

**REQUEST FOR SENTENCE
CLARIFICATION**

JD-CR-164 Rev. 6-11

**STATE OF CONNECTICUT
SUPERIOR COURT
CSSD ADULT SERVICES**
www.jud.ct.gov

State of Connecticut vs.		Geographical Area number	Place of sentencing (Town)	Date of sentencing	Name of Judge entering sentence
Docket number	Charge(s) and sentence(s)				
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Issue:**Copy of Request Sent to:**

State's Attorney/Assistant State's Attorney	Defendant/Defendant's Attorney	
From (Probation Officer)	Signature of Probation Officer	Date
Name of Probation Supervisor who approved Request	Signature of Probation Supervisor	Date

Court's Finding:Hearing to be held: Yes No

If yes, Date: _____ Time: _____ Location: _____

Signed (Judge/Assistant Clerk)	Date
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The Judicial Branch of the State of Connecticut complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation in accordance with the ADA, contact a court clerk or an ADA contact person listed at www.jud.ct.gov/ADA.