

VICTIM NOTIFICATION REQUEST FORM

As a victim of crime, you are afforded the right to information about the case and to be present at criminal justice proceedings. Therefore, it is necessary that you provide the following information so that we may notify you in a timely manner of such proceedings. **In order to provide this information, you must keep us advised of any change of address or phone number. Failure to return this form in a timely manner may result in no notification of upcoming court dates. Please return this to the Wright County Prosecuting Attorney's Office within 10 days of the date of this letter.**

I would like to be notified of all hearings, including bond reviews or revocation, plea, and sentencing of the defendant (please initial):

- Monthly/Quarterly Contact: _____
- Change of Case Status Only: _____
- Notice Immediately Prior to Trial Only: _____
- I waive my rights to notification and request No Contact with your office: _____

Victim Name: _____ DOB: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Relationship to Offender: _____ Race: _____ Gender: _____

Emergency Contact: _____

Address: _____ Phone: _____

Defendant Name: _____ Case #: _____

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In the event that the defendant is not sentenced to MO Department of Corrections, I request that the following losses be considered by the court when determining the disposition of this case.

- Defendant to pay restitution for my medical treatment for injuries: _____
- Defendant to pay for my counseling/psychological treatment: _____
- Defendant to pay for my lost wages: _____
- Defendant to pay other financial losses: _____

If the court is considering probation for the defendant, I request the following special conditions:

Counseling for the defendant: Yes No

No future contact with me: Yes No

Incarceration for a period of time: Yes No

Victim's Signature

Date

If you have any questions regarding this form, please contact Wright County Prosecutor's Office
Phone: (417) 741-6166 Email: wrightcountypa@gmail.com