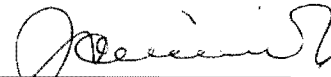


ABSENCE FROM COURT DUE TO ILLNESS
OTSUSTVO SA SUDA ZBOG BOLESTIDetainee / Pritvorenik

I, the undersigned, hereby declare that:

Ja, dolje potpisani, izjavljujem da: I am unable to attend court proceedings on this date due to illness.
Danas nisam u stanju prisustvovati suđenju zbog bolesti. I have discussed the matter with my counsel.
Razgovarao sam o ovome sa svojim advokatom odbrane. I understand that I have a right to be present at all trial proceedings against me, however I waive my right to be present in court on this date and give my consent for the proceedings to continue in my absence but in the presence of my counsel.
*Razumijem da imam pravo prisustvovati svim sjednicama suđenja protiv mene, međutim odričem se tog prava danas i dajem svoje dopuštenje da se sudski postupak nastavi u mom odsustvu, ali u prisustvu mog advokata odbrane.*Jovana Stanišić(PRINT NAME)
(IME I PREZIME ŠTAMPANIM
SLOVIMA)(SIGNATURE)
(VLASTORUČNI POTPIS)Date 11. 7 2017
Datum

Ref: 2017 - 14
YEAR REF No

Principal Officer

I confirm receipt of this form from I. Stanistic at 8.30^{hr}
(DETAINEE NAME) (TIME)

If the form is unsigned:

- The detainee refuses to sign.
- The detainee appears unable to sign due to his illness.
- The detainee is unable to sign due to his inability to contact counsel.

Other comments: _____

U. S. (PRINT NAME) [Signature] (SIGNATURE) 11.07.2017. (DATE)

UNDU Medical Service (Questions 1, 2, 4 and 5 must be answered)

- 1 I confirm that I have examined the detainee named on the preceding page.
- 2a I confirm that he has observable symptoms which indicate that he may feel too unwell to attend court.
- 2b I confirm that he has no observable symptoms with which I can judge whether or not he is too unwell to attend court.
- 3 This appears to be a serious illness which will require further investigation.
- 4a Including today, I assess that he will require a 1 day absence before he should be fit to attend court once more, or
- 4b I assess that this illness will require an extended period of convalescence.
- 5a The MO has been consulted,
- 5b The MO has seen the detainee,
- 5c The MO will see the detainee today,
- 5d The MO will see the detainee during his next visit.
- 6 Other comments: _____

Re. 5: More than one option may be selected.

M. anelen (PRINT NAME) nurse (PRINT FUNCTION) [Signature] (SIGNATURE) 11-7-17 (DATE)



**TRANSMISSION SHEET FOR FILING OF DOCUMENTS WITH THE
MECHANISM FOR INTERNATIONAL CRIMINAL TRIBUNALS/
FICHE DE TRANSMISSION POUR LE DÉPÔT DE DOCUMENTS DEVANT LE
MÉCANISME POUR LES TRIBUNAUX PÉNAUX INTERNATIONAUX**

