



OFFICE OF THE SOLICITOR GENERAL
BARROW COUNTY
KYLE WILLIAM SHARRY
SOLICITOR GENERAL

Date: _____

Victim Name: _____

Defendant Name: _____

Case #: _____

To Whom it May Concern:

The Barrow County Victim Witness Program offers crime victims emotional support during the aftermath of a crime and guides individuals through the maze of the criminal justice system. For your information, we have included information on the procedural steps in processing a criminal case. Contact information for the investigating agency may be found via Internet search (or upon request from the Barrow County Solicitor's Office). The Barrow County Detention Center can be contacted at (770)307-3090.

In the above-referenced case, you are listed as the victim and have the right to submit a Victim Impact Statement either orally or in writing. You may also be entitled to Crime Victim Compensation. A Victim Impact Statement allows you to express how a crime has affected you and your family and will also help the judge and prosecutor understand your concerns about the crime. Crime Victim Compensation awards victims of a violent crime up to \$25,000 for medical, funeral, counseling expenses and lost wages. If you are eligible, then you must apply for crime victim compensation within one year from the date of the crime. Please visit www.cjcc.ga.gov for more information.

You also have a right to be notified of all judicial proceedings and the right to request notification of any plea negotiations. Please fill out the attached request for notification form and let us know what (if any) proceedings you would like to receive notice of. To ensure your rights, it is your responsibility to keep the Solicitor General's Office informed of your current address and telephone number.

You have a right to be notified of the Crime Victims Bill of Rights pursuant to O.C.G.A. §17-17-1. A list of those rights is enclosed in this packet.

Finally, you have a right to the following: 1) To refuse to submit to an interview by the accused, accused's attorney, or agent of the accused; 2) To have the court order that the defense attorney not disclose your contact information to the accused. Please fill out the enclosed forms and return if you wish to avail yourselves of either of these rights.

Please complete the enclosed documents and return them to our office. If you are completing the Victim Impact Statement, please return it as well. Once you completed the Crime Victim Compensation Program application, send it and the enclosed copy of the incident report to the addressed on the 1st page of the application. They will contact you directly once they receive it.

Respectfully,
Kyle W. Sharry
Solicitor-General, Barrow County

The Victim Witness Assistance Program does not discriminate against individuals or groups on the basis of race, color, religion, sex (including pregnancy, gender identity, and sexual orientation), national origin, age, disability or genetic information. If you believe you have been the target of discrimination, you have the right to file a civil rights complaint. Information on how to file a civil rights complaint can be found on the Office of Justice Programs website. <http://www.ojp.gov/about/ocr/complaint.htm>

Victim: _____
Defendant: _____

Case Number: _____

Victim Notification of Hearings

Under the Victim's Bill of Rights you may request to be notified of any court hearings involving the defendant in your case.

I hereby request that I be notified by the Solicitor's Office of any scheduled court proceedings involving the accused and notice of any changes to that schedule.

Date Signature of Victim

Please PRINT your contact information if you are requesting notification:

Address _____ Apt# _____

City _____ State _____ Zip Code _____

Telephone Numbers: Home _____ Work _____

Cell _____ Other _____

Email _____

Date of Birth _____

Emergency Contact:

Name: _____ Telephone# _____

I prefer to be contacted by _____Mail _____Telephone _____Email (check one)

OR

I **do not** request that I be notified by the Solicitor's Office of any scheduled court proceedings involving the accused and notice of any changes to that schedule.

Date Signature of Victim

Restitution/Victim Compensation

If you sustained injuries or had property damage due to the crime, you may qualify for restitution and/or victim compensation if you meet certain requirements. Contact your advocate to discuss these options.

Please email or mail this form to the attention of your advocate. Thank you.

