
Name

Address

City, State, Zip

Phone

Email

I am the Victim of the crime being considered for expungement
 Attorney for the victim and my Utah Bar number is _____
 Prosecuting Attorney and my Utah Bar number is _____

In the District Justice Court of Utah

_____ Judicial District _____ County

Court Address _____

In Re Petition to Expunge the Records of _____ Petitioner	<input type="checkbox"/> Victim's Statement
	<input type="checkbox"/> Prosecutor's Statement
	_____ Case Number
	_____ Judge

Attach additional pages as needed to complete paragraphs that don't have enough space. Write the paragraph number on the additional page.

(1) I object do not object to expunging the petitioner's records because:

(Choose (2) if you have a recommendation and then choose the box(es) that describe your recommendation.)

(2) I recommend:

The court expunge the records.

The court not expunge the records.

Other recommendation:

I declare under criminal penalty under the law of Utah that everything stated in this document is true.

Signed at _____ (city, and state or country).

Date

Signature ► _____

Printed Name _____

Certificate of Service

I certify that I filed with the court and served a copy of this Statement by the Victim Prosecutor on the following people.

Person's Name	Method of Service	Served at this Address	Served on this Date
(Petitioner)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Prosecutor)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Victim)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

Sign here ► _____

Date _____

Typed or Printed Name _____