UNITED STATES v. Roger Karlsson and Eastern Metal Securities Court Docket # 19-CR-00340

VICTIM IMPACT STATEMENT/FINANCIAL CRIME Submit by: May 14, 2021

NAME: _____

Please continue these statements on an additional sheet of paper if you wish.

How have you and members of your family been affected by this crime?

How has the crimes affected you and your family's lifestyle?

How has this crime affected you and your family's livelihood?

Have you experienced any of the following reactions to the crime? PLEASE REALIZE THESE ARE NORMAL REACTIONS TO A TRAUMATIC EVENT OR SITUATION. Grief Guilt Sleep Loss Nightmares Anger Anxiety Fear Change Depression Appetite Trouble Concentrating Memory of Crime Uncontrollable Crying Repeated Chronic Fatigue Do you relate to people differently since the crime? Please explain. Please describe any other reactions to the crime committed.

What else would you like the judge to know about the defendant, or your situation as a result of the crime?

If restitution is ordered by the Court, whom should the check be made out to and what address should it be mailed to?

Name:_____

Address:

Email Completed Form to: <u>Victim.AssistanceNDCA@usdoj.gov</u> OR Mail to: Maria Sunga U.S. Attorney's Office – NDCA 450 Golden Gate Ave. FL 11 San Francisco, CA 94102

Victim Questionnaire

Please submit completed form to Victim.AssistanceNDCA@usdoj.gov

Name:	
Address:	
Email:	Phone Number:
Email used to register with the program if di	fferent:
Preferred method of contact:	
Approximate date of initial investment:	
Username(s):	
How did you find out about the program?	
What did you purchase from the program?	
How much did you provide to the program?	
What was your method of payment (bitcoin,	wire transfer, c-gold, perfect money, etc.)?
What account or wallet did you send funds	
Please attach supporting documentation of include, email confirmations, blockchain que union receipts, etc. If you do not have support	ery results, wire transfer receipts, western
How much did you receive from the program	n?
Please include any other information that yo	ou believe would be helpful here:
By typing or signing your name below and r penalty of perjury under the laws of the Unit true and correct.	

Name:	

Date:_____