Attn: **Baylee Moon**

Barrow County Solicitor-General's Office

652 Barrow Park Drive,

Suit J,

Winder, GA 30680

Telephone # (770)867-1916

Victim Witness Advocate Email: bmoon@barrowga.org

Under O.C.G.A 17-17-8.1, as the victim of a crime you have the right to refuse or agree to be interviewed by the accused in this case, the accused's attorney, or anyone who represents or contacts you on behalf of the accused.

If you agree to be interviewed, you may set conditions for the interview such as the time, date, and location of the interview, who may be present (including a representative of the Solicitor General's office), any security arrangements for the interview, and whether or not the interview may be recorded. You also have the right to terminate the interview at any time or to refuse to answer any question during the interview.

If you have any questions regarding these rights, you may contact the Solicitor General's office at (770)867-1916.

If you choose to exercise your right to have no contact, directly or indirectly, with the accused's attorney or anyone else associated with the accused, please fill out the form below and return to the Victim/Witness Assistance Office as soon as possible.

I DO NOT WISH TO BE CONTACTED BY THE ACCUSED, THE ACCUSED'S ATTORNEY OR STAFF, OR ANYONE REPRESENTING THE ACCUSED IN THE ABOVE NAMED CASE.

ACCUSED(S): _____ CASE# _____

VICTIM
NAME: _____

VICTIM
SIGNATURE: _____ DATE: _____

Under O.C.G.A 17-17-10, as the victim of a crime you have the right to have your contact information kept confidential from the defendant. If you would like the court to order that your contact information not be provided to the defendant, please fill out the form below.

I WOULD LIKE MY CONTACT INFORMATION KEPT CONFIDENTIAL FROM THE DEFENDANT.

ACCUSED(S): _____ CASE# _____

VICTIM
NAME: _____

VICTIM
SIGNATURE: _____ DATE: _____

GEORGIA CRIME VICTIM IMPACT STATEMENT

****To be completed by victim or for victim by a family member or attorney****

1. What is your relationship to the defendant? _____ Length of relationship: _____
2. Prior to the incident did you live with the defendant? ____ If yes, is the defendant back in the residence?

3. Is there a TPO against the defendant? _____
4. Is there a history of violence? _____ If yes, tell the kind of injury, the extent of the injury, how long it has been happening, and how many times it has occurred. _____

5. Were you physically injured because of this crime? _____ If yes, tell the kind of injury and the extent of the injury. Tell how serious and how long the injury lasted or will last. _____

6. Was there property damage because of this crime? _____ If yes, please describe type of property and extent of damage. _____

7. Was medical treatment needed for your injury? _____ If yes, tell the treatment, where you were treated, when you were treated, and how long the treatment was or will be needed. _____

8. Was the defendant under the influence of drugs/alcohol during the incident? _____ If yes, tell the kind of drug/alcohol and how often the defendant uses drugs/alcohol. _____

9. What sentence do you feel is appropriate for the Defendant to receive in this case?

10. Would you like any of the below to be part of the sentence if the defendant is found guilty or pleads guilty? Please circle all that apply: No Contact, No Violent Contact, Mental Health Evaluation, Domestic Violence Intervention Counseling, Alcohol and Drug Evaluation, Jail, Probation, Other:

11. Have you had any expense or economic loss because of this crime? ____ If yes, use the columns below to list them. For court use and restitution purposes please attach copies of receipts and copies of bills. We are unable to seek restitution for lost wages.

| <u>KIND OF EXPENSE</u> | <u>AMOUNT OF EXPENSE</u> | <u>AMOUNT PAID BY INSURANCE</u> |
|---|--------------------------|---------------------------------|
| Medical/Hospital Treatment, Counseling, Victim or Family, Funeral/Burial, Other: | \$ _____ | \$ _____ |
| | _____ | _____ |
| | _____ | _____ |

| <u>KIND OF LOSS</u> | <u>VALUE OF LOSS</u> | <u>AMOUNT PAID BY INSURANCE</u> |
|--|----------------------|---------------------------------|
| Property Stolen, Damaged or Destroyed (Place 'R' after recovered stolen items and do not list value in center column.) | \$ _____ | \$ _____ |
| | _____ | _____ |
| | _____ | _____ |

This Statement is signed and affirmed as true under the penalties of perjury.

