

VICTIMS' RIGHTS NOTIFICATION RESPONSE FORM

State of Ohio vs: Daniel Campbell

Case No: CRI 2009-0445

Name _____

Address _____

City _____ State _____ Zip Code _____

Telephone: Home (____) _____ Best time to reach you?

Work (____) _____ if we may contact you **yes / no** circle one



Would you like to receive your court notices by email?

If so, please provide your email address: _____

Please check one of the following:

_____ I would like to exercise my rights as defined under Ohio's Crime Victims' Bill of Rights, therefore, I have voluntarily completed the above information and have returned it to the Huron County Prosecutor's Office in compliance with my responsibility of the law.

_____ I voluntarily decline my right to exercise my rights as defined under Ohio's Victims' Bill of rights. Therefore, I am not interested in receiving any notifications regarding this case.

Victim/Parent/Guardian
SIGNATURE

Date

Please return this form to:

Eva D. Gorby, Director
Huron Co. Prosecutor's Office
12 E. Main St. 4th Floor
Norwalk, Ohio 44857

Or email:

Egorby-hcva@neo.rr.com

REMINDER: YOU MUST KEEP US NOTIFIED IF YOUR ADDRESS OR PHONE NUMBER CHANGES.