

SPECIAL DIRECTIVE 19-10

TO: ALL DISTRICT ATTORNEY PERSONNEL

FROM:  JOSEPH P. ESPOSITO  
Chief Deputy District Attorney

SUBJECT: MANDATORY USE OF CDCR 1707 FORMS WHEN A  
DEFENDANT IS COMMITTED TO STATE PRISON

DATE: DECEMBER 17, 2019

The purpose of this Special Directive (SD) is to mandate the use of the California Department of Corrections and Rehabilitation (CDCR) 1707 form whenever a defendant is sentenced to state prison (CDCR), regardless of the type of the commitment offense. The CDCR 1707 form shall be used in every CDCR commitment, even if the commitment offense is not a violent offense as defined in Penal Code § 29905. This Special Directive supersedes SD 09-01 and 11-003.

Victims, next of kin, and threatened witnesses have the ability, through the use of the CDCR 1707 form (Attachment 1 – CDCR 1707 form), to inform CDCR that they request the following:

1. Notification of the status of a defendant regarding release, escape, inmate death, criminal appeal, and parole hearings;
2. Conditions of parole that include no contact, parolee not to live in the same county as the victim, and parolee not to live within 35 miles of the victim; and
3. Restitution to be taken from inmate wage and trust accounts to be collected and distributed to the victim.

The use of the CDCR 1707 form has become significantly more important in light of changes in the law that are currently resulting in early release of defendants sentenced to state prison. Many victims, next of kin, and threatened witnesses are unaware that defendants are subject to release at a much earlier date than they might have expected based upon the original sentence imposed. If victims, next of kin, and threatened witnesses do not register the CDCR 1707 form with the CDCR, the CDCR will not notify them of the release of the defendant, execution of the defendant, the death of the defendant, or the escape of the defendant. The CDCR will also not collect restitution or impose requested parole conditions.

The CDCR 1707 form is now available on-line and can be located by searching the term “CDCR 1707” on the CDCR website. The form can be filled-out by a victim, next of kin, or threatened witness and can be submitted on-line to the CDCR. CDCR will continue to accept hard copies of the form.

This SD amends Legal Policies Manual (LPM) §§ 11.06.05, 12.14.03, 13.08, and 24.02.05, which use identical language, as follows:

**LPM §§ 11.06.05 (Victim Notification), 12.14.03 (Victim Notification), 13.08 (Victim Notification):**

In all cases where defendants are sentenced to the California Department of Corrections and Rehabilitation (CDCR), victims, next of kin, and threatened witnesses shall be sent a CDCR 1707 form so that they are kept apprised of the custody status of the defendant. See LPM § 24.02.05 for a full discussion of the victim notification obligations of District Attorney personnel for defendants sentenced to state prison.

The use of the CDCR 1707 form has become significantly more important in light of changes in the law that are currently resulting in early release of defendants sentenced to state prison. Many victims, next of kin, and threatened witnesses are unaware that defendants are subject to release at a much earlier date than they might have expected based upon the original sentence imposed. If victims, next of kin, and threatened witnesses do not register the CDCR 1707 form with the CDCR, the CDCR will not notify them of the release of the defendant, execution of the defendant, the death of the defendant, or the escape of the defendant. The CDCR will also not collect restitution or impose requested parole conditions.

**LPM § 24.02.05 (Additional Best Practices) in the paragraph beginning with, “Penal Code § 679.03 . . .”, is amended as follows:**

Penal Code § 679.03 places a duty on prosecutors to assist victims, next of kin, and witnesses who were threatened by the defendant after his or her arrest in obtaining information from the California Department of Corrections and Rehabilitation (CDCR). This statutory obligation arises when a defendant is convicted of a violent offense as defined in Penal Code § 29905 and sentenced to state prison. Victims, next of kin, and threatened witnesses are notified that they can use a CDCR 1707 form to request this information from the CDCR. In all cases where defendants are sentenced to the CDCR, victims, next of kin, and threatened witnesses shall be sent the CDCR 1707 form so that they are kept apprised of the custody status of the defendant, regardless of whether the commitment offense is a violent offense pursuant to Penal Code § 29905.

