

**STATE OF ALASKA
DEPARTMENT OF PUBLIC SAFETY
REQUEST TO APPEAL ADVERSE RESPONSE TO CORRECT
INFORMATION ON THE SEX OFFENDER REGISTRY**

Completed forms must be sent to:

Commissioner
Department of Public Safety
5700 East Tudor Road, Anchorage, AK 99507
Telephone: (907) 269-0397 Fax: (907) 269-0394

In accordance with 13 AAC 09.025 and 13 AAC 09.060, this form is provided to request an appeal of an adverse response to correct information maintained in the Sex Offender Registry required in 18.65.087(d). If you submitted a request to review or correct information in the sex offender registry and received an adverse response, you may appeal to the Commissioner of Public Safety within 30 days of the response. The appeal must be in writing and must clearly define the reasons for the appeal. The commissioner will respond in writing within 45 days after receipt of the appeal. Explain the reasons for your appeal on the form below. Use additional pages if necessary. An appeal does not waive the requirement to register.

To be completed by the offender:

Offender Information

Court Case Information

Name: _____	Court Case #: _____
Mailing address: _____	Court Location: _____
City: _____	Conviction Charge: _____
State/Zip code: _____	Statute/Ordinance: _____
Driver's License #: _____	Count or Charge #: _____
Date of birth: _____	Conviction Date: _____

Reasons to appeal an adverse response to correct information maintained in the Sex Offender Registry:

Unsworn Falsification Statement

I certify under penalty of unsworn falsification (AS 11.56.210) the information I am supplying for this request is true and correct.

Offender Signature

Date