

VICTIM IMPACT STATEMENT

*Filling out this form is voluntary. If you choose to fill out the form, you do not have to complete every section. You can fill in this form or you can write your statement in your own way using whatever method you feel most comfortable with. **If you wish to provide any Victim Impact Statement, please deliver it to our office at your earliest convenience.***

Name of Victim:
Name of Defendant:
Court Case No.:

Physical Impact:

You can describe injuries you received, treatment you may have had, and ongoing physical effects. If you have additional information, such as a doctor report or photographs, you can attach it to this form.

Emotional Impact:

You can describe psychological or emotional effects the crime has caused you. If you have additional information, such as reports from a psychologist or counselor, you can attach it to this form.

Financial Impact:

You can describe loss of wages or income or other expenses incurred as a result of the crime. If you have additional information, such as pay stubs, you can attach it to this form.

Property Damage / Property Loss:

You can describe damage to any of your property. You can describe any loss of property that has not been recovered. If you have additional information, you can attach it to this form.

Other Relevant Information:

You can describe how your life has changed as a result of the crime. You can describe anything else you want to tell the Court that has not been included in other sections. If you have additional information, you can attach it to this form.

Sentence Input:

You can include what you would like the Court to order the Defendant to do, such as go to prison/jail, pay fines, pay restitution, have no contact with you, attend counseling, etc.

Signature: _____ Date: _____

Print Name: _____

Please send any Victim Impact Statement and additional materials (if any) to:

Uintah County Attorney's Office
Attn: Marla Cox
641 East 300 South, Suite 200
Vernal, Utah 84078