

SOMERSET COUNTY PROSECUTOR'S OFFICE
Office of Victim Witness Advocacy
PO Box 3000
40 North Bridge Street
Somerville, New Jersey 08876

PLEA NEGOTIATION CONSULTATION FORM

Victim Name: _____

STATE VS. _____

PROSECUTOR FILE NUMBER: _____

INDICTMENT NUMBER: _____

DATE: _____

As a victim of crime, you have the right to consult with a representative of the Somerset County Prosecutor's Office prior to the conclusion of any plea negotiations.

Please be aware that your input is important and will be considered. However the Prosecutor's Office retains the final legal authority to enter into a negotiated plea agreement.

If you have any questions or need assistance, please contact the Office of Victim Witness Advocacy at (908) 575-3359.

Se habla Español en esta oficina, si necesitas alguna información por favor llame a Ileana (908) 575-3359.

Please complete this form and return it to the above address within 10 business days or fax it to (908) 575-3962 or email it to somersetvw@co.somerset.nj.us

PLEASE CHECK ONE:

() I DO NOT want to consult with the Somerset County Prosecutor's Office prior to the conclusion of any plea negotiations.

() I DO want to consult with the Somerset County Prosecutor's Office prior to the conclusion of any plea negotiations.

MY NAME: _____ Signature: _____

MY PHONE NUMBER(S) *REQUIRED * _____

YOU MUST PROVIDE A PHONE NUMBER FOR US TO CONTACT YOU