- C FOR US	DF THE STA DOCKETING E IN APPEALS U Y MERIT APPEA	RT OF APPEA TE OF ALASK G STATEMENT A NDER APPELLATE I LS AND COMBINED TENCE APPEALS	XA RULE 204	(for cour	t system use)
Appe	al filed by 🗌 De	fendant 🗌 State of	Alaska	No	
l. DEFENDA	NT				
a. Name			b. Did defendant have of status in the trial cou		TES 🗌 NO
c. Defendant Ma	ailing Address * (not atte	orney's address)	Will defendant seek status in the appellat	· · · · · · · · · · · · · · · · · · ·	TES D NO INKNOWN
City	State	Zip Code	d. Telephone		
a. Name	NT'S ATTORNEY	TIN APPEAL	Defendant not r b. Bar Number	epresented by attor	ney in appeal.
c. Attorney Mai	ling Address		d. Telephone	e. Fax	
City	State	Zip Code	f. Firm/Agency		
3. DEFENDA	NT'S ATTORNEY	IN TRIAL COURT	Same as attorne	y in appeal. epresented by attor	ney in trial court.
a. Name Court Appt			b. Bar Number		
c. Attorney Mailing Address			d. Telephone	e. Fax	
City	State	Zip Code	f. Firm/Agency		
4. PROSECU	TING ATTORNE	Y *			
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.

5. TRIAL COURT PROCEEDING

a. Case No.				b. Trial Judge	c. Date Judgment Distributed			
d. Post-	d. Post-Judgment Motions: List all post-judgment motions that affect time for filing appeal. See Appellate Rule 204(a)(4).							
DATE OF FILING						DATE OF	RDER DISTI	RIBUTED
Month	Day	Year		Type of Post-Judgment Motion			Day	Year

5. TRIAL COURT PROCEEDING (continued)

e. Co-Defendants: List all co-defendants in trial court proceeding.						
		Co-	Defendant's Name	Co-Defendant's Trial Court Case No.		
f. Related Cases in the Trial Court: List all related trial court cases involving defendant (e.g., post-conviction relief proceeding under Criminal Rule 35.1, separate trial of defendant on related charges).						elief proceeding under
DATE OF FILING						
Month Day Year Type of Proceeding			Type of Proceeding		Trial Court Case No.	Status

6. JUDGMENT OR ORDER BEING APPEALED

a. Judgment (merit appeal or combined merit and sentence appeal). Provide the following information for each conviction being appealed.								
	NATURE OF APPEAL			PART OF SENTENCE BEING APPEALED				
Count No.	Offense	Conviction only	Conviction and sentence	Jail	Fine	Other (specify)		
b. Or	der. Specify:							
	Order of dismissal.							
	Order granting or denying post conviction relief (Criminal Rule 35.1).							
	Order granting or denying motion to reduce or correct sentence (Criminal Rule 35(a) or (b)).							
	Order granting or denying motion for new trial.							
Order granting or denying motion to withdraw plea.								
Order imposing attorney sanctions.								
	Other. Specify nature of order:							

7. RELATED PROCEEDINGS IN APPELLATE COURT

a. Pending Proceedings. List other pending proceedings in court of appeals or supreme court that involve defendant and arise out of the trial court case listed in 5.a.						
DAT	E OF FII	ING				
Month	Day	Year	Pending Appellate Proceedings	Appellate Court Case No.		
	b. Prior Proceedings. List prior proceedings in court of appeals or supreme court that involved defendant and arose out of the trial court case listed in 5.a.					
DATE OF FILING						
Month	th Day Year Prior Appellate Proceedings		Appellate Court Case No.			

8. ATTACHMENTS

The following items are submitted with this form:					
a. A copy of the final order or	judgment from which the appeal is taken.				
b. A statement of points on app	peal.				
c. A \$250 filing fee <u>or</u>	a motion to appeal at public expense (financial statement affidavit form must be included).				
	a motion to waive filing fee (financial statement affidavit form must be included).				
	an application for exemption from filing fee under AS 9.19.010.				
	no filing fee is required because appellant is represented by court-appointed counsel,				
	and AS 9.19.010 does not apply.				
	the State of Alaska.				
d. A designation of transcript	submitted.				
	not submitted (no transcript being requested).				
	motion to extend submitted.				

Date

Signature of Appellant or Appellant's Attorney

9. ATTORNEY INFORMATION*

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

*Complete this box only if the attorney who signs form is <u>not</u> the attorney named in box 2, 3, or 4.

CERTIFICATE OF SERVICE

I certify that on_____a copy of the notice of appeal, this docketing statement, and all attachments (except filing fee) were



FILING INSTRUCTIONS

File original docketing statement and notice of appeal with all attachments listed in #8 and ONE copy of ALL except filing fee.