

**MONONGALIA COUNTY VICTIM/WITNESS ASSISTANCE PROGRAM
PROSECUTING ATTORNEY'S OFFICE
THIRD FLOOR COURTHOUSE
243 HIGH STREET
MORGANTOWN, WV 26505
(304) 291-7286 Fax 291-7285
VICTIM IMPACT STATEMENT**

WHAT IS A VICTIM IMPACT STATEMENT AND HOW IS IT USED?

The victim impact statement (VIS) is an opportunity for you to describe how being a victim of crime has affected you and others close to you. This statement has space for you to write about the physical, emotional, and financial effects of this crime, as well as any other changes in your life you may have experienced. If the defendant pleads guilty or is found guilty after trial, your impact statement will help the Judge understand how this crime has affected you and those close to you.

FILLING OUT THE STATEMENT IS VOLUNTARY.

You do not have to fill out a Victim Impact Statement. However, it may be helpful to the Judge when he decides what sentence the defendant should receive and/or any money the defendant may have to pay for expenses you have paid or owe because of this crime. When the Judge makes the defendant pay the victim, it is called "restitution." If the Judge orders the defendant to pay you restitution, there is no guarantee that the defendant will be able to pay the entire amount.

Your statement will become an official court document after it is given to the court, and will become part of the defendant's permanent file. The Judge, Prosecutor, and Probation Officer will read your statement. In addition, prison and parole officials may read your statement if the defendant is sentenced to a prison term. The defendant and the defendant's attorney will also be able to read what you have written. They may even be able to ask you questions about your statement in court. However, the defendant will not be able to see your address and telephone number because they are not put on the statement.

No one knows better than you how this crime may have changed or affected your life. Those of us involved in your case believe that it is very important for you to help the court understand all of the ways this crime has affected you and those close to you.

You also have a right to speak to the Judge at the time of sentencing. If you would like to do so, please contact our office right away, and we will help you plan for this.

The statement also asks what you believe the sentence should be in this case. Although the Judge will decide the defendant's sentence, the Judge may consider your opinion before making this decision. Your statement also may be used at other hearings in which decisions are made about parole or the possible early release of the defendant.

SUGGESTIONS FOR COMPLETING YOUR VICTIM IMPACT STATEMENT

The following suggestions are offered only as a guide in completing the victim impact form. Feel free to write in your own words what effects this crime has had. Please answer as many questions as you wish. If a question makes you feel uncomfortable, you do not have to answer it.

If you need more space or wish to provide information in a different way, please use as much paper as you need and attach the pages to this form when you return it. If you feel uncomfortable in any way using this form, you may simply express your thoughts in letter form

The first part of the Victim Impact Statement asks about the physical effects of the crime and the emotional impact it had on you and those close to you. Also, it asks about the effect of the crime on your ability to work or do any of the things you normally do, such as going to school, running a household, or any other activities you perform or enjoy.

If you have paid or owe any money for bills because of this crime, please fill out the financial impact section of the statement (or the separate Property form if it is included). It is important to be as accurate and complete as possible when listing your costs because this information will be used by the Judge to help determine what restitution the defendant must pay to you, the victim. Some examples of expenses you may have paid or owe include – *medical bills or supplies; eyeglasses or hearing aid replacement or repair; counseling costs; lost wages or support; funeral expenses; crime scene cleanup; lost, stolen or damaged property; and the repair or replacement of door locks and security devices.* It is important to attach copies of any bills or other proof of any money that you have spent or expect to spend in the future as a result of this crime.

In addition to medical or counseling bills, you may want to include any time off from work for which you were not paid as a result of this crime. For example, if you took time off from work to go to the doctor or courthouse to testify, and your employer did not pay you for this time, you may want to ask the Judge to think about these expenses when he or she decides if the defendant will owe you any restitution.

CRIME VICTIM COMPENSATION FUND

Did you know that you might be eligible to receive financial help from the Crime Victim Compensation Fund? This program can pay victims back for certain types of out-of-pocket expenses for physical or emotional injuries received as a direct result of a crime. These expenses may include medical bills, counseling costs, funeral bills, and lost wages. This is not the same as restitution. You may be able to receive money to help you with some of your medical bills even before you go to court.

You will have to meet certain conditions to receive Crime Victim Compensation benefits. You must be an innocent victim of crime, and you must have reported the crime to law enforcement officials within 72 hours. You can file for benefits immediately following the crime even if no arrest had been made. If you would like more information on the benefits available, or how to apply for compensation, please contact our office for assistance.

FOR HELP WITH YOUR VICTIM IMPACT STATEMENT

Please return your completed victim impact statement to our office by the due date indicated on the statement. If you have any questions while completing your impact statement or if you would like to speak to the Judge at sentencing, please contact our office right away so this can be arranged. If our office can help in any way at all, please feel free to contact us.

2. Were you physically or emotionally injured because of this crime?
YES_____ NO_____

If yes, explain the extent of your injury. Explain how serious it was. Explain how long the injury lasted or will last.

3. Did you seek treatment for your physical injury?
YES_____ NO_____

If yes, explain the treatment. Explain how long the treatment was or will be needed. (On page 4., please include verification of the cost of this treatment to you.)

4. Were you or your family psychologically (emotionally) injured because of this crime?
Explain.

YES_____ NO_____

5. Have you or your family received counseling or therapy because of this crime?

YES _____ NO _____

If yes, explain how long you or your family has received and/or will receive counseling or therapy. (On page 4., please include written verification of the costs to you and projected future costs as well.)

6. Has this crime affected your ability to earn a living?

YES _____ NO _____

If yes, explain how. Mention any days lost from work. (On page 5., please list the amount of income lost and include written verification from your employer.)

7. ADDITIONAL COMMENTS: Explain any other change in your personal welfare or other problems you or your family have experienced because of this crime. *(Other family members may wish to include statements of their own.)*

8. SENTENCING: please indicate your feelings on the sentence that you feel the defendant should receive for committing this crime. *(If a Plea Agreement has been reached, you may just want to address the terms of the proposed agreement.)*

If this crime is a felony, and if the defendant is sentenced to the West Virginia Department of Corrections, I understand that to receive notice about any parole, I must contact in writing:

*West Virginia Board of Probation and Parole
112 California Avenue
Room 307
Charleston, W.V. 26305*

I know that I must send notice about any change in my mailing address to receive notification.

Innocent victims of crime may also be eligible to receive certain compensation and medical benefits from the W.V. Crime Victims Compensation Fund. Additional information and claim forms may be obtained by calling or writing to:

*Monongalia County Victim/Witness
Assistance Program
243 High Street
Third Floor Courthouse
Morgantown, W.V. 26505
(304) 291-7250*

*Crime Victims Compensation Fund
1900 Kanawha Blvd. Room W334
Charleston, W.V. 25305-0291
(304) 347-4850
1-800-642-8650 (W.V. only)*

I swear that the statements made here are true to the best of my knowledge.

SIGNATURE

DATE

_____ / /

If you are completing the statement for someone else, please complete the following:

VICTIM'S NAME

RELATIONSHIP

YOU MAY ATTACH ADDITIONAL PAGES TO THIS STATEMENT.