Read Before Filling Out Request for Hearing to Challenge Restitution

The ND Legal Self Help Center can't provide assistance in criminal matters and doesn't have forms, procedures, or expertise available in this area.

If you have questions about this form, contact the office of the <u>District Court clerk of</u> <u>court</u> where your criminal case is currently filed.

You may use this form if:

- 1) Your criminal case was filed in a North Dakota State District Court;
- 2) You were served written notice of the amount of restitution requested;
- 3) You want to challenge (dispute) the amount of restitution requested; and
- 4) It's been less than 30 days since you were served the written notice.

To fill out this form:

- Fill in the same County and Judicial District of your criminal case. If you don't know the Judicial District, you may leave that space blank.
- Since your criminal case was filed in District Court, the Plaintiff is the State of North Dakota. Fill in your name as the Defendant.
- Paragraph 1: Fill in your name as the Defendant.
- Date and sign the form. Fill in all of the lines underneath your signature.
- Make a copy of your completed form for your records.

File the original of your completed form with the <u>District Court clerk of court</u> where your criminal case is currently filed.

Your written request must be filed within 30 days of service of the written notice of the restitution amount requested. If you don't meet the deadline, you may not get a hearing.

Don't include this cover sheet when you file the form.

Cover Sheet Page ${\bf 1}$ of ${\bf 1}$

NDCC § 12.1-32-08(3) Request Restitution Hearing/Aug 2023

STATE OF NORTH DAKOTA			IN DISTRICT COURT	
COUNTY OF		(leave bla	JUDICIAL DISTRICT (leave blank if unknown)	
State of North Dakota, vs	Plaintiff, Defendant.)) Request fe	or Hearing to Restitution	
			n the Defendant in this case. Section 12.1-32-08(3) of the	
North Dakota Century Coc	le.			
Dated				
Signature of Defendant			_, Defendant	
Typed or Printed Name of	Defendant		-	
Address			-	
City () Telephone Number	State	Zip Code	-	
Email Address			-	