

My Name _____
Address _____
City, State, Zip _____
Phone _____
E-mail _____

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 _____

KANE COUNTY JUSTICE COURT

State of Utah

76 North Main Street, Kanab, UT 84741

(435) 644-2351 – telephone; (435) 644-2052 – fax

jckane@utcourts.gov

In Re Petition to Expunge the Records of

Petitioner

Victim's Statement

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.

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

I say as follows:

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.)		
(Clerk of Court)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Electronic File		

_____ Sign here ► _____

Date _____

 Typed or Printed Name _____