

UNITED STATES v. Krishna Mohan

COURT DOCKET NUMBER: 18-CR-00610

VICTIM NAME: _____

VICTIM IMPACT STATEMENT/FINANCIAL CRIME

How have you and/or your institution been affected by this crime?

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper has a slight shadow on the right side, suggesting it's resting on a surface.

Please continue this statement on an additional sheet of paper if you wish.

Have you and/or anyone on your institution's behalf initiated or filed a civil suit against the defendant or related entities? If yes, please list the case name, court location, and docket number.

VICTIM IMPACT STATEMENT/FINANCIAL CRIME

Do you and/or your institution act differently since the crime? Please explain.

How has the crime affected you and/or your institution's business, if at all? Please explain
Please describe any reactions to the crime committed.

Do you feel the defendant is or will be a threat to you and/or your institution or the community?

Yes___No___, Please explain.

What else would you like the Judge to know about the defendant, or you and/or your institution's situation as a result of the crime?

VICTIM IMPACT STATEMENT /FINANCIAL CRIME

If a victim consents, the Court may also make restitution in services in lieu of money, or make restitution to a person or organization designated by a victim. If you are interested in this option, please explain.

Please list your actual financial losses from this crime. List only those items for which you have not been or do not expect to be repaid. Please attach accounting or other records whenever possible. (Use additional paper if needed.) Please differentiate any monies already repaid by a defendant.

Have you and/or your institution been assessed any additional taxes, penalties or interest by the federal government as a result of this case? If yes, please explain.

VICTIM IMPACT STATEMENT /FINANCIAL CRIME

If you and/or your institution have suffered any other expenses as a result of this crime, please list them below. Include such items as lost income, transportation, and necessary other expenses incurred during your participation in the investigation or prosecution of the offense or attendance at proceedings related to the offense. Please be specific and attach an accounting or copies of receipts if possible.

Signature: _____

Printed Name: _____

Date: _____

CONFIDENTIAL

United States v. _____

Case Number: _____

The address and telephone contact information provided below will only be provided to the presentence probation officer, and the United States Attorney's Office, unless a court order signed by the Judge authorizes the release of this page to the Court and attorney for the defendant.

Printed Name: _____

Signature: _____

Address: _____

Phone: (hm) _____ (wk) _____

Fax: _____ E-Mail: _____