psychologists…are admissible in evidence…the respondent's right to confront and cross-examine witnesses *may not be denied*."

***In re Barnhill*, 72 N.C. App. 530, 325 S.E.2d 308 (1985):** Failure to follow the proper procedures for the examination process subjects the case to dismissal.

***In Re Ingram*, 74 N.C. App. 579, 328 S.E.2d 588 (1985):** Failure of the petition to be signed by oath or affirmation before a duly authorized certifying officer constitutes grounds for dismissal of the case. The statutory requirements must be "followed diligently" and the failure to do so deprives the respondent of "liberty without legal process." *Id*. at 580, 328 S.E.2d at 589.

***In re Reed*, 39 N.C. App. 227, 249 S.E.2d 864 (1978):** Insufficient facts alleged in a petition, or no facts supporting conclusory statements in a petition, will subject the case to dismissal. "Recital of some of the underlying circumstances in the affidavit is essential if the magistrate is to perform his detached function and not serve merely as a rubber stamp." *Id*. at 229, 249 S.E.2d at 866 (citations omitted).

DISPOSITIONAL ALTERNATIVES FOR INVOLUNTARY COMMITMENT CASES INVOLVING MENTAL ILLNESS

INPATIENT COMMITMENT HEARINGS	
Proceeding	**Disposition**
Initial Commitment Hearing	Up to 90 days inpatient **or**
	Up to 90 days outpatient **or**
	A combination of both not to exceed 90 days
First Re-hearing	Up to 180 days inpatient **or**
	Up to 180 days outpatient **or**
	A combination of both not to exceed 180 days
Second and Subsequent Re-hearings	Up to 1 year inpatient **or**
	Up to 180 days outpatient

Source: N.C. Gen. Stat. §§ 122C-271 and 122C-276.

OUTPATIENT COMMITMENT HEARINGS	
Proceeding	**Disposition**
Initial Commitment Hearing	Up to 90 days outpatient
First and Subsequent Re-hearings	Up to 180 days outpatient

Source: N.C. Gen. Stat §§ 122C-271 and 122C-276.

DISPOSITIONAL ALTERNATIVES FOR INVOLUNTARY COMMITMENT CASES INVOLVING SUBSTANCE ABUSE

Proceeding	**Disposition**
Initial Commitment Hearing	Up to 180 days of treatment
First and Subsequent Re-hearings	Up to 365 days of treatment

Source: N.C. Gen. Stat. §§ 122C-287 and 122C-292

DISPOSITIONAL ALTERNATIVES FOR VOLUNTARY ADMISSIONS OF MINORS

Proceeding	**Disposition**
Initial Hearing	Up to 90 days of treatment
First and Subsequent Re-hearings	Up to 180 days of treatment

Source: N.C. Gen. Stat. §§ 122C-224.3 and 122C-224.4

STATE OF NORTH CAROLINA
COUNTY OF ORANGE

IN THE GENERAL COURT OF JUSTICE
DISTRICT COURT DIVISION
11 SPC 001

****

IN THE MATTER OF:)
)
RON RESPONDENT)

****

NOTICE OF APPEAL

****

Now comes the respondent, Ron Respondent, by and through counsel, and hereby gives notice of appeal from the district court judgment in the above-captioned case involuntarily committing him to a mental institution on January 15, 2011. Mr. Respondent hereby appeals to the North Carolina Court of Appeals.

This the 15th day of January, 2013.

_____

Ann Attorney
Attorney at Law
123 Main Street
Chapel Hill, NC 27516

CERTIFICATE OF SERVICE

I hereby certify that a copy of the foregoing motion was served on Ms. Jane Doe, 123 Main Street, Chapel Hill, North Carolina 27516, by deposit in the United States mail, first-class and postage prepaid.

This the 15th day of January, 2013.

_____

Ann Attorney
Attorney at Law