

# **Identity Theft Victim Impact Statement Worksheet**

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**Your Name:** \_\_\_\_\_

**Defendant's Name:** \_\_\_\_\_

**Case Name:** \_\_\_\_\_

**Case Number:** \_\_\_\_\_

If you need more space to answer any of the following questions, please feel free to use as much paper as you need, and attach these sheets of paper to this impact statement. If you prefer, you may also choose simply to write a letter using your own stationary instead of using this format.

1. **How in general terms has the crime affected you and those close to you?**

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2. **What effect, if any, has the theft of your identity had on your financial situation, credit rating, and related circumstances?** What steps if any have you had to take to restore your credit? Have you suffered other adverse consequences because your identity was stolen?

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3. **Have you suffered any direct or indirect economic losses because of the crime?**  
(Please include any expenses for medical care, counseling, or replacement of property due to the crime, any expenses incurred to restore your credit or change bank or other accounts as a result of the crime, and any other identifiable economic losses. Please include copies of receipts or documentation when available.)

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4. **How would you like to see the defendant sentenced?** Please keep in mind that the sentence is not entirely up to the discretion of the judge, who is required to consider prescribed guidelines in fashioning a sentence.

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\_\_\_\_\_  
Signature

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Date