| State of Minnesota District Court | | | | |
|-----------------------------------|---|--|---|--|
| Count | y | | Judicial District: | |
| | | | Court File Number: | |
| | | | Case Type: | Criminal |
| Stata | of Min | nesota, | | |
| State | OI WIIII | Plaintiff | | |
| vs. | | | First | tement of Rights Court Appearance radition Proceedings |
| | | Defendant | | |
| A. | I unde | erstand that: | | |
| | 1. | The State of been charged with a crime a broken the terms of bond or been convicted of a crime probation or parole; escaped from custody; other (specify): | and not appeared in cour bail; and violated condition | t; ns of release, the sentence, |
| | 2. | The State of | facts noted above, and | my return, has advised I intends to or has started |
| | 3. | I must decide whether to: (a) challenge the legality of my (b) fight my extradition (return) | | |
| В. | I acknowledge that I have received a copy of any complaint or extradition papers that have been issued, and I have been given a Waiver of Extradition form. | | | |
| C. | I unde | I understand that: | | |
| | 1. 2. | I have the right to be represented. An attorney will be appointed attorney. I do not have to say anything about the same and the same | to represent me if I count the facts or circums | - • |
| | 4.5.6. | Anything I do say can be used a I have the right to challenge the Habeas Corpus. I have the right to fight my extr | he legality of my arrest | |

- 7. I have the right to speak to an attorney before deciding whether to challenge my arrest or to fight extradition.
- 8. I have the right to have bail set.

| D. | I also | I also understand that: | | | | |
|--------|------------------------------------|--|--|--|--|--|
| | 1. | If I waive extradition, I may be held in custody until authorities from the State of come to get me. | | | | |
| | 2. | If I fight extradition, I may be held in custody for up to 30 days (or possibly as long as 90 days) in order to permit the State ofto begin extradition proceedings against me. | | | | |
| E. | I wis | I wish to (check one): | | | | |
| | □ r | request a court-appointed attorney and have completed a form regarding my income, property, and expenses. request a continuance to consult a private attorney. waive (give up) my right to have an attorney. | | | | |
| F. | I wish to (check appropriate box): | | | | | |
| | | challenge the legality of my arrest. waive (give up) my right to challenge the legality of my arrest. fight my extradition (return) to the State of waive (give up) my right to fight my extradition (return) to the State of | | | | |
| Dated | l: | Signature Date of Birth | | | | |
| Your | attorne | Signature Date of Birth ey: Your Name: | | | | |
| | | ess: Street Address: | | | | |
| City/S | State/Z | ip: City/State/Zip: | | | | |
| Telep | hone: | () Telephone: () | | | | |
| E-mai | il addr | ess: E-mail address: | | | | |

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