Print Form

IN THE COURT OF APPEALS OF THE STATE OF ALASKA

(for court system use)

No. _____

DOCKETING STATEMENT A
FOR USE IN APPEALS UNDER APPELLATE RULE 204
FELONY MERIT APPEALS AND COMBINED FELONY MERIT/SENTENCE APPEALS

Appeal filed by ☐ **Defendant** ☐ **State of Alaska**

1. DEFENDANT

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

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

2. DEFENDANT'S ATTORNEY IN APPEAL

☐ Defendant not represented by attorney in appeal.

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

3. DEFENDANT'S ATTORNEY IN TRIAL COURT

☐ Same as attorney in appeal.
☐ Defendant not represented by attorney 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. 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.

5. TRIAL COURT PROCEEDING

a. Case No.	b. Trial Judge	c. Date Judgment Distributed

d. Post-Judgment Motions: List all post-judgment motions that affect time for filing appeal. See Appellate Rule 204(a)(4).

DATE OF FILING			Type of Post-Judgment Motion	DATE ORDER DISTRIBUTED		
Month	Day	Year		Month	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).

DATE OF FILING			Type of Proceeding	Trial Court Case No.	Status
Month	Day	Year			

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.

Count No.	Offense	NATURE OF APPEAL		PART OF SENTENCE BEING APPEALED		
		Conviction only	Conviction and sentence	Jail	Fine	Other (specify)

b. **Order.** 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.

DATE OF FILING			Pending Appellate Proceedings	Appellate Court Case No.
Month	Day	Year		

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			Prior Appellate Proceedings	Appellate Court Case No.
Month	Day	Year		

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 appeal.

c. ☐ A $250 filing fee or
- ☐ 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 Address			d. Telephone	e. Fax
City	State	Zip Code	f. Firm/Agency	

***Complete this box only if the attorney who signs form is not 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

mailed	delivered	to All parties in the trial court (listed)
☐	☐	_____
☐	☐	_____
☐	☐	_____
☐	☐	_____
☐	☐	_____

Signature: _____

FILING INSTRUCTIONS

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