I - FILING INFORMATION / INFORMATIONS GÉNÉRALES

To/ À :	MICT Registry/ <i>Greffe du MPTI</i>	<input type="checkbox"/> Arusha/ <i>Arusha</i>	<input checked="" type="checkbox"/> The Hague/ <i>La Haye</i>		
From/ De :	<input type="checkbox"/> Chambers/ <i>Chambre</i>	<input type="checkbox"/> Defence/ <i>Défense</i>	<input type="checkbox"/> Prosecution/ <i>Bureau du Procureur</i> <input checked="" type="checkbox"/> Other/ <i>Autre : Registry</i>		
Case Name/ Affaire :	Prosecutor v. Stanisic and Simatovic		Case Number/ Affaire n° : MICT-15-96-T		
Date Created/ Daté du :	11.07.2017	Date transmitted/ Transmis le :	11.07.2017	No. of Pages/ Nombre de pages :	2
Original Language / Langue de l'original :	<input checked="" type="checkbox"/> English/ <i>Anglais</i>	<input type="checkbox"/> French/ <i>Français</i>	<input type="checkbox"/> Kinyarwanda	<input type="checkbox"/> B/C/S	<input type="checkbox"/> Other/ <i>Autre (specify/préciser) :</i>
Title of Document/ Titre du document :	UNDU Memorandum				
Classification Level/ Catégories de classification :	<input checked="" type="checkbox"/> Unclassified/ <i>Non classifié</i>	<input type="checkbox"/> Ex Parte Defence excluded/ <i>Défense exclue</i>			
	<input type="checkbox"/> Confidential/ <i>Confidentiel</i>	<input type="checkbox"/> Ex Parte Prosecution excluded/ <i>Bureau du Procureur exclu</i>			
	<input type="checkbox"/> Strictly Confidential/ <i>Strictement confidentiel</i>	<input type="checkbox"/> Ex Parte R86(H) applicant excluded/ <i>Art. 86 H) requérant exclu</i>			
		<input type="checkbox"/> Ex Parte Amicus Curiae excluded/ <i>Amicus curiae exclu</i>			
		<input type="checkbox"/> Ex Parte other exclusion/ <i>autre(s) partie(s) exclue(s) (specify/préciser) :</i>			
Document type/ Type de document :	<input type="checkbox"/> Motion/ <i>Requête</i>	<input type="checkbox"/> Submission from parties/ <i>Écritures déposées par des parties</i>	<input type="checkbox"/> Indictment/ <i>Acte d'accusation</i>		
	<input type="checkbox"/> Decision/ <i>Décision</i>	<input checked="" type="checkbox"/> Submission from non-parties/ <i>Écritures déposées par des tiers</i>	<input type="checkbox"/> Warrant/ <i>Mandat</i>		
	<input type="checkbox"/> Order/ <i>Ordonnance</i>	<input type="checkbox"/> Book of Authorities/ <i>Recueil de sources</i>	<input type="checkbox"/> Notice of Appeal/ <i>Acte d'appel</i>		
	<input type="checkbox"/> Judgement/ <i>Jugement/Arrêt</i>	<input type="checkbox"/> Affidavit/ <i>Déclaration sous serment</i>			

II - TRANSLATION STATUS ON THE FILING DATE/ ÉTAT DE LA TRADUCTION AU JOUR DU DÉPÔT

<input checked="" type="checkbox"/> Translation not required/ <i>La traduction n'est pas requise</i>					
<input type="checkbox"/> Filing Party hereby submits only the original, and requests the Registry to translate/ <i>La partie déposante ne soumet que l'original et sollicite que le Greffe prenne en charge la traduction :</i> (Word version of the document is attached/ <i>La version Word est jointe</i>)					
<input type="checkbox"/> English/ <i>Anglais</i>	<input type="checkbox"/> French/ <i>Français</i>	<input type="checkbox"/> Kinyarwanda	<input type="checkbox"/> B/C/S	<input type="checkbox"/> Other/ <i>Autre (specify/préciser) :</i>	
<input type="checkbox"/> Filing Party hereby submits both the original and the translated version for filing, as follows/ <i>La partie déposante soumet l'original et la version traduite aux fins de dépôt, comme suit :</i>					
Original/ Original en	<input type="checkbox"/> English/ <i>Anglais</i>	<input type="checkbox"/> French/ <i>Français</i>	<input type="checkbox"/> Kinyarwanda	<input type="checkbox"/> B/C/S	<input type="checkbox"/> Other/ <i>Autre (specify/préciser) :</i>
Translation/ Traduction en	<input type="checkbox"/> English/ <i>Anglais</i>	<input type="checkbox"/> French/ <i>Français</i>	<input type="checkbox"/> Kinyarwanda	<input type="checkbox"/> B/C/S	<input type="checkbox"/> Other/ <i>Autre (specify/préciser) :</i>
<input type="checkbox"/> Filing Party will be submitting the translated version(s) in due course in the following language(s)/ <i>La partie déposante soumettra la (les) version(s) traduite(s) sous peu, dans la (les) langue(s) suivante(s) :</i>					
<input type="checkbox"/> English/ <i>Anglais</i>	<input type="checkbox"/> French/ <i>Français</i>	<input type="checkbox"/> Kinyarwanda	<input type="checkbox"/> B/C/S	<input type="checkbox"/> Other/ <i>Autre (specify/préciser) :</i>	

Send completed transmission sheet to/ *Veuillez soumettre cette fiche dûment remplie à :*

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Rev: April 2014/Rév. : Avril 2014