The use of the CDCR 1707 form has become significantly more important in light of changes in the law that are currently resulting in early release of defendants sentenced to state prison. Many victims, next of kin, and threatened witnesses are unaware that defendants are subject to release at a much earlier date than they might have expected based upon the original sentence imposed. If victims, next of kin, and threatened witnesses do not register the CDCR 1707 form with the CDCR, the CDCR will not notify them of the release of the defendant, execution of the defendant, the death of the defendant, or the escape of the defendant. The CDCR will also not collect restitution or impose requested parole conditions.

Deputies present at sentencing shall alert support staff to send a CDCR 1707 form to each victim, next of kin, and threatened witness. Deputies shall notify support staff via the

Disposition Report by checking the “CDCR 1707 Form Required” checkbox. Deputies shall inform the victims, next of kin, and threatened witnesses that they will be receiving an explanatory notice about the CDCR form. Deputies shall indicate in the case notes that such notice was given. If the victims, next of kin, and threatened witnesses cannot be reached, that shall be noted in the case notes. Deputies shall confirm the contact information of the victims, next of kin, and threatened witnesses and alert support staff to make any necessary changes or additions.

Support staff shall send the CDCR 1707 form and the explanatory notice (available in English and Spanish, Attachments 2 and 3, respectively) to the appropriate victims, next of kin, or threatened witnesses within 30 days of sentencing. If no address is listed for a victim, next of kin, or threatened witness, or if the address is listed as “Care of I/O,” the documents shall be sent directly to the investigating officer. If the notice is later returned to the Office, support staff shall staple the envelope to the back of the returned documents and place the materials in the case file under Section H. Copies of the notice shall be kept in the case file.

Victim Service Representatives (VSR) and Restitution Paralegals who meet victims, next of kin, or threatened witnesses in matters where the defendant was sentenced to state prison shall inquire of them whether they completed and submitted the CDCR 1707 form. If the victim, next of kin, or threatened witness wants to register with the CDCR, but has not, or is unsure whether they have submitted the form, it is the responsibility of the VSR and the Restitution Paralegal to assist the victim, next of kin, or threatened witness in filling out and submitting the form. The assistance with the form shall be recorded in databases kept by the Bureau of Victim Services and the Restitution Enhancement Program.

Deputies shall personally notify the victim(s) if the case is dismissed or the defendant is acquitted in the following types of cases: serious and violent felonies; hate crimes; domestic violence; child abuse; elder and dependent adult abuse; stalking; and sexual assault. A victim services representative may notify the victim(s) on behalf of the deputy handling the case, but the deputy must explain the reasons for the dismissal or acquittal to the victim(s). (See Penal Code §§ 1192.7(c) and 667.5(c) for a complete listing of serious and violent felonies.)

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Attachments

**REQUEST FOR VICTIM SERVICES**  
CDCR 1707 (Rev. 06/16)

**Office of Victim and Survivor Rights and Services (OVSRS)**  
P.O. Box 942883, Sacramento, CA 94283-0001  
Toll Free Number: 1-877-256-6877 Fax Number: (916) 445-3737  
Web: <http://www.cdcr.ca.gov/victims> Email: [victimservices@cdcr.ca.gov](mailto:victimservices@cdcr.ca.gov)



**DO NOT MAIL THE COMPLETED FORM TO A PRISON. ALL INFORMATION WILL REMAIN CONFIDENTIAL.**

- Check one:  New/Revised Request for Victim Services  Change of address/phone/e-mail only (complete sections A, D and E)  
 Collection of court ordered restitution only/**no notification services** (complete sections A, D and E)

**SECTION A. APPLICANT INFORMATION (Must be completed.)**

- Check one:  Victim of crime(s) committed by offender  Witness who testified against the offender  
 Family member of **victim**, indicate relationship: \_\_\_\_\_  
(See page 2 – Section A)

Name of Victim(s): \_\_\_\_\_

Person requesting information. \_\_\_\_\_  
(FIRST) (MIDDLE) (LAST)

Physical Address: \_\_\_\_\_  
(STREET) (CITY) (STATE) (ZIP CODE)

Mailing Address (If different): \_\_\_\_\_  
(STREET) (CITY) (STATE) (ZIP CODE)

Telephone: (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ (E-MAIL) \_\_\_\_\_  
(PRIMARY) (SECONDARY)

**NOTE: It is your responsibility to keep the OVSRS informed of any changes to your contact information.**

**SECTION B. NOTIFICATION OF CHANGES TO OFFENDER'S CUSTODY STATUS (Complete if you want to request notification.)**

To be notified of changes to the custody status of an offender, check the box below to indicate your preferred method\* of receiving notices:

