

# KNOW YOUR RIGHTS AS A VICTIM OR WITNESS

Please mail this completed form to:

Illinois Prisoner Review Board  
Chairman  
319 East Madison, Suite A  
Springfield, IL 62701

**Status:**      **Victim**              **Witness**              **Victim Next of Kin**              **Guardian of Victim**              **Concerned Citizen**

Pursuant to the Illinois Bill of Rights for Victims and Witnesses, please check the boxes for the services that you request be provided to you. While filing this survey with the Prisoner Review Board, please keep in mind that your responses and requests will be kept confidential.

- Please notify me of any change in the custody status of the offender listed below (i.e. release, escape or death)
- Please provide me with a current photograph of the offender listed below upon their release from custody.
- Please consider the additional conditions be placed on the offender listed below:
  - No Contact with the following person(s)  
(Letter of Explanation Attached)
  - Other Conditions (Letter of Explanation Attached)

*You may request special conditions be placed on an offender while the offender is on parole. Attach a letter describing the conditions you would like imposed along with the reason for your request. (For example: I don't wish the offender to have contact with me while he is on parole because I testified against him/her, s/he threatened me, I was the victim and am scared, etc.) Also, please include a copy of any Order of Protections or any relevant report.*

Name and Address of Person to be Notified:


Telephone

Home:

Work:

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## **PLEASE NOTIFY THE PRB OF CHANGES IN ADDRESS OR TELEPHONE NUMBER**

### **OFFENDER INFORMATION:**

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

IDOC Number: \_\_\_\_\_

County of Crime: \_\_\_\_\_

Current Facility: \_\_\_\_\_

Provide as much information as you can. An inmate's full name and case number or date of birth is usually adequate to identify the individual. Inmate locator information is also available on the Internet at [www.idoc.state.il.us](http://www.idoc.state.il.us). For questions about this form, contact the Prisoner Review Board Victim Notification Unit at (217) 782-7273 or toll-free at 1-800-801-9110.