

2. Please describe any emotional impact this crime had you (or the person you represent). For example, think of how the crime has impacted your ability to live, learn, work, play or worship, including impacts to your lifestyle or daily activities; your mental well-being, sleeping habits, depression, anxiety, post-traumatic stress; your relationships with others such as your spouse, family and friends; your ability to work, attend school or study; your feelings, emotions and reactions as they relate to the crime and/or defendant(s); and/or counseling or wellness groups to assist your recovery.

3. What would you (or the person you represent) like to see happen to the person and/or corporation who committed this crime? Please include any security concerns you may have, such as concerns about contact with the defendant(s); contact between the defendant(s) and your family members and/or friends; and/or concerns about retaliation if you are or were employed by the defendant(s).

4. Is there anything else you would like the judge to know before sentence is imposed?

II. Financial Impact - For the following questions, list any financial losses you have incurred or expect to incur as a result of these crimes. When possible, attach receipts or other documentation of your loss. Without proper documentation, the Court may not be able to order restitution. Feel free to attach additional pages as necessary. *Please note that while you are free to list any expenses you incurred to explain the financial impact the crime had, the Court can only order restitution for the losses that are specifically allowable under the law.*

1. Itemize any expenses you incurred or expect to incur for medical services or devices, counseling, physical or occupational therapy, and/or loss of income due to physical injury directly resulting from the crime:

_____ \$ _____
_____ \$ _____

2. List the expenses and expected expenses for lost income and necessary childcare, transportation, or other expenses incurred during your participation in the investigation or prosecution of the offense or attendance at court proceedings related to the crime:

_____ \$ _____
_____ \$ _____

3. List any other expenses you have incurred or expect to incur due to the crime:

_____ \$ _____
_____ \$ _____

4. Total Losses: \$ _____

5. Have you been reimbursed for any of the losses described above? Yes No

If yes, please list any money you were paid or expect to be paid from insurance, crime victims' compensation, or other sources and attach copies of receipts.

Source of Payment: _____ Amount Reimbursed: \$ _____

Address: _____

Claim Number: _____ Telephone Number: _____

5. If restitution is ordered by the Court, where should the check be mailed?

Payee Name: _____

Address: _____

Telephone Number: _____

Signature: _____ **Date:** _____