

**CRIMES VICTIM'S RIGHTS ACT
REQUEST FORM**

As is explained to you in the enclosed booklet, as a victim of crime you have various rights available to you upon your request. This form assists you in requesting these rights. Please review this list, check the notices and details with which you wish to be involved. Please insure that your name, home and work addresses, and telephone numbers are correctly stated. *Remember, it is your obligation* to keep the Prosecuting Attorney's Office **informed of any changes in your address or phone number.**

Court proceedings often times move very quickly, particularly in the preliminary stages. In order to insure that you are provided the rights that you are requesting, return this document immediately to the following address.

Paul R. Spaniola
Mason County Prosecuting Attorney
Mason County Courthouse
304 E. Ludington Avenue
Ludington, MI 49431

1. If you wish to be notified about any of the following events, please check the space before the described event:

- Pretrial Proceeding (often times pleas and sentencing will occur at pretrial)
- Trial
- Sentencing

2. Do you wish to talk with the Prosecuting Attorney or other appropriate person regarding any of the following? *If so, please check the appropriate space.*

- Case Progress
- Plea or Sentence Agreements or Recommendations
- Restitution
- Other (please specify) _____

3. If you do not wish to be notified, nor to personally consult with the Prosecuting Attorney or other appropriate person, you may still participate in the process by providing a written VICTIM'S STATEMENT. Include an explanation of any physical, psychological or emotional harm suffered by you, the extent of any economic loss or property damage suffered, your opinion as for the need for restitution and your recommendation for an appropriate sentence. These comments can be mailed to the Prosecuting Attorney's Office with a copy enclosed for the Probation/Parole Agent.

To insure that your requests are honored, please provide the following information:

- 1. Name: _____ Signature: _____
- 2. Home Address: _____ Work address: _____
- 3. Home Telephone No. _____ Work Phone No. _____

PLEASE KEEP US INFORMED OF ANY CHANGES WITH REGARD TO YOUR ADDRESS OR TELEPHONE NUMBER.