1.  Send me notification by electronic mail (e-mail)  
**OR**  
2.  Send me notification by mail  
**Please choose only one (1) mail delivery method:**  
 Regular Mail  Certified Mail (signature required to receive)

*Change in custody status includes release, death, escape, parole suitability hearing (Victims/Victims' family members only), contract, or scheduled execution.*

**NOTE: CDCR is unable to provide notification each time an offender is transferred between institutions.**

\* **NOTE: If the preferred method of notification you selected is not available, regular mail will be used to send the notice.**

**SECTION C. CONDITIONS OF PAROLE/COMMUNITY SUPERVISION (Complete if you want to request special conditions.)**

**Requests for special conditions of parole/community supervision are considered but not guaranteed.**

I request the following conditions when the offender is released on parole/community supervision:

1.  Offender not be allowed to contact me while he/she is on parole/community supervision.  
2.  Offender not be allowed to live in the same county that I live in.

**For direct victims/witnesses only:**

3.  Offender not be allowed to live within 35 miles of my home address (available only for specific types of crimes, see page 2)  
**NOTE: If you would like to provide additional information explaining your request, attach a separate sheet of paper.**

**SECTION D. OFFENDER IDENTIFICATION (Complete as much information as possible.)**

Offender's Full Name (Print): \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
(FIRST) (MIDDLE) (LAST) MO DAY YEAR

CDCR Number (Offender ID): \_\_\_\_\_ Date Sentenced to Prison: \_\_\_\_\_  
MO DAY YEAR

Court Case Number: \_\_\_\_\_ County of Sentencing: \_\_\_\_\_

**SECTION E. APPLICANT SIGNATURE (Sign and date the completed form.)**

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**REQUEST FOR VICTIM SERVICES  
CDCR 1707 (Rev. 06/16)**

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**INSTRUCTIONS**

Read the following instructions carefully to fill out page 1 of the form so that it can be processed correctly. Sections A, D, and E must be completed. Complete all other sections, based on your needs. All information will remain confidential.

Check one of the three boxes at the top of the CDCR 1707 form to indicate if this is a **new/revised request for victim services**, a **change of address/phone/e-mail only**, or **Collection of court ordered restitution only/no notification services**. If you check **change of address/phone/e-mail only**, complete sections A, D, and E. If you check **Collection of court ordered restitution only/no notification services**, complete sections A, D, and E.

**SECTION A. APPLICANT INFORMATION**

This section must be completed. Check the box that most accurately describes your relationship to the crime: **victim**, **witness**, or **family member of victim** and your relationship to the victim. (Example - spouse, child, sibling, grandparent or grandchild)

Please indicate the name(s) of the victim(s) of the crime committed by the offender.

Clearly print your name, physical address, mailing address (*if different*), your primary phone number, secondary phone number, and e-mail address.

**NOTE:** *In order to be entitled to receive notice the requesting party shall keep the department or board informed of his or her current contact information. (Penal Code sections 3043(a)(1), 3058.8(b))*

**SECTION B. NOTIFICATION OF CHANGES TO OFFENDER'S CUSTODY STATUS**

Complete this section if you choose to request notification services. Check the most appropriate box(es).

You have one of two choices to receive notice of an offender's **release, escape, death, parole suitability hearing** (*Victims/Victims' family members only*), **contract, or scheduled execution**.

Check **Box 1** to register to receive notification by electronic mail (e-mail).

Check **Box 2** to register to receive notification by mail. Indicate whether you prefer to receive your notice by regular mail or certified mail. If the preferred method of notification you selected is not available regular mail will be used to send the notice.

**NOTE:** *It is your responsibility to request notification of an offender's criminal appeal. Please call the State of California, Office of the Attorney General, Victim Services Unit 1-877-433-9069.*

**SUBMIT COMPLETED FORM BY MAIL, FAX OR E-MAIL (SCANNED COPY) TO:**

California Department of Corrections and Rehabilitation  
Office of Victim and Survivor Rights and Services  
P.O. Box 942883, Sacramento, CA 94283-0001  
Fax: (916) 445-3737 / E-mail: [victimservices@cdcr.ca.gov](mailto:victimservices@cdcr.ca.gov)

**PRIVACY STATEMENT:**

**AGENCY STATEMENT:** The California Department of Corrections and Rehabilitation (CDCR), CDCR 1707, Request for Victim Services. **OFFICE RESPONSIBLE FOR FORM:** Office of Victim and Survivor Rights and Services, P.O. Box 942883, Sacramento, CA 94283-0001. The telephone number is 1-877-256-6877. **AUTHORITY:** California Constitution Article I, section 28, Penal Code sections 667.5, 679.03, 2085.5, 3003, 3043, 3058.8, 3605, 5065.5.

