

CONFIDENTIAL CASE EVALUATION FORM (CCEF) - DISTRICT OF ARIZONA¹

The answers to these questions are for case management and budgeting purposes only and will not be binding in any respect on substantive issues to be raised in the course of litigation.

Name of Attorney(s):

Lead Counsel: _____

Co-Counsel: _____

State Level Proceedings:

1. Did (or does) either lawyer represent the petitioner during any part of the state proceedings? " No " Yes (indicate which lawyer) _____

If yes, in what aspects of the case? _____

2. Has a state post-conviction proceeding involving the same judgment and sentence been filed? " No " Yes Date: _____ Court: _____

3. Were funds requested at the state level for state post-conviction investigation?
" No " Yes:

Purpose	Amount Requested	Amount Authorized

¹This form will be sent to counsel with the *Ex Parte* Cost Management Order. Counsel will complete it to the extent possible prior to CMC #1. Subsequently, it will be updated and submitted to the Court as the information becomes available, but not later than CMC #2.

4. Was discovery requested at the state level? " No " Yes

Nature of Discovery Requested	Granted	Denied

5. Was an evidentiary hearing held in the state post-conviction proceeding? " No " Yes

Statute of Limitations:

Based on current information, what is the petitioner's position as to the statute of limitations for filing the amended petition?

State Court Record:

1. Has the record been assembled?

" Yes " No - Location of record: _____

2. Have the files of all prior counsel been obtained? " Yes " No - Explain

3. As accurately as possible (recognizing that it may be an estimate at this point), provide information about the size of the record:

Type of Record	# pages
Trial transcript and exhibits	
State court record on appeal	
Arizona Supreme Court record (appellate pleadings and decision)	
State post-conviction record (including transcripts, pleadings, motions, and exhibits)	
Ancillary files and records (including prior counsels' case files, co-defendant's files, investigative reports, etc.)	
Total pages	

Please enter your estimate of the time required to review the record on the “Phase I Case Management Plan and Budget Form.” Note: Counsel will be expected to review the record at a rate of 60 pages per hour.

Factors Affecting Case Complexity:

Check all the factors applicable to this case and provide information that will allow determination of whether the case may be especially complex or costly.

- " Age of defendant at time of offense: _____
- " Number Co-defendants _____
- " Elapsed time since offense: _____
- " Number of victims _____
- " Elapsed time since trial: _____

(continued on next page)

" Related cases (summarize):

" Prior convictions (number and type):

" Informant involved (number, type, and availability of informant(s)):

" Serial homicides (number of different offenses at separate locations):

" Aggravating factors found (list):

" Other crimes evidence relevant to capital proceedings (list):

" Defendant spent extended time out of state or country (location, how long):

(continued on next page)

" Defendant's family presently out of state or country (location):

" Witnesses or other investigation will require travel

" Defendant's and/or family's background records were not obtained in state proceedings

" There are issues as to competency/mental illness or other disabilities

Explain impact on legal issues: _____

Explain impact on client relations: _____

" Use of drugs or alcohol at time of offense

" Translator required for defendant

" Translator required for witnesses (number of witnesses and types)

" Defendant suffered physical/mental abuse as a child

" Scientific procedures will be required

Types: _____

" Other issues (describe)
