



**STATE OF FLORIDA
DEPARTMENT OF CORRECTIONS**

VICTIM INFORMATION AND NOTIFICATION REQUEST

In compliance with 944.605, Florida Statutes

If you are not a victim, access VINE directly at VINELink.com to register for notifications

<p>1. Inmate/Offender Information:</p> <p><i>Please provide as much information as possible to ensure we registered you for the correct inmate. Complete a separate form for each inmate/offender.</i></p>	<p>DC Number: _____ ICOTS Number: _____</p> <p>Inmate/Offender NAME: _____</p> <p>R/S: ___/___ DOB: _____</p> <p>Case Number: _____ County: _____</p> <p>Crime: _____</p>	
<p>2. Your information:</p> <p><i>If you are requesting VINE notifications, please mark the appropriate box.</i></p> <p><i>Note that phone notifications will continue to call you until you enter your 4 digit PIN. Text and email notifications do no repeat.</i></p> <p><i>PIN = Any 4 digits. Will default to last 4 of the phone number if not chosen.</i></p>	<p>Name: _____ DOB: _____</p> <p>Address: _____</p> <p>City/State/Zip: _____</p> <p>Telephone: (Home) XXXXXXXXXXXX VINE Notifications: Phone <input type="checkbox"/> Text <input type="checkbox"/> PIN _____</p> <p>(Work) XXXXXXXXXXXX</p> <p>(Cell) XXXXXXXXXXXX VINE Notifications: Phone <input type="checkbox"/> Text <input type="checkbox"/> PIN _____</p> <p>Email: _____ VINE Registration: Yes <input type="checkbox"/></p> <p>Notification Language, if other than English: Spanish <input type="checkbox"/> Creole <input type="checkbox"/></p>	
<p>3. If you are NOT the actual victim:</p>	<p>Victim's Name: _____</p> <p>Your relationship to the Inmate: _____</p> <p>Your relationship to the Victim: _____</p> <p>Is the victim deceased: Yes <input type="checkbox"/></p> <p>Is the victim a minor: Yes <input type="checkbox"/> Minor's DOB: _____</p>	
<p>4. To better assist you, if you are the victim, survivor or representative for the victim regarding the current case, this is your opportunity to provide us with important information. If you are not the current victim/survivor/representative, please explain why you wish to be notified. (Attach additional pages, if necessary.):</p> <p>_____</p> <p>_____</p>		
<p>Upon completion, submit form to:</p>	<p>Victim.Services@FDC.MyFlorida.com , or</p> <p>Victim Services Florida Department of Corrections 501 South Calhoun Street Tallahassee, FL 32399-2500</p>	
<p><i>For assistance, contact our office toll-free at 1-877-884-2846, Monday through Friday, 8 a.m. to 5 p.m. Eastern Time. You may also call directly to our VINE Service for offender information toll-free at 1-877-846-3435, 24 hours a day, 7 days a week.</i></p>		
<p align="center">Victims are strongly encouraged to notify the Department of any change in contact information. Updating VINE does not update your information with the Department.</p>		