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

By and through my attorney, (Attorney, check here if you are appearing for your client.)

I say as follows:

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

Certificate of Service

I certify that I 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"/> Fax (Person agreed to service by fax.) <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"/> Fax (Person agreed to service by fax.) <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"/> Fax (Person agreed to service by fax.) <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.)		
(Clerk of Court)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Electronic File		

Sign here ► _____

Date _____

Typed or Printed Name _____