**Department of**

DIVISION NAME

Office Name

1234 Main Street West

Juneau, Alaska 99802-0122

Main: XXX.XXX.XXXX

Toll free: XXX.XXX.XXXX

Fax: XXX.XXX.XXXX

[Month, Day, Year]

[First and Last Name]

[Address]

[City, State Zip]

Re: Pre-Sentence Investigation & Sentencing

Offender Name: Enter offender name.

Case Number: Enter case number.

Offender #: Enter offender number.

Dear: Enter victim name.,

This letter is to advise you as the victim or legal representative of the victim of the crime committed on Click here to enter a date. that the defendant(s) Enter defendant(s) name(s). is / are currently scheduled to be sentenced for their crime(s) on:

Enter a date.

Enter a time.

Enter a location.

By Judge Enter judge name.

We have been ordered by the Court to prepare a pre-sentence report. You have the right under Alaska State Law to present a written statement to be included in the pre-sentence report. You also have a right to appear in person at sentencing to provide information to the Court.

Your written and / or verbal statements to the Court may contain any relevant information including:

1. An explanation of the nature and extent of physical, psychological, emotional harm or trauma you suffered as a result of the defendant's actions;
2. An explanation of the extent of economic loss and / or property damage incurred as a result of the defendant's actions;
3. Any documentation supporting your request for restitution should include whether you have applied for or have received compensation for loss or damages; and
4. Any recommendations you might have regarding the defendant's sentence.

You may exercise this right at any time, however if you desire to have your written statement included in the pre-sentence report we request you return it to us at Enter address. by Click here to enter a date..

**Because your statement will be available to the defendant and his / her defense attorney Do Not write your address on the written statement itself.**

As the victim of a crime in Alaska, you have several rights, some of which include:

1. Notification when the offender is released to the community or escapes from custody; and
2. A photograph of the offender when he / she is released from incarceration.

You have the right to decide if you want to participate in the victim notification program. Should you choose to participate, please complete the attached form and return it to:

Enter return address.

Remember, it is your responsibility to advise the Department of Corrections when your mailing address changes. Should you later change your mind about participating in the victim notification program, you will need to provide **written** notification to stop or change your previous request. In addition, if you send a letter, you should include the name of the offender(s) and the case number as noted above. We recommend that you keep this page in your possession in case you need to contact the Department of Corrections for any reason.

If you have any further questions, please feel free to contact me.

Sincerely,

Enter PO name.

Probation Officer

Sincerely,

[First and Last Name]

[Title]

[Second page]