

VICTIM IMPACT STATEMENT

RETURN To:
OFFICE OF THE DISTRICT ATTORNEY
DELAWARE COUNTY COURT HOUSE
MEDIA, PENNSYLVANIA 19063

OFFICE: 610-891-4227
FAX: 610-566-8366

COMMONWEALTH VS. _____

CASE NUMBER: _____ INCIDENT DATE: _____
VICTIM NAME: _____ JUDGE: _____
VICTIM ADDRESS: _____ ASSISTANT DISTRICT

ATTORNEY: _____

HOME PHONE #: _____
BUSINESS PHONE #: _____

Please utilize the space below to express your feelings concerning any effects this crime has had upon you. (Attach additional sheets if necessary).

SIGNATURE OF VICTIM

DATE