**Free Victim Impact Statement Template**

United States v.

Court Schedule Number:

Name of the victim:

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| **Financial Affect** |
| Describe how have you and your family been suffered by this crime? (Please use additional |
| Sheets of paper if required) |
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| **Emotional Affect** |
| Describe how have you and your family been suffered by this crime? (Please use additional |
| Sheets of paper if required) |
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| **Physical Affect** |
| Describe how have you and your family been suffered by this crime? (Please use additional |
| Sheets of paper if required) |
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| **Other Important Information** |
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Date: DD / MM / YYYY

Printed Name:

**Confidential**

Signature:

United States v.

Court Schedule Number:

Phone:

Email:

Fax:

Address:

Signature:

Printed Name: