

## **RIGHTS REQUESTED BY VICTIM**

To assert your rights as a crime victim pursuant to the Michigan Crime Victim's Rights Act, you must complete this form and submit it to the Victim's Rights Unit at the address below. If you have any questions you may call us at (231) 256-9872 or e-mail us at [victimservices@co.leelanau.mi.us](mailto:victimservices@co.leelanau.mi.us).

Please check the box for each right you wish to exercise.

I request restitution.

I request notice of the defendant's scheduled court hearings.

I want to consult with the Prosecuting Attorney regarding the possible disposition of this case.

I will present an oral and/or written statement at the defendant's sentencing hearing.

I want notice of the final disposition of this case.

I request notice of any appeal.

Fill out the following information so that we may fulfill your request. Should this information change, please let us know so that we may continue to reach you.

Victim's Name:

Mailing Address:

Telephone:

E-mail:

**Leelanau County Prosecutor's Office  
Victim's Rights Unit  
8527 E. Government Center Drive, Suite 202  
Suttons Bay, MI 49682  
(231) 256-9872**