

VICTIM IMPACT STATEMENT

Victim Name: _____

Case Name: US v. Kristijan Krsticv et al. Court Docket #: 3:20-CR-00120-B

Date of Sentencing: TBD Judge: Jane J. Boyle

If you need additional space for any question, please attach an additional sheet of paper or write on the back of the page.

How have you and members of your family been affected overall by this crime?

How has the crime affected you and your family's lifestyle?

Has the crime affected your ability to work, make a living, run a household, go to school, etc?

Have you experienced any of the following reactions to the crime?

Please realize these are normal reactions to a traumatic event.

Anger ____ Anxiety ____ Fear ____ Grief ____ Guilt ____ Numbness ____ Depression ____

Sleep Loss ____ Nightmares ____ Chronic Fatigue ____ Forgetfulness ____ Trouble Concentrating ____

Other Reactions:

Have you or your family gone to therapy or counseling as a result of the crime? Please explain.

Were you physically injured as a result of the crime? If so, please describe your injuries and any medical treatment received.

Do you feel the defendant continues to be a threat to you, your family or the community?

What are your thoughts regarding the sentence the Court should impose on the defendant?

Restitution:

Have you or anyone on your behalf initiated civil action against any party as a result of this offense?

YES_____ NO_____

If YES, please state the case name, docket number and court of jurisdiction:

Please list any and all damages and or expenses incurred as a result of this crime. Itemize each expense individually and total the amount. Include medical expenses, including counseling, lost, or damaged property, lost wages, etc. Include receipts or other documentation where possible. You may be asked to testify as to the losses listed on your impact statement, so your statements must be accurate and truthful. This information is important in order to request proper restitution for you at sentencing. It does not guarantee that restitution will be ordered or that it will be paid immediately. But, without this information, restitution cannot occur.

Is there anything else you would like the Judge to know? If you need additional space for any question, please attach an additional sheet of paper or write on the back of this page.

Signature: _____ **Date:** _____