



OFFICE OF THE DISTRICT ATTORNEY
CONTRA COSTA COUNTY

Diana Becton
DISTRICT ATTORNEY

REQUEST FOR CASE REVIEW

The Conviction Integrity Unit will, upon written request, investigate claims of actual innocence based on new evidence and information, and cases where there is evidence involving significant integrity issues. The Conviction Integrity Unit will give priority to cases where the applicant is in custody. However, anyone may seek review regardless of custodial status.

Requirements

The following form is required to initiate review by the Conviction Integrity Unit. Please answer as many of the following questions as you can. If you have additional materials you wish to include, please include those materials at the time you submit this application. Once your application is submitted, a review of your case will be initiated to determine whether there is some injustice that may be corrected. The length of time that this review may take cannot be predicated and will depend on factors such as the type of offense you were convicted of, the nature of your claims, the age of your case and the availability of case materials and witnesses.

Eligibility

In order for your application to be reviewed, all of the following must apply:

- 1) The conviction must have been in Contra Costa County
- 2) If you are represented by an attorney, all communication with our office must be made by your attorney

If the Conviction Integrity Unit reviews your case, it is likely that we may request additional information from the applicant and/or their representative. It is also possible that the Conviction Integrity Unit may request additional information from other people who have relevant information, including any attorney who participated in the proceedings which led to the underlying conviction.

Applications may be submitted by the following ways:

Email: DA-ConvictionIntegrityUnit@contracostada.org

US Mail:

Contra Costa County Office of the District Attorney

Attention: Brian Feinberg

Conviction Integrity Unit

900 Ward Street

Martinez, CA 94553

For QUESTIONS and FORM SUBMISSION only:
Email DA-ConvictionIntegrityUnit@contracostada.org

Contact/Identification Information

1. Defendant's name: _____
2. Defendant's date of birth: _____
3. CDCR Number (if applicable): _____
4. Contact Information (including current phone number and mailing address): _____

5. Attorney of record at time of conviction: _____
6. Current attorney, if any: _____
7. If submitted by another person on behalf of Defendant, please list your relationship to Defendant and your name and contact information: _____

8. If this request is submitted by someone other than the Defendant, have you obtained the written consent from him or her to file this request?
 Yes No
9. If the Defendant is currently in custody, where is he or she currently housed (specific prison, jail, etc.)? _____

CONVICTION INFORMATION

1. Contra Costa County Superior Court Case Number: _____
2. Crimes of conviction: _____

3. Sentence enhancements, if any: _____

4. Date of conviction: _____
5. Was the conviction by jury trial, court trial, plea of guilty, or by plea of nolo contendere (no contest)? _____
6. Length of sentence imposed: _____
7. Anticipated release date (if still in custody): _____
8. Explain why relief is being requested in this case (i.e. evidence of actual innocence, integrity issues, etc): _____

9. Please list any credible evidence that supports your claim _____

APPEAL INFORMATION

A criminal appeal is a right awarded to a defendant who receives an unfavorable verdict or outcome; the criminal appeal process provides a defendant the opportunity to contest his or her conviction to a formal appeals court. In certain cases, a defendant may seek a writ. Writs are issued by courts directing the person to whom they are addressed to do something or to not do something.

1. Was there a direct appeal of the conviction?
 ___Yes ___No
 - a. If yes, who was your attorney on direct appeal? _____
 - b. If yes, please list the appellate case number: _____

- c. If yes, please list the date the appeal was filed: _____
- d. If yes, are there any proceedings currently pending? ___Yes ___No
- e. If yes, what is the next date? _____
2. Were there any State or Federal Writs filed in the case? ___Yes ___No
- a. If yes, who was your attorney on the writ(s)? _____
- b. If yes, please list the Habeas Corpus case number: _____
- c. If yes, are there any proceedings currently pending? ___Yes ___No
- d. If there are no pending proceedings, please list date decided (i.e. the date the opinion was issued or mandate was returned): _____

Please attach copies of any relevant documents referenced above and any other information relevant to the type of relief sought that would assist the District Attorney's Office in determining whether to grant the requested relief.

Name of person submitting this request: _____

Contact information for person submitting request: _____

Signature of person submitting this request: _____

Dated: _____

Return the completed copy of your Request for Review form and all other requested documentation to the following address via U.S. Mail or e-mail:

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