Victim Impact Statement	Environmental Crime
United States v. Erie Coke Corporation, et al	Docket Number:1:22cr23
Victim Name:	
Your Name (if different from victim):	
Relationship to Victim:	
I. General Impact – Please answer the following question this case. Feel free to add additional pages as necessary.	ns in relation to the crimes charged in
1. Please explain any negative health effects you (experienced resulting from the exposure to a pollutant defendant(s). The health impacts may be immediate and take time to develop. Please explain in as much detail as yphysical impacts (such as, "my asthma was triggered each the air"). For example, think of: physical pain, discomfor physical limitation; immediate or short-term medical care; had; treatment, counseling, or medication you have been put treatment or the expectation you will receive further treatment disability.	or chemical released by the plain to see or may be less obvious or you can how the crime caused these time the plant released chemicals into t, illness, scarring, disfigurement or hospitalization or surgery you have prescribed; the need for any further
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Please return this form to: usapaw.victimwitness@usdoj.gov or United States Attorney's Office, Western District of Pennsylvania, Victim Witness Program, 700 Grant Street, Suite 4000, Pittsburgh, PA 15219

2. Please describe any emotional impact this crime had you (or the person you represent). For example, think of how the crime has impacted your ability to live, learn, work, play or worship, including impacts to your lifestyle or daily activities; your mental well-being, sleeping habits, depression, anxiety, post-traumatic stress; your relationships with others such as your spouse, family and friends; your ability to work, attend school or study; your feelings, emotions and reactions as they relate to the crime and/or defendant(s); and/or counseling or wellness groups to assist your recovery.
3. What would you (or the person you represent) like to see happen to the person and/or corporation who committed this crime? Please include any security concerns you may have, such as concerns about contact with the defendant(s); contact between the defendant(s) and your family members and/or friends; and/or concerns about retaliation if you are or were employed by the defendant(s).
4. Is there anything else you would like the judge to know before sentence is imposed?

expect to incur as a result of these cr of your loss. Without proper docume free to attach additional pages as nec	wing questions, list any financial losses you have incurred or imes. When possible, attach receipts or other documentation entation, the Court may not be able to order restitution. Feel tessary. Please note that while you are free to list any of financial impact the crime had, the Court can only order crifically allowable under the law.
	red or expect to incur for medical services or devices, al therapy, and/or loss of income due to physical injury
-	\$
	\$ \$
transportation, or other expenses in prosecution of the offense or attended	expenses for lost income and necessary childcare, incurred during your participation in the investigation or lance at court proceedings related to the crime: \$\$
3. List any other expenses you hav	e incurred or expect to incur due to the crime: \$
4. Total Losses:	\$
	any of the losses described above? Yes No re paid or expect to be paid from insurance, crime victims' attach copies of receipts.
	Amount Reimbursed: \$
Address:	
	Telephone Number:
•	Court, where should the check be mailed?
_ 4	
Signature:	Date: