	State of Alaska		
vs.			
De	fendant:		
DO	B: APSIN	l:	CASE NO
			RATION STATUS AND NG ON DEFENDANT'S COMPETENCY
1.			he custody of the Commissioner of Family and authorized representative on
			lefendant was admitted to Alaska Psychiatric for restoration services on
2.	I give notice to the court facility has determined th		or treatment provider at the above-named
	the defendant has been	en restored to con	npetency.
	the defendant is not I commitment.	ikely to be restore	ed to competency within the maximum period of
	Therefore, I request that defendant's competency		earing as soon as possible to address the
		and any function at	ction to be taken in this case.
3.	☐ A report is attached.	and any farther as	ction to be taken in this case.
3.	_		Signature
	☐ A report is attached.  Date	-	Signature
Prii	Date nt/Type Name:	- P	Signature osition or Title:
Prii Ma	Date nt/Type Name: iling Address:	P	Signature osition or Title:
Prii Ma Pho	Date nt/Type Name: iling Address:	P	Signature osition or Title: Email:
Prii Ma Pho	Date nt/Type Name: iling Address: one: ertify that I notified the partie	Fax:es of this notice and	Signature osition or Title: Email:
Prii Ma Pho	Date nt/Type Name: liling Address: one: ertify that I notified the particular defendant on	Fax:es of this notice andf	Signature osition or Title: Email: request as follows:
Prii Ma Pho	Date  nt/Type Name:  iling Address:  pretify that I notified the partice Defendant on  Defendant on  Defendant's Attorney on	Fax:es of this notice andeatea	Signature  Distriction or Title:  Email:  request as follows:  date/time] by the following method(s):
Prii Ma Pho	Date  nt/Type Name:  iling Address:  pretify that I notified the partice Defendant on  Defendant on  Defendant's Attorney on	Fax:es of this notice andeateat	Signature  Distribution or Title:  Email:  request as follows:  date/time] by the following method(s):  [date/time] by the following method(s):  [date/time] by the following method(s):
Prii Ma Pho	Date  nt/Type Name: iling Address: one: ertify that I notified the partic Defendant on Defendant's Attorney on Prosecuting Attorney on	Fax: Pares of this notice and at	Signature  Distribution or Title:  Email:  request as follows:  date/time] by the following method(s):  [date/time] by the following method(s):  [date/time] by the following method(s):  [date/time] by the following method(s):  Served or notified]
Prii Ma Pho	Date  nt/Type Name:  iling Address:  pretify that I notified the partice Defendant on  Defendant's Attorney on  Prosecuting Attorney on  Other: [list name and description of the content o	Fax: Pares of this notice and at	Signature  Distribution or Title:  Email:  request as follows:  date/time] by the following method(s):  [date/time] by the following method(s):  [date/time] by the following method(s):  [date/time] by the following method(s):  Served or notified]