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| ***Please provide the following information for each victim/witness.*** |  | **Victim/Witness Data Sheet** |
| **Docket Number**      | **Date Filed**  /  /     | **OTN/LiveScan Number**      | **Allegation Number**      | **Incident Number**      |
| **Juvenile Name** | First      | Middle      | Last      |

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|  | **[ ]  Victim** **[ ]  Witness** | Victim/Witness #     |
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|  | (Name) |  | Age |  | Date of Birth |  |
|  |       |  |
|  | (Home Street Address) |  |
|  |       |  |       |  |
|  | (City, State, & ZIP Code) |  | (Telephone #) |  |

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|  | **[ ]  Victim [ ]  Witness** | Victim/Witness #     |
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|  | (Name) |  | Age |  | Date of Birth |  |
|  |       |  |
|  | (Home Street Address) |  |
|  |       |  |       |  |
|  | (City, State, & ZIP Code) |  | (Telephone #) |  |

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|  | **[ ]  Victim [ ]  Witness** | Victim/Witness #     |
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|  | (Name) |  | Age |  | Date of Birth |  |
|  |       |  |
|  | (Home Street Address) |  |
|  |       |  |       |  |
|  | (City, State, & ZIP Code) |  | (Telephone #) |  |

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|  | **[ ]  Victim [ ]  Witness** | Victim/Witness #     |
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|  | (Name) |  | Age |  | Date of Birth |  |
|  |       |  |
|  | (Home Street Address) |  |
|  |       |  |       |  |
|  | (City, State, & ZIP Code) |  | (Telephone #) |  |

**AOPC J232 – Victim/Witness Data Sheet Addendum – Rev. 12/21 Page**    **of**