

## Victim's Advocacy Information

Court Case #: \_\_\_\_\_

Police Case #: \_\_\_\_\_

State Attorney: \_\_\_\_\_

Phone: \_\_\_\_\_

Advocate: \_\_\_\_\_

Phone: \_\_\_\_\_

Judge: \_\_\_\_\_

Phone: \_\_\_\_\_

MADD: \_\_\_\_\_

Phone: \_\_\_\_\_

Police Agency: \_\_\_\_\_

Phone: \_\_\_\_\_

Clerk of the Circuit Court: \_\_\_\_\_

Phone: \_\_\_\_\_

Defendant's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ B.A.C.: \_\_\_\_\_

Original Charges: \_\_\_\_\_

Plea/Convicted Charges: \_\_\_\_\_

Sentence: \_\_\_\_\_

Prior DUI Arrest: \_\_\_\_\_

Court Dates/Procedures: \_\_\_\_\_