

VICTIMS RESTITUTION STATEMENT

Defendant:

Case No.

PROPERTY TAKEN AND NOT RECOVERED, DATE PURCHASED, PURCHASE COST

PROPERTY DAMAGED AND/OR REPAIR COST:

OTHER LOSSES:

TOTAL _____

Did insurance cover any of the damages? Yes _____ No _____

Amount of deductible: _____ Amount insurance paid _____

Your total out of pocket expense due to this crime? _____

I, _____ hereby certify that all of the information on this form is true and correct and recognize that I may have to testify in court under oath, and under penalties of perjury, concerning the information I have provided on this form.

Dated this ____ day of _____ 2014.

Signature

Name of Business (if victim)

Address

Home/Work Number

Attach documentation demonstrating amounts (receipts, estimates, and misc.)

ATTACHMENT A