GARFIELD HEIGHTS MUNICIPAL COURT

VICTIM ASSISTANCE PROGRAM Victim Impact Statement

| Victim: |
|---|
| Case#: |
| Defendant: |
| We request your voluntary cooperation in completing this statement. It will be submitted to the judge, to show how this crime has affected you. O.R.C. 2930.13 gives you the opportunity to make an Impact Statement to the court concerning your case. You may give this voluntary statement in writing and/or in person. Please be aware that your comments may be read by the judge, prosecutor, law enforcement personnel, defense attorney, and the defendant. If you choose to fill out the form, the form will enable the sentencing judge and the prosecutor to be more aware of how the crime affected you and your family. It will be helpful to the judge in deciding what sentence the defendant should receive and/or any money the defendant owes you because of this crime. Please use an additional sheet of paper if this is not adequate space. |
| 1. How has this crime affected you and those close to you? |
| *Psychological - fear of defendant, counseling needed *Physical - injuries and their seriousness and permanence, damage to property *Personal - ability to earn a living, effect on family, changes in lifestyle |
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| 3. Do you have any thoughts on the sentence? *Community service *Probation *Restitution *Incarceration *Counseling *Other The above statements are true to the best of my knowledge. | bills. Beside each bill list any agency or Ins | pecause of this incident? If yes, send copies of urance Company that will pay for all or part of the loss; ou may include medical costs, property damage, funeral |
|--|--|---|
| *Community service *Probation *Restitution *Incarceration *Counseling *Other The above statements are true to the best of my knowledge. | | |
| *Community service *Probation *Restitution *Incarceration *Counseling *Other The above statements are true to the best of my knowledge. | | |
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| *Community service *Probation *Restitution *Incarceration *Counseling *Other The above statements are true to the best of my knowledge. | | |
| *Probation *Restitution *Incarceration *Counseling *Other The above statements are true to the best of my knowledge. | 3. Do you have any thoughts on the sentence | ? |
| *Restitution *Incarceration *Counseling *Other The above statements are true to the best of my knowledge. | *Community service | |
| *Incarceration *Counseling *Other The above statements are true to the best of my knowledge. | *Probation | |
| *Counseling *Other The above statements are true to the best of my knowledge. | *Restitution | |
| *Other *Other The above statements are true to the best of my knowledge. | *Incarceration | |
| *Other *Other The above statements are true to the best of my knowledge. | *Counseling | |
| The above statements are true to the best of my knowledge. | _ | |
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| Signature: Date: | The above statements are true to the best of n | ny knowledge. |
| | Signature: | Date: |