In the Court of Appeals of the State of Alaska

Richard O'Connor,)	Court of Appeals No. A-12197
Appellant,)	Notice of Intent
V.)	to Appellant to
)	Enter Judgment For Cost of
State of Alaska,)	Appointed Attorney
)	Appellate Rule 209(b)
Appellee.)	. ,
)	Date of Notice: 4/10/19
Trial Court Case # 3AN-11-08501CR		

Unless you or the prosecutor objects by **5/28/19** (you may use the enclosed form to file an objection), the court or clerk will enter a judgment against you for the cost of your court-appointed attorney as indicated below:

Type of Appellate Proceeding	Misdemeanor	Felony
Sentence appeal or Petition for Sentence Review	\$ 250	\$ 500
Merit Appeal or Appeal from Post-Conviction Relief Proceedings	750	1,500
Combined Merit and Sentence Appeal or Petition for Sentence Review	1,000	2,000
Other Appellate Actions (Petition for Review, Petition for Hearing, Original Application)	500	1,000

M. Johnson, Deputy Clerk

Mailed to Appellant at: C/o Steven M Wells LLC

Distribution:

Steven M Wells Steven M Wells LLC 431 W 7th Ave., Ste. 107 Anchorage AK 99501

Donald Soderstrom Office of Criminal Appeals 1031 W. 4th Ave, Suite 200 Anchorage AK 99501

In the Court of Appeals of the State of Alaska

Richard O'Connor,)		
) Court of	Appeals No. A-12197	
Appellant,)		
V.		Opposition	
C4-4 C AlI	,	ntry of Judgment	
State of Alaska,	,	for Cost of ointed Attorney	
Appellee.)))	omica Attorney	
Trial Court Case # 3AN-11-08501CR	_)		
I oppose the entry of the proposed judappointed attorney for the following reason. My conviction was reversed on approximately	on(s):	me for the cost of my	court-
☐ I filed a petition for hearing (ca reversed. Judgment should be stayed.	se number S	; conviction can s	still be
☐ I filed the following type of action amount for this action:	n, but the clerk	or court assessed the	wrong
 □ Petition for Hearing □ Petition for Review □ Petition for Sentence Review □ Original Application 	☐ Merit Ap	ed Merit/Sentence App	eal
☐ The clerk or court is proposing to en is not correct because all of my offer.			
☐ I should be assessed less than the sonly hours on my case. (If you from your attorney showing the hours)	check this box,	, you must attach a stat	-
☐ Other			
Appellant's Daytime Phone Ap	ppellant's Signature	Date	
Appellant's Mailing Address	City	State	Zip
Mailed to State's Attorney on:			