

CRIME VICTIMS' RIGHTS ACT REQUEST FORM

As 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 documentation immediately to the following address.

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

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

- Preliminary Examination
- Circuit Court Arraignment (usually in writing)
- Final Conference
- Defendant's Guilty Plea
- Trial (if not subpoenaed as a witness)
- Sentencing

Please *check the appropriate space*, if you wish to talk with the Prosecuting Attorney or other appropriate person regarding any of the following.

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

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 at the above address.

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

Name: _____ Signature: _____
Home Address: _____ Work Address: _____
Home Phone: _____ Cell Phone: _____ Work Phone: _____

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