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retained  CJA  FPD  Pro Se  Other *Please attach appointment order.*

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**DEFENDANT INFORMATION**

Prisoner ID: \_\_\_\_\_ Address: \_\_\_\_\_  
Custody: \_\_\_\_\_  
Bail: \_\_\_\_\_

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**AMENDED NOTIFICATION INFORMATION**

Date Fees Paid: \_\_\_\_\_ 9th Circuit Docket Number: \_\_\_\_\_

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Name & Phone Number of Person Completing this Form: Sandy Morris  
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