
Name

Address

City, State, Zip

Phone

Check your email. You will receive information and documents at this email address.

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

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.

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

(Choose (2) if you have a recommendation and then choose the box(es) that describe your recommendation.)

2. I recommend:

The court expunge the records.

The court not expunge the records.

Other recommendation:

I declare under criminal penalty under the law of Utah that everything stated in this document is true.

Signed at _____ (city, and state or country).

Date

Signature ► _____

Printed Name _____

Certificate of Service

I certify that I filed with the court and am serving a copy of this Statement by the Victim Prosecutor on the following people.

Person's Name	Service Method	Service Address	Service Date
(Petitioner)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> 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"/> E-filed <input type="checkbox"/> 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"/> E-filed <input type="checkbox"/> 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.)		

Sign here ►

Date _____

Typed or Printed Name _____