



Legal Services Department
City Prosecutor's Office

POST-CONVICTION NOTIFICATION REQUEST

As the victim in this case, you previously requested to assert your rights for notification. At this time, the defendant has been sentenced and if you wish to be notified of any further activity (post-conviction proceedings), please read the instructions and email/return the completed form to the Goodyear Prosecutor's Office gycityprosecutor@goodyearaz.gov

As a crime victim, you have the right to be notified of any post-conviction proceedings and the outcome of those proceedings, which include:

- Post-conviction review and appellate proceedings,
- Post-conviction release proceedings,
- Probation modification proceedings that impact you,
- Probation revocation or termination proceedings,
- Release and escapes.

If you wish to receive such notification, you will need to complete the attached form and email/return to the Goodyear Prosecutor's Office at gycityprosecutor@goodyearaz.gov in a timely manner. Please complete Section II of this page. You may want to keep a copy for your personal records.

1. COMPLETE SECTION I AND II:

Only the victim or a lawful representative (a person designated by the victim or appointed by the court) can receive notification.

2. SUBMIT THE FORM TO APPROPRIATE AGENCY:

It is your responsibility to submit the completed form/s to our agency. You may submit this completed form by email to the gycityprosecutor@goodyearaz.gov or by mail to: Goodyear City Prosecutor's Office, 14455 W. Van Buren St. Ste, B101, Goodyear, AZ. 85338.

3. IMPORTANT REMINDER:

It is your responsibility to keep your physical address, email address and telephone information current. Should you have a change of address or telephone number, you must contact each agency and provide your new contact information. ***If you fail to keep the agency informed of your current information, you have waived your right to future notification.***

Should you have questions regarding this initial notice, please contact the City of Goodyear Prosecutor's Office at (623) 882-7201.

POST-CONVICTION NOTIFICATION REQUEST FORM

SECTION I

Defendant Name: _____
Cause No.: _____
Charge: _____
Court: Goodyear Municipal Court
Sentencing Date: _____
Judge: _____
Victim Name: _____

SECTION II

CONFIDENTIAL INFORMATION

Only one person can receive notification. Please check only one that applies:

I am requesting the information be sent to me.

I am requesting the information be sent to the lawful representative I have designated below:

If lawful representative, please indicate relationship to victim: _____

First Name **Middle Initial** **Last Name**

Mailing Address: _____ **Apt. No.** _____

City: _____ **State:** _____ **Zip Code:** _____

Telephone: Home Phone: _____ Message Phone: _____

By initialing and submitting this form by email, I am certifying that I am the victim or lawful representative designated to receive this Post-Conviction Notification.

INITIALS DATE

Email to: gycityprosecutor@goodyearaz.gov **Or** Mail to: Goodyear City Prosecutor's Office
14455 W. Van Buren St. Ste B 101
Goodyear, AZ 85338