

# Victim and Family Member Report Form

This form includes:

- sections to help you describe the effect of the crime on you and your views about the Supervision Order being made by the Court
- a Statutory Declaration, which makes the Victim or Family Member Report a legal document.

## Section 1

**Personal information** (this section must be completed)

Your name:

Name of Supervised Person:

I am completing this report as a:

- victim of crime
- family member of a Supervised Person
- victim of crime and family member of a Supervised Person.

## Section 2

### The effect of the crime on you

Use this section to describe the effect of the crime on you.

You may refer to:

- the Supervised Person's past or current conduct towards you
- the Supervised Person's past or current conduct towards other people (e.g. members of the public, family members).

*Please attach additional pages if required.*





## Section 5

### Statutory Declaration (this section must be completed)

I do solemnly and sincerely declare that this declaration is true and correct, and I make it in the belief that a person who makes a false declaration is liable to the penalties of perjury.

Declared at ..... in the State of Victoria,  
on this ..... day of ..... 20 .....

.....  
Signature of person making this declaration  
[to be signed in front of an authorised witness]

Before me,

.....  
Signature of Authorised Witness

[The authorised witness must print or stamp his or her name, address and title under section 107A of the *Evidence (Miscellaneous Provisions) Act 1958* (as of 1 January 2010), (previously *Evidence Act 1958*), (e.g. Justice of the Peace, Pharmacist, Police Officer, Lawyer, Court Registrar, Bank Manager, Medical Practitioner, Dentist)]

Send your signed, completed form to:

**Office of Public Prosecutions**  
**PO Box 13085**  
**Melbourne VIC 8010**