VICTIM IMPACT STATEMENT

(Please complete and return this form as soon as possible)

RE: State V. _____CASE NO.: _____
(Defendant's Name)

You have the right to submit a victim impact statement to the court at the sentencing hearing, either personally or with the assistance of the prosecuting attorney if requested, which shall be included in all pre-sentence reports and permanently included in the files and records.

This is my statement describing (1) the impacts (physical, emotional, financial) of this crime on me and/or on my family and (2) what I think the sentence ought to be:

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(More pages may be attached)

_____
Signature (Printed Victim Name:_____)

_____
Date

Return to: Whitman County Prosecutor
Attn: Victim/Witness Coordinator
N 400 Main Street
PO Box 30
Colfax, WA 99111-0030