



OFFICE OF THE PROSECUTING ATTORNEY  
VICTIM/WITNESS SERVICES DIVISION  
411 Jules, Buchanan County Courthouse, St. Joseph, Missouri 64501

## – WITNESS NOTIFICATION REQUEST –

State of Missouri vs. \_\_\_\_\_

As a crime witness you have, upon request, several rights resulting from the passage of the Missouri Constitutional Amendment for Crime Victims in 1992. If you would like to be informed of court dates related to the above-named defendant, please fill out and return this form.

Name \_\_\_\_\_ Home Ph.# \_\_\_\_\_ Work Ph.# \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Please notify this office of any address or phone number changes to ensure timely notification.

Click or check the item below to indicate the level of notification/attendance that you prefer. **If you change your mind about being present or cannot be present, please contact our office immediately.**

- I would like to be **NOTIFIED BUT DO NOT WISH TO APPEAR** at bond hearings, preliminary hearing, pre-trial hearing, plea hearings, sentencing/disposition hearings, trial, probation revocation hearings and/or post conviction release motions. (Please be aware that your presence may be *required* at any trial or hearing in this matter.)
- I would like to be **NOTIFIED AND PRESENT** at bond hearings, preliminary hearing, pre-trial hearing, plea hearings, sentencing/disposition hearings, trial, probation revocation hearings and/or post conviction release motions.
- I do not wish to be notified or present.

\_\_\_\_\_  
Signature  
(Type your name if submitting this form via e-mail)

\_\_\_\_\_  
Date

**PLEASE RETURN COMPLETED FORM TO THE  
PROSECUTING ATTORNEY'S OFFICE PROMPTLY.**

CLEAR FORM

PRINT FORM

SUBMIT FORM