

Victim Impact Statement for Businesses *Commonwealth of Virginia*

Section 19.2-299.1 of the Code of Virginia allows crime victims to submit to the judge a statement that describes the impact of the crime(s) on the victim. This statement may be considered by the court in deciding a sentence.

Please complete all parts of this form which apply in this case. Add additional pages if necessary.

_____ Name of Business _____ Name of Defendant

Economic Loss

A. Financial Loss

1. Property Loss
List the property lost as a result of this crime. This is property that has not been and is not to be recovered. (Attach any relevant receipts)

Item	Make	Model	Cost
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
			Total\$ _____

2. Property Damage
List property damage as a result of this crime. (Attach estimates/bills for repair)

Item	Make	Model	Cost
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
			Totals\$ _____

3. Other Economic Losses/Costs
Subtotal A: (Property Loss + Property Damage + Other) = Subtotal A[_____]

B. Reimbursement Received

1. Property Insurance (Name and address of insurance company) _____
 2. Amount received from insurance **Totals\$** _____
 3. Restitution Received from defendant **Totals\$** _____
 4. Other Reimbursement(s) **Totals\$** _____
- Subtotal B: (Sum of Reimbursements)** = Subtotal B[_____]

C. Economic Loss Not Reimbursed (Subtotal A Minus Subtotal B) [_____]

Additional Information

Please provide any other information you wish the court to consider about the impact of this crime

[] **NOTE: If you do not wish to make a statement please mark this box and return the form. This will enable our office to inform the probation office and the court that you do not wish to make a statement.**

Signature of person completing this form _____

Printed name of person completing this form _____

Job Title _____

Date _____

Business Address _____

Business Number: _____

PLEASE REMIT YOUR STATEMENT TO:

Victim Witness Assistance Program
Office of the Commonwealth's Attorney
9311 Lee Avenue, Suite 200
Manassas, VA 20110
Email: victimwitness@pwcgov.org