

Victim Impact Statement

Case Number: _____

Court: _____

Date: _____

Victim's Name: _____

Relationship to Offender (if any): _____

Introduction

Please describe who you are and your relationship to the case/offender (if any).

Impact of the Crime

Please explain how the crime has affected your life. You may include emotional, physical, financial, or other effects.

Changes to Daily Life

Describe any changes to your daily routine, relationships, or overall well-being that you have experienced as a result of this crime.

Financial Impact

If applicable, list any expenses, loss of income, or financial difficulties resulting from the offence.

What Would You Like the Court to Know?

This may include what you believe would be a fair outcome or any requests for sentencing, restitution, or protection.

Signature: _____

Date: _____

Important Notes

- This statement is your opportunity to describe the physical, emotional, and financial impact of the crime.
- Only include facts and outcomes that are true to your experience. Avoid exaggeration or speculation.
- Your statement may be read in open court; do not include information you wish to keep private.
- If you need help completing this statement, consider reaching out to a victim support service.
- Retain a copy of the completed statement for your records.