STATE OF NORTH CAROLINA					Form IDS-032			(Rev. 05/16)
County					File Nos.			
Name Of Indigent Defendant			RJA MOTIONS REPORTING FORM POTENTIALLY CAPITAL CASES AT THE TRIAL LEVEL CAPITAL CASES ON DIRECT APPEAL CAPITAL POST-CONVICTION CASES					
INSTRUCTIONS: Private appointed counsel, public defenders, appellate defenders, and capital defenders who represent a defendant in a potentially capital case at the trial level, capital case on direct appeal, or capital post-conviction case must complete and submit this form within 10 days of filing any motion associated with the North Carolina Racial Justice Act ("RJA"), Session Law 2009-464, including any amended motions required by Session Law 2012-136.								
• If this case is pending at the trial level, counsel must submit this form to the Office of the Capital Defender by facsimile to (919) 354-7221 or by email to CapitalForms@nccourts.org.								
• If this case is pending at the appellate or post-conviction level, counsel must submit this form to Susan Perry, IDS Legal Associate, by facsimile to (919) 354-7201 or by email to Susan.D.Perry@nccourts.org.								
	I. CASE INFORMAT				ON			
Case Phase (check o		☐ Direct App	peal	□ Post-	-Conviction			
		II. RJA MOTIONS FILED						
Motions Filed Pursuant To RJA (check all that apply)								
☐ RJA Discovery Motion]	Date Filed:			
☐ Motion to Continue Pursuant to RJA]	Date Filed:	d:		
\square Motion to Extend Time to File RJA Claim]	Date Filed:			
☐ Motion to Reopen Rule 24 Hearing to Inve				RJA Claim	Date Filed:			
☐ RJA Motion to Preclude Death Penalty (Based on <u>Grosso</u> Study) Date Filed: ☐ Check here if substantive motion included constitutional race-based claims in addition to RJA claims								
☐ RJA Motion to Preclude Death Penalty (Based on Other Studies) Date Filed:								
☐ Check here if substantive motion included constitutional☐ RJA Amended Motion Pursuant to Session Law 2012-13					l claims in additio Date Filed:			
\Box Other (describe below)					Date Filed:			
III. ATTORNEY INFORMATION								
Date	Name Of Counsel Co	mpleting This Fo	rm	Signature Of Couns	el Completing This	Form	Is Counsel A Yes	District Coordinator?