

SUPREME COURT OF THE STATE OF NEW YORK  
APPELLATE DIVISION, FOURTH DEPARTMENT

THE PEOPLE OF THE STATE OF NEW YORK,  
Respondent,

V

\_\_\_\_\_  
Defendant-Appellant.

) **NOTICE OF MOTION TO EXTEND**  
) **TIME TO PERFECT APPEAL**  
) **FROM SORA ORDER**

) # \_\_\_\_\_  
) (Insert SCI/Waiver or  
) Indictment Number)

) # \_\_\_\_\_  
) (Insert AD Docket Number)

PLEASE TAKE NOTICE, that upon the annexed affidavit(s), the undersigned will move this Court at a term of the Appellate Division, 50 East Avenue, Rochester, New York, 14604 on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, for an order granting appellate counsel an extension of time to perfect the appeal, and for such other and further relief as to the Court may seem just and proper.

PLEASE TAKE FURTHER NOTICE, that this motion will be submitted without oral argument (*see* 22 NYCRR 1000.13 [a] [6]). Answering affidavits, if any, must be filed with the Court on or before the Friday preceding the return date.

Dated: \_\_\_\_\_, 20 \_\_\_\_

\_\_\_\_\_  
(Name and address of moving party or attorney)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TO: \_\_\_\_\_ County District Attorney

\_\_\_\_\_  
\_\_\_\_\_

SUPREME COURT OF THE STATE OF NEW YORK  
APPELLATE DIVISION, FOURTH DEPARTMENT

_____	)	<b>AFFIDAVIT IN SUPPORT OF</b>
THE PEOPLE OF THE STATE OF NEW YORK,	)	<b>MOTION TO EXTEND TIME</b>
Respondent,	)	<b>TO PERFECT APPEAL</b>
	)	<b>FROM <u>SORA</u> ORDER</b>
V	)	
	)	# _____
	)	(Insert SCI/Waiver or
_____	)	Indictment Number)
Defendant-Appellant.	)	# _____
_____	)	(Insert AD Docket Number)

STATE OF NEW YORK  
COUNTY OF \_\_\_\_\_ ss:

\_\_\_\_\_, being duly sworn, deposes and says:

1. That I am an attorney and was assigned by the Appellate Division by order entered \_\_\_\_\_ to represent the above-named appellant on this appeal. (**Attach copies of all prior orders of this Court**).

2. That this affidavit is made in support of a motion for an extension of time to perfect the within appeal.

3. That this appeal is from an order of (insert name of Court, County) \_\_\_\_\_ (Hon. \_\_\_\_\_, J.), pursuant to the Sex Offender Registration Act.

4. A notice of appeal was **served** on (insert date) \_\_\_\_\_

5. The complete transcript of stenographic minutes was filed on \_\_\_\_\_

6. The nine month abandonment and dismissal date for perfection of the appeal is \_\_\_\_\_, and (check one of the following)

- no prior extensions have been granted by the Court
- a prior extension was granted by the Court on \_\_\_\_\_.

7. That an extension of time to file and serve the records and briefs is being sought for the following reasons: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(If the reason for the delay is that transcripts are missing or have not been filed, list the name[s] of the court reporter[s] and the specific minutes that have not been filed [e.g., arraignment, suppression, trial, plea, sentence] and any anticipated filing date).

WHEREFORE, deponent requests an extension of time to file and serve the records and briefs in this matter to (insert date) \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Counsel for Defendant-Appellant

Sworn to before me this  
\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC/COMMISSIONER OF DEEDS

My commission expires:\_\_\_\_\_

\_\_\_\_\_  
THE PEOPLE OF THE STATE OF NEW YORK,  
Respondent,

V

\_\_\_\_\_  
Defendant-Appellant.  
\_\_\_\_\_

) **AFFIDAVIT OF SERVICE**  
) **OF MOTION TO EXTEND**  
) **TIME TO PERFECT APPEAL**  
) **FROM A SORA ORDER**

) # \_\_\_\_\_  
) (Insert SCI/Waiver or  
) Indictment Number)

) # \_\_\_\_\_  
) (Insert AD Docket Number)

STATE OF NEW YORK)  
COUNTY OF \_\_\_\_\_ ) ss.:

\_\_\_\_\_, being duly sworn, deposes and says that (s)he  
is not a party to this action, is over 18 years of age, and resides at \_\_\_\_\_  
\_\_\_\_\_.

That on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, your deponent served the  
within Motion to Extend Time to Perfect Appeal by depositing a true copy thereof  
enclosed in a post-paid wrapper in an official depository under the exclusive care and  
custody of the U.S. Postal Service within New York State, addressed to each of the  
following parties and/or their attorneys at the last known address set forth after each  
name:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
(PRINT NAME BELOW SIGNATURE)

Sworn to before me this  
\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC/COMMISSIONER OF DEEDS

My commission expires: \_\_\_\_\_