

CRIME VICTIM IMPACT STATEMENT

(Use additional sheets if needed)

Victim's Name: _____

Defendant's Name: _____

1. How has this crime affected you emotionally? _____

2. How has this crime affected you physically? _____

3. How has this crime affected you financially? _____

4. What do you think should be the sentence given to the defendant for this crime? _____

Signature of Victim: _____

Date: _____