

VICTIM IMPACT STATEMENT

Middle District of Florida
United States v. Gunter, et al.
Case No. 8:08-cr-00172-T-26

I, *[name]* _____, residing at *[street address]* _____

_____, in *[city and county]* _____

_____, of *[country and postal code]* _____,

am a victim in the above-referenced case. I believe that I am entitled to restitution in the total amount of \$ _____ (**purchase price only**-- do not include projected/anticipated interest/profit).

I may be contacted at *[telephone number]* _____ and/or *[e-mail address]*

_____.

My specific losses, harms, or costs as a result of this offense are summarized as follows:

[Attach all supporting documentation. Additional pages may be necessary.]

I have been compensated by insurance or another source with respect to all or a portion of my losses in the amount of \$ _____. I have marked above those losses for which I have been compensated with a checkmark (✓). The name and address of my insurance company (or other compensator) and the claim number for this loss is as follows:

I declare under penalty of perjury that the foregoing is true and correct.

Signature

Executed on _____ day of _____, 200_____.

**Please return the completed form to: United States Attorney's Office, Attn: Chris Griffiths,
400 N. Tampa Street, Suite 3200, Tampa, Florida 33602.**