

Supreme Court of the State of New York Appellate Division : Second Judicial Department

Request For Appellate Division Intervention - Criminal Cases

Instructions: Use a separate copy of this form for each judgment, sentence or order appealed from. Multiple convictions under different accusatory instruments, even if the judgments were rendered in the same court on the same day, require the completion of separate copies of this form. Please type or print and answer

all questions.

Attach a copy of the notice of appeal. If the appeal is from an order, attach a copy. If the appeal is from a judgment or sentence, attach a copy of the commitment order or an extract of the clerk's minutes.

Case Title: <p style="text-align: center;">The People of the State of New York, vs.</p>	For Appellate Division Use Only
	Case No.: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
	File Opened: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Appellate Division Status: Place a <input checked="" type="checkbox"/> in the appropriate box to indicate the Appellate Division status of the parties.	<table style="width: 100%; border: none;"> <tr> <td style="border: none;">Plaintiff</td> <td style="border: none;"><input type="checkbox"/> Appellant</td> <td style="border: none;"><input type="checkbox"/> Respondent</td> </tr> <tr> <td style="border: none;">Defendant</td> <td style="border: none;"><input type="checkbox"/> Appellant</td> <td style="border: none;"><input type="checkbox"/> Respondent</td> </tr> </table>	Plaintiff	<input type="checkbox"/> Appellant	<input type="checkbox"/> Respondent	Defendant	<input type="checkbox"/> Appellant	<input type="checkbox"/> Respondent
Plaintiff	<input type="checkbox"/> Appellant	<input type="checkbox"/> Respondent					
Defendant	<input type="checkbox"/> Appellant	<input type="checkbox"/> Respondent					

Type of Crime: If this is an appeal from a judgment of conviction, a sentence or an order granting or denying post-conviction relief, place a mark in up to five of the following boxes to indicate the type of crime or crimes of which the defendant was convicted. If the conviction was for more than five crimes, check the five most serious charges. Check the to indicate that the conviction was for the substantive crime and check the to indicate that the conviction was for an attempt to commit that crime. In the event that the precise crime of which the defendant was convicted does not appear on the following list, check the box comparable to the article of the Penal Law in which the substantive crime is set forth. If this is an appeal by the People from an interlocutory order, check up to five boxes to indicate the crimes of which the defendant has been charged.

