

**UNITED STATES DISTRICT COURT
for the
Western District of Virginia**

VICTIM ADDRESS CHANGE FORM

This form is to be used by a victim or a victim's authorized representative to change the address of a criminal restitution victim. Once approved, all future restitution payments will be sent to the new address. For details on how to complete and submit this form, please see Instructions for Completing Victim Address Change Form (p.2). This form may not be used to request a victim **name** change.

SECTION 1 - VICTIM INFORMATION		
a. Victim Name (as it appears in the judgment):	b. Criminal Case Number(s):	
c. Defendant(s) Name(s):	d. Victim No. Assigned by United States Attorney's Office:	
Address on File (Old Address)		
e. Street		
f. City	g. State	h. Zip
i. Phone	j. Email	
k. <input type="checkbox"/> Check if request is being made by an authorized representative of the victim. Victim representative name: _____ Representative's relationship to victim: <input type="checkbox"/> Parent <input type="checkbox"/> Legal guardian <input type="checkbox"/> Legal counsel <input type="checkbox"/> Other (please specify): _____		
SECTION 2 - NEW ADDRESS		
l. Street		
m. City	n. State	o. Zip
p. Phone (if changed)	q. Email (if changed)	
SECTION 3 - SUPPORTING DOCUMENTATION		
r. <input type="checkbox"/> The undersigned has read Instructions for Completing Victim Address Change Form (p.2) and is providing the required supporting documentation with this request.		
SECTION 4 - DECLARATION		
s. For Individual Victim: I, _____, am the victim named in a federal criminal judgment as being entitled to restitution payments. By signing my name below, I declare under penalty of perjury that the foregoing information and supporting documentation are true and correct.	t. For Representative of Individual or Organizational Victim: I, _____ am the authorized representative of (victim name) _____ who was named in a federal criminal judgment as being entitled to restitution payments. By signing my name below, I declare under penalty of perjury that the foregoing information and supporting documentation are true and correct.	
Printed Name	Printed Name	
Signature	Signature	
Date	Date	

