

**IN THE COURT OF APPEALS
OF THE STATE OF ALASKA
DOCKETING STATEMENT C
FOR USE IN EXPEDITED APPEALS UNDER APPELLATE
RULE 216 AND JUVENILE APPEALS UNDER APPELLATE
RULE 219**

Appeal filed by Defendant State of Alaska

(for court system use)

No. _____

1. TYPE OR APPEAL

a. <input type="checkbox"/> Extradition Appeal (App. R. 216(a)(1))	b. <input type="checkbox"/> Preemptory Challenge Appeal (App. R. 216(a)(2))
c. <input type="checkbox"/> Juvenile Delinquency Appeal (App. R. 219(a)(1))	d. <input type="checkbox"/> Juvenile Waiver Appeal (App. R. 219(a)(2))

2. DEFENDANT (If defendant is juvenile, use initials.)

a. Name	b. Did defendant have co-counsel status in the trial court? <input type="checkbox"/> YES <input type="checkbox"/> NO
c. Defendant Mailing Address * (not attorney's address)	Will defendant seek co-counsel status in the appellate court? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN
City State Zip Code	d. Telephone

* If defendant is incarcerated, include name and mailing address of correctional facility.

3. DEFENDANT'S ATTORNEY IN APPEAL

Defendant not represented by attorney in appeal.

a. Name <input type="checkbox"/> Court Appt	b. Bar Number	
c. Attorney Mailing Address	d. Telephone	e. Fax
City State Zip Code	f. Firm/Agency	

4. DEFENDANT'S ATTORNEY IN TRIAL COURT

Same as attorney in appeal.

Defendant not represented by attorney in trial court.

a. Name	b. Bar Number	
c. Attorney Mailing Address	d. Telephone	e. Fax
City State Zip Code	f. Firm/Agency	

5. PROSECUTING ATTORNEY *

a. Name	b. Bar Number	
c. Attorney Mailing Address	d. Telephone	e. Fax
City State Zip Code	f. Agency	

* Specify attorney who will handle appeal, if known. Otherwise, specify trial attorney.

6. EXTRADITION APPEAL

a. Superior Court Case No.	b. Superior Court Judge	c. Date Order or Judgment Distributed
d. Offense(s) for which extradition sought:		e. Requesting State
f. Pending Charges in Alaska	Trial Court Case No.	Status of Case