= Substantive Crime = Attempt to Commit Crime

- | | | |
|---|--|--|
| <input type="checkbox"/> <input type="checkbox"/> 1 Arson
<input type="checkbox"/> <input type="checkbox"/> 2 Assault & Related Offenses
<input type="checkbox"/> <input type="checkbox"/> 3 Bribery, Not Public Servant & Related Offenses
<input type="checkbox"/> <input type="checkbox"/> 4 Bribery, Public Servants & Related Offenses
<input type="checkbox"/> <input type="checkbox"/> 5 Burglary & Related Offenses
<input type="checkbox"/> <input type="checkbox"/> 6 Children & Incompetents, Offenses Affecting
<input type="checkbox"/> <input type="checkbox"/> 7 Computer Offenses
<input type="checkbox"/> <input type="checkbox"/> 8 Conspiracy
<input type="checkbox"/> <input type="checkbox"/> 9 Controlled Substances, Possession
<input type="checkbox"/> <input type="checkbox"/> 10 Controlled Substances, Sale
<input type="checkbox"/> <input type="checkbox"/> 11 Controlled Substances, Other
<input type="checkbox"/> <input type="checkbox"/> 12 Criminal Facilitation
<input type="checkbox"/> <input type="checkbox"/> 13 Criminal Mischief & Related Offenses
<input type="checkbox"/> <input type="checkbox"/> 14 Criminal Possession of Stolen Property
<input type="checkbox"/> <input type="checkbox"/> 15 Criminal Solicitation
<input type="checkbox"/> <input type="checkbox"/> 16 Enterprise Corruption
<input type="checkbox"/> <input type="checkbox"/> 17 Escape & Offenses Relating to Custody | <input type="checkbox"/> <input type="checkbox"/> 18 False Written Statements - Offenses Involving
<input type="checkbox"/> <input type="checkbox"/> 19 Firearms & Dangerous Weapons, Possession
<input type="checkbox"/> <input type="checkbox"/> 20 Firearms & Dangerous Weapons, Use
<input type="checkbox"/> <input type="checkbox"/> 21 Firearms & Dangerous Weapons, Other
<input type="checkbox"/> <input type="checkbox"/> 22 Forgery & Related Offenses
<input type="checkbox"/> <input type="checkbox"/> 23 Frauds on Creditors
<input type="checkbox"/> <input type="checkbox"/> 24 Frauds, Other
<input type="checkbox"/> <input type="checkbox"/> 25 Gambling Offenses
<input type="checkbox"/> <input type="checkbox"/> 26 Homicide, Abortion
<input type="checkbox"/> <input type="checkbox"/> 27 Homicide, Criminally Negligent
<input type="checkbox"/> <input type="checkbox"/> 28 Homicide, Manslaughter
<input type="checkbox"/> <input type="checkbox"/> 29 Homicide, Murder
<input type="checkbox"/> <input type="checkbox"/> 30 Homicide, Vehicular Manslaughter
<input type="checkbox"/> <input type="checkbox"/> 31 Insurance Fraud
<input type="checkbox"/> <input type="checkbox"/> 32 Kidnapping, Coercion & Related Offenses
<input type="checkbox"/> <input type="checkbox"/> 33 Larceny
<input type="checkbox"/> <input type="checkbox"/> 34 Marijuana Offenses | <input type="checkbox"/> <input type="checkbox"/> 35 Marital Relationship, Offenses Affecting
<input type="checkbox"/> <input type="checkbox"/> 36 Motor Vehicle, Operating Under Influence
<input type="checkbox"/> <input type="checkbox"/> 37 Motor Vehicle, Other
<input type="checkbox"/> <input type="checkbox"/> 38 Obscenity & Related Offenses
<input type="checkbox"/> <input type="checkbox"/> 39 Offenses Relating to Judicial & Other Proceedings
<input type="checkbox"/> <input type="checkbox"/> 40 Official Misconduct, Obstruction of Public Servants
<input type="checkbox"/> <input type="checkbox"/> 41 Perjury & Related Offenses
<input type="checkbox"/> <input type="checkbox"/> 42 Privacy, Offenses Against
<input type="checkbox"/> <input type="checkbox"/> 43 Prostitution Offenses
<input type="checkbox"/> <input type="checkbox"/> 44 Public Order, Offenses Against
<input type="checkbox"/> <input type="checkbox"/> 45 Public Sensibilities, Offenses Against
<input type="checkbox"/> <input type="checkbox"/> 46 Robbery
<input type="checkbox"/> <input type="checkbox"/> 47 Sex Offenses, Rape
<input type="checkbox"/> <input type="checkbox"/> 48 Sex Offenses, Sexual Abuse
<input type="checkbox"/> <input type="checkbox"/> 49 Sex Offenses, Sodomy
<input type="checkbox"/> <input type="checkbox"/> 50 Theft Offenses, Other
<input type="checkbox"/> <input type="checkbox"/> 51 Other |
|---|--|--|

Original Court Information (Use another Form D for additional appeals):

Appeal From (Check one only): Judgment Order Sentence Amended Judgment Amended Order Amended Sentence

Resettled Order Decision Other (specify):

Dated or Rendered:	Indictment or Superior Court Information No.:
Court:	County:
Stage: <input type="checkbox"/> Interlocutory <input type="checkbox"/> Final <input type="checkbox"/> Post-Final	Judge (name in full):
Conviction: <input type="checkbox"/> Plea of Guilty <input type="checkbox"/> Jury Verdict <input type="checkbox"/> Nonjury Trial <input type="checkbox"/> Not Applicable	

Codefendants: Were there any codefendants under this accusatory instrument? Yes No

Names of codefendants convicted under this accusatory instrument:

Defendant Information (Please supply any available information):	NYSIS No.:
Prisoner Identification No.:	FBI No.:
Address:	