



**John S. Foote, District Attorney for Clackamas County**

Victim Assistance Program

708 Main Street, Oregon City, Oregon 97045

Office: 503-655-8616 Fax: 503-650-3598 Email: [victimassistance@co.clackamas.or.us](mailto:victimassistance@co.clackamas.or.us)

## **Victim Rights Request Form**

As a victim of a crime in Oregon, you have legal rights. Please read the enclosed brochure and check the box next to the rights you are requesting. It is important for you to return this form to the Clackamas County District Attorney's Office – VICTIM ASSISTANCE PROGRAM (address above). If the office does not receive your Victim's Right's Request Form, it will be concluded that as the victim of this crime, you are waiving these listed rights.

You may request:

- Personal information remain private and withheld from defendant. [ORS 135.970(1)]
- Notification in advance of any critical stages of the proceedings held in open court in which the defendant will be present. [Oregon Const. Art.1, Sec. 42(1)(A)]
- The right to be present in the courtroom during trial. [Oregon Const. Art.1, Sec. 42(1)(A)]
- To be notified in advance & allowed to make a Victim Impact Statement at any pretrial release hearings, pleas and sentencing. [ORS 144.120(7), 144.260(3) & ORS 137.013]
- Consultation with the prosecutor in plea negotiations involving a violent felony crime. [Oregon Const. Art.1, Sec. 42(1)(f)], [ORS147.512(2)(a)]
- Ongoing involvement in any court actions that occur after a defendant's conviction, such as probation revocation hearings and post-conviction matters. [ORS 138.627, ORS 137.545(11)(a)]
- In a DUI vehicular crash, information about the case that is given to the defendant is also shared with the victim. [ORS 135.857]
- No courtroom media coverage of sex offenses proceedings by use of recording devices. [UTCR 3.180]
- HIV and other communicable disease testing of the defendant if the transmission of body fluids occurred during the commission of the crime. [ORS 135.139]

Name (print) \_\_\_\_\_ Phone Number \_\_\_\_\_

Address (print) \_\_\_\_\_

**Name of Defendant:**

**DA Case#:**

**CR#**