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| State of Wisconsin,  vs.        Case No. | | | |  | State of Wisconsin,  vs.        Case No. | | | |
|  |  |  | |  |  | | | |
| YES | NO | I wish to be notified if a petition to discharge from probation, a petition for release to extended supervision, or a petition for sentence adjustment is filed. | |  | YES | NO | I wish to be notified if a petition to discharge from probation, a petition for release to extended supervision, or a petition for sentence adjustment is filed. | |
|  |  |  | |  |  |  |  | |
| Name of Victim | | | Home Phone |  | Name of Victim | | | Home Phone |
| Address of Victim | | | Work Phone |  | Address of Victim | | | Work Phone |
| CR-240, 11/12 Victim Notification Card  §§302.113(9g)(g)3, 302.114(6)(e), 973.09(3m)(c) and 973.195(1r)(e), Wisconsin Statutes  **This form shall not be modified. It may be supplemented with additional material.** | | | |  | CR-240, 11/12 Victim Notification Card  §§302.113(9g)(g)3, 302.114(6)(e),973.09(3m)(c) and 973.195(1r)(e), Wisconsin Statutes  **This form shall not be modified. It may be supplemented with additional material.** | | | |

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| Name of Victim | | | Home Phone |  | Name of Victim | | | | Home Phone |
| Address of Victim | | | Work Phone |  | Address of Victim | | | | Work Phone |
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