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State of Nebraska, Case # \_\_\_\_\_  
\_\_\_\_\_  
Plaintiff **CONFIDENTIAL**  
v. **VICTIM INFORMATION**  
\_\_\_\_\_  
Defendant For: \_\_\_\_\_  
(Full Name of Victim)  
Home Address \_\_\_\_\_  
(Street)  
\_\_\_\_\_  
(City) (State) (Zip Code)  
Employer: \_\_\_\_\_  
(Name of Employer)  
\_\_\_\_\_  
(Employer's Address) (Occupation)  
Telephone No.: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Driver's Lic-State: \_\_\_\_\_ # \_\_\_\_\_  
Social Security No.: \_\_\_\_\_

Other Information: (May include such items as: Bank Account Numbers, Mother's Maiden Name, Credit Card Account Numbers, Employment I.D. number, etc...)

Instructions: When victim's personal information is reported to the County Court, the complete information shall be provided on Appendix 10. On pleadings or documents to be filed with the court, victim information, where required, should reference Appendix 10: (i.e., "See Appendix 10"). If Appendix 10 is disclosed pursuant to a court order, this information must be kept confidential and may not be disclosed to any other party.

\_\_\_\_\_  
Signature (s) Date \_\_\_\_\_  
\_\_\_\_\_  
Name(s) Street Address/P.O. Box Number  
\_\_\_\_\_  
Bar Number and Firm Name (attorneys only) City/State/ZIP Code  
\_\_\_\_\_  
Phone Email Address

**\*\*\*THIS FORM IS NOT TO BE FILED\*\*\***

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This form is neither approved nor disapproved by any court or judicial tribunal. Use of this form provides no immunity from error.