Signature _____ Date _____

Our System of Justice

VICTIM-WITNESS ASSISTANCE PROGRAM OFFICE OF THE SOLICITOR GENERAL BARROW COUNTY

Usually for the accused to be arrested, a warrant must be issued. The Magistrate court issues warrants. Either misdemeanor or felony warrants can be issued. A misdemeanor is a crime punishable by twelve months or less in a local jail facility. A felony is a crime punishable by one year or more in a state or local facility.

BAIL

After the arrest, the accused is offered an opportunity to make bail (or bond) set by the Magistrate Judge. By paying the specified amount, the accused is allowed to be free from jail to await further legal proceedings. The justification for bail is to assure the accused appears in court and also serves to maintain the presumption of innocence for the accused.

ACCUSATIONS

Before a misdemeanor case can be tried, an accusation must be filed. This charging document names the accused and specifies the charge against him/her.

ARRAINGMENT

After the accusation has been filed in the Clerk's Office charging the accused, he/she must go to an arraignment. This is where the defendant is formally notified of the charges against him/her. At this point the defendant enters his/her plea to the charge. Although there are numerous pleas, the most common pleas are guilty, not guilty, or nolo contendere.

GUILTY PLEA

The defendant may decide to enter a guilty plea. If he/she pleads guilty, there is no trial. He/She may plea without a recommendation as to sentence or with a recommendation. Your thoughts and feelings to an appropriate sentence are very important to the Solicitor's Office. Please complete the victim impact statement so we will have your input and restitution figures. You have a right to be heard by the judge before sentencing. Please let us know if you want to do this. The judge imposes the sentence in all cases.

SUBPOENA

When a person is required to testify in court, he or she will be notified by a subpoena which is a legal notification issued by the Clerk of Court. The subpoena will specify the court date, time and place of hearings which the individual is required to attend.

TRIAL

The purpose of the trial is to determine the facts in the case. The trial is an adversary process wherein the State is represented by the Solicitor and the accused is represented by the Defense Attorney. The prosecution presents evidence first. When the prosecutor concludes presentation of evidence, then the defense presents its evidence. Each side has the opportunity to question the other's witnesses and to examine the other's evidence.

A trial is conducted in court and is open to the public. The trial is conducted before a judge and jury. The jury is selected prior to the trial by the prosecutor and the defense attorney. If the jury's verdict is "not guilty" then the defendant is allowed to go free. However, if the defendant is found "guilty" the judge will impose punishment.

SENTENCING

Sentencing will usually take place immediately upon completion of the trial. The defendant is usually sentenced to confinement or probation, or a combination of both. The trial judge is responsible for imposing the sentence. The judge will give you the opportunity to be heard before he imposes sentence on the defendant.

PROBATION

If the defendant is sentenced to serve a specified amount of time on probation, he/she is assigned to a particular probation officer. While serving probation, he/she must report periodically to the probation officer. He/She must also keep the probation officer informed of his residence, place of employment, and any travel arrangements that require him to be out of town. The telephone number to the SEC Probation Office is 706-309-7729.

If you have questions about the case in which you are involved, please call the Barrow County Solicitor's Office at 770-867-1916.