**PROVIDING INFORMATION:** The information requested is necessary to process your request for victim services and is voluntary. Failure to provide any of the information requested may prevent the OVSRS from processing your request. **All information will remain confidential per Penal Code section 679.03(c):** Your information may be shared with the investigating agency, the district attorney's office that prosecuted the case, and/or the State of California, Office of the Attorney General, Victim Services Unit.

**Penal Code section 5065.5:** When notified that an offender has entered into a contract for the sale of the story of a crime for which the offender was convicted CDCR will notify registered victims and victim's immediate family members.

**SECTION C. CONDITIONS OF PAROLE/COMMUNITY SUPERVISION**

Complete this section if you choose to request special conditions of parole/community supervision. You may check all the conditions that you wish to request or are eligible to receive however such conditions are not guaranteed.

Checking **Box 1** will request that the offender have **no contact** with you while he/she is on parole/community supervision.

Checking **Box 2** will request that the offender **not be allowed to live in the same county** that you live in.

Checking **Box 3** will request that the offender **not be allowed to live within 35 miles of your home address**. *Per Penal Code Section 3003, available only for the following crimes: murder or voluntary manslaughter, mayhem, rape, sodomy by force, oral copulation, lewd acts on a child under 14, any felony punishable by death or imprisonment in the state prison for life, stalking, felony with a great bodily injury enhancement, and continuous sexual abuse of a child.*

**NOTE:** *The third box applies to direct victims and witnesses only. (Penal Code section 3003)*

**SECTION D. OFFENDER IDENTIFICATION**

Provide as much information as you can in this section to ensure that we have the correct offender involved in your case. If you need help completing this section, you may contact the district attorney's office in the county where the trial was held.

**SECTION E. APPLICANT SIGNATURE**

Sign and date the completed form.



**LOS ANGELES COUNTY DISTRICT ATTORNEY'S OFFICE  
BUREAU OF SPECIALIZED PROSECUTIONS  
TARGET CRIMES DIVISION**

JACKIE LACEY • District Attorney  
JOSEPH P. ESPOSITO • Chief Deputy District Attorney  
VICTORIA L. ADAMS • Assistant District Attorney

MARIA RAMIREZ • Director

**NOTICE**

[DATE]

RE: PEOPLE v. XXX  
DATE of BIRTH: XXX COURT CASE NO.: XXX  
DATE SENTENCED TO STATE PRISON: XXX

The defendant in the above-named case has been convicted and sentenced to serve time as an inmate in state prison. You are entitled to receive notification from the California Department of Corrections and Rehabilitation (CDCR) if/when the inmate is scheduled to be released from state prison to parole. **If you wish to receive notification of the inmate's release from state prison to parole, please complete the enclosed CDCR Form 1707.** The form is also available online at the CDCR's website at [http://www.cdcr.ca.gov/victim\\_services/docs/victim\\_form.pdf](http://www.cdcr.ca.gov/victim_services/docs/victim_form.pdf).

**Instructions for completing the form are written on the back of the form.** To ensure that you receive notice of the defendant's release to parole, it is important to complete this form in a timely manner and to provide all requested information, especially your name, address, and other contact information. **Please note that it is your continuing responsibility to keep CDCR updated regarding your current address.** Your address information is confidential and will not be made available to the inmate or the inmate's attorney. The inmate's name, date of birth, court case number, and date sentenced to state prison are listed at the top of this letter. The county of commitment is Los Angeles. It is not necessary to include the inmate's CDC Number (Prison Number).

CDCR offers a variety of services to assist crime victims and protect victims' rights. CDCR can provide you with information regarding the confidentiality of your personal information and procedures for collecting restitution from a prisoner. CDCR's toll free telephone number is (877) 256-6877. Their web site is: <http://www.cdcr.ca.gov>. Click on "Victims Services" for more information.

If you have any questions or need assistance in filling out this form, please contact the District Attorney's Office at (213) 257-2220 and ask for the Victim Witness Assistance Representative or visit <http://da.lacounty.gov/vwap/>.

Encl.

