

Person Filing: _____
Address (if not protected): _____
City, State, Zip Code: _____
Telephone: _____
Email Address: _____
Lawyer's Bar Number: _____

For Clerk's Use Only

Representing Self, without a Lawyer or Attorney for Petitioner OR Respondent

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

**STATE OF ARIZONA,
PLAINTIFF**

CASE NO: _____

v.

**APPLICATION TO
DESIGNATE A CLASS 6
UNDESIGNATED FELONY AS A
MISDEMEANOR**

_____,
DEFENDANT

On the _____ day of _____, 20____, I was convicted of
_____ a class 6 undesignated felony, by
Judge _____, in Maricopa County Superior Court.

This was either my first or second felony conviction. In addition, this class 6 felony conviction was not a dangerous offense in that it did not involve the intentional or knowing infliction of serious physical injury or the discharge, use or threatening exhibition of a deadly weapon or dangerous instrument.

The checked items apply to this application.

On the _____ day of _____, 20____, I completed the conditions of my probation and the Probation Department's order discharging me from probation is in the Court file or attached to this form, OR

I am still on probation. My Probation Officer is _____, and

I have complied with all required terms of my probation (including all employment, classes, community service, restitution, drug/alcohol testing, or other requirements),

OR

I have not complied with all terms of my probation.

If you have not complied with all terms of your probation, explain below:

I have been charged with or convicted of a felony offense since the date of my conviction for this offense. The case number and charges are as listed below.

| Case Number | Name/type Felony Offense(s) Charged or Convicted of |
|-------------|---|
| | |
| | |
| | |
| | |

I request that the class 6 undesignated felony of which I was convicted in this case, be designated a misdemeanor for the following reason(s)

Therefore, based on A.R.S. § 13-604, I respectfully request this Court designate the offense a misdemeanor.

Submitted this _____ day of _____, 20____.

Defendant's Signature

Defendant's Printed Name

CERTIFICATE OF MAILING

Original + one copy filed with the Clerk of the Court this _____, 20____
Month Date Year

One copy of this document was sent via first class mail or hand-delivered this (date below),
_____, 20____
Month Date Year

To:

**Maricopa County Attorney
301 W. Jefferson Street
Phoenix, Arizona 85003**

OR, if the case was prosecuted by the Attorney General rather than the County Attorney,

To:

**Arizona Attorney General's Office
1275 West Washington Street
Phoenix, Arizona 85007**