GEORGIA CRIME VICTIM'S BILL OF RIGHTS

O.C.G.A. 17-17-1

VICTIMS HAVE THE RIGHT:

- To be treated fairly and with dignity by all criminal justice agencies involved in the case ☐
- To proceedings free from unreasonable delay
- To be notified of the availability of Victims Compensation, which is available under the Georgia Crime Victims Compensation Program at (800) 547-0060 or www.cjcc.ga.gov
- To be notified of the Georgia Crime Victims Bill of Rights
- To be notified of community based victim service programs
- To reasonable, accurate and timely notice of the following:
 - An arrest warrant being issued for the accused
 - The accused's arrest
 - The condition that the accused is prohibited from contacting the victim
 - The accused's release or escape from custody
 - Any court proceeding where the release of the accused will be considered
 - Any scheduled court proceedings or any changes to such proceedings, including restitution hearings
 - The accused's release on an electronic release and/or monitoring program
- To be present at all criminal proceedings in which the accused has the right to be present
- To NOT be excluded from any scheduled court proceedings, except as provided in O.C.G.A. 17-17-1 or otherwise provided by law
- To a waiting area, during judicial proceedings, that is separate from the accused and his or her relatives, friends and witnesses
- To be reasonably heard at any scheduled court proceedings involving the release, plea or sentencing of the accused
- To complete a Victim Impact Statement and have it presented to the court prior to the trial or plea of the accused (O.C.G.A. 17-10-1.1)
- To restitution as provided by law
- To refuse to submit to an interview by the accused, accused's attorney or agent of the accused
- To a requirement by court that defense counsel not disclose victim information to the accused (17-17-10)
- To be notified by the Department of Behavioral Health and Developmental Disabilities (DBHDD) if the accused is committed to the DBHDD for an evaluation, as mentally incompetent to stand trial or as not guilty by reason of insanity at the time of the crime. Upon the written request of the victim, at least ten days before the release or discharge, the department shall mail notice to the victim of the accused release from such facility.
- To request not to receive any form of written, text, or electronic communication from an inmate who was convicted of a criminal offense against the victim
- To be advised on how to file a complaint with the Judicial Qualification Commission if a judge denies the victim's right to be heard.

VICTIM'S ROLE:

Victims must provide to the law enforcement agency, prosecuting attorney and custodial authority a current address and telephone number to be notified of specific actions in a criminal case against the accused.

1. It is the right and the responsibility of the victim who desires notification under this chapter or any other notification statute to keep the following informed of the victims' current address and phone number:

- a. The Investigating Law Enforcement Agency
- b. The Prosecuting Attorney
- c. The Department of Corrections (if the accused is in the custody of the state) or any county correctional facility
- d. The State Board of Pardons and Paroles

2. The victim has the option to waive any of the information or notification or other obligations specified under the crime bill of rights.

3. A victim has the right to designate a spouse, adult child, parent, sibling or grandparent to act on behalf of him or her, when the victim is physically unable to personally assume the rights under the law.

4. If the victim has been trafficked for labor or sexual servitude (as defined in code section 16-5-46), they have the right to be notified of the availability of compensation through the federal government pursuant to 22 U.S.C. Section 7105.

DEPARTMENT OF CORRECTIONS' ROLE:

1. Whenever possible, the custodial authority shall give prompt notification to a victim of the accused's release from custody of the state or any county correctional facility.

2. Whenever practical, the custodial authority shall provide notification to a victim of an escape by the accused and his or her subsequent rearrest.

3. The Department of Corrections shall provide, to the prosecuting attorneys, the procedures a victim shall follow in order to block inmate mail. If a victim submits a request to block inmate mail, the Department of Corrections shall notify the custodial authority and notify the inmate of sanctions if direct or third party contact of the victim is made.

STATE BOARD OF PARDONS AND PAROLES' ROLE:

1. If a victim has expressed objection to the release of the accused or has expressed a desire to be notified, they must provide the State Board of Pardons and Paroles with a current address and telephone number.

2. Upon notification by the victim to the State Board of Pardons and Paroles, of their desire to be notified, the State Board of Pardons and Paroles shall give 20 days advance notification to a victim, whenever it considers making a final decision to grant parole or any other manner of executive clemency action to release a defendant for a period exceeding 60 days.

3. The board shall provide the victim with an opportunity to file a written objection in any parole proceedings involving the accused.