

Montana Restitution Worksheet



Restitution is money that a court orders a defendant to pay after they are found guilty of certain crimes. The money goes to the victim in the criminal case or the Crime Victim Compensation Program (CVC). The court can order restitution to help pay for medical and dental bills, mental health counseling, stolen or damaged property, lost wages, travel and relocation costs, and funeral costs for murder victims. Restitution can also go to future expenses related to the crime. This calculator helps you record the cost of things you needed because you were the victim in the defendant's crime. Attach copies of estimates, bills, or receipts related to the crime so you can keep all your documents in one place.

Important: this calculator doesn't take the place of legal advice from a lawyer. It is a useful tool but it may not always change the amount the court decides to set for restitution.

Next Steps

Once you complete this worksheet, follow the steps below.

Step 1: Talk to a Crime Victim Advocate (CVA)

A Crime victim Advocate (CVA) can help you understand the court process, provide moral support during court hearings, and help you make plans to stay safe. You can find contact information for a CVA at your local courthouse or by contacting the Montana Coalition Against Domestic and Sexual Violence (MCADSV). You can contact the Coalition at:

- www.mcadsv.com/
- 1-888-404-7794
- mtcoalition@mcadsv.com.

Step 2: Submit Your Completed Worksheet to the Prosecutor

Submit this completed worksheet to the Prosecutor assigned to your case so they will know how much Restitution to ask the court to award you.

Step 3: Talk to a Lawyer

A Prosecutor represents the state in criminal cases and may not be able to help with certain things. If you have questions about your rights, it can be a good idea to talk to a lawyer other than the Prosecutor. You can apply for free legal help from Montana Legal Services Association (MLSA) at:

- www.mtlsa.org
 - 1-800-666-6899 (hours limited).
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Personal Information

Full name:	
Phone number:	
Email address:	

Case Information

Case ID:	
Cause Number:	
Name of individual who committed the crime:	
Prosecuting attorney:	

Expense worksheets

The following worksheets outline any related expenses you may have incurred, along with a summary page of total expenses.

[A] Funeral Expenses

Expense:	Date of expense:	Receipts or documentation?
Description:		
Additional notes:		

Expense:	Date of expense:	Receipts or documentation?
Description:		
Additional notes:		

Expense:	Date of expense:	Receipts or documentation?
Description:		
Additional notes:		

Total Funeral Expenses:	
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[B] Medical Expenses

Expense:	Date of expense:	Receipts or documentation?
Description:		
Additional notes:		

Expense:	Date of expense:	Receipts or documentation?
Description:		
Additional notes:		

Expense:	Date of expense:	Receipts or documentation?
Description:		
Additional notes:		

Total Medical Expenses:	
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[C] First Responder Expenses

Expense:	Date of expense:	Receipts or documentation?
Description:		
Additional notes:		

Expense:	Date of expense:	Receipts or documentation?
Description:		
Additional notes:		

Expense:	Date of expense:	Receipts or documentation?
Description:		
Additional notes:		

Total First Responder Expenses:	
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[D] Medication and Medical Supply Expenses

Expense:	Date of expense:	Receipts or documentation?
Description:		
Additional notes:		

Expense:	Date of expense:	Receipts or documentation?
Description:		
Additional notes:		

Expense:	Date of expense:	Receipts or documentation?
Description:		
Additional notes:		

Total Medication and Medical Supply Expenses:	
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[E] Future Medical Expenses

Expense:	Estimated date of expense:	Receipts or documentation?
Estimate source:		
Description:		
Additional notes:		

Expense:	Estimated date of expense:	Receipts or documentation?
Estimate source:		
Description:		
Additional notes:		

Expense:	Estimated date of expense:	Receipts or documentation?
Estimate source:		
Description:		
Additional notes:		

Total Future Expenses:	
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[F] Recurring Medical Expenses (Future)

Expense:	Estimated date of expense:	Estimate source:
Description:		
Additional notes:		

Expense:	Estimated date of expense:	Estimate source:
Description:		
Additional notes:		

Expense:	Estimated date of expense:	Estimate source:
Description:		
Additional notes:		

Total Recurring Medical Expenses (Future):	
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[G] Mental Health Expenses

Expense:	Date of expense:	Receipts or documentation?
Description:		
Additional notes:		

Expense:	Date of expense:	Receipts or documentation?
Description:		
Additional notes:		

Expense:	Date of expense:	Receipts or documentation?
Description:		
Additional notes:		

Total Mental Health Expenses:	
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[H] Future Mental Health Expenses

Cost per session:	Estimated treatment period:	Estimate source:
Description:		
Estimated number of sessions/treatments:		

Cost per session:	Estimated treatment period:	Estimate source:
Description:		
Estimated number of sessions/treatments:		

Cost per session:	Estimated treatment period:	Estimate source:
Description:		
Estimated number of sessions/treatments:		

Total Mental Health Expenses (Future):	
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[I] Stolen Property (Recovered items)

Amount paid by you:	Amount paid by insurance:	Receipts or documentation?
Description:		
Date of expense:		

Amount paid by you:	Amount paid by insurance:	Receipts or documentation?
Description:		
Date of expense:		

Amount paid by you:	Amount paid by insurance:	Receipts or documentation?
Description:		
Date of expense:		

Total Recovered Property Expenses:	
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[J] Stolen Property (Lost items)

Amount paid by you:	Amount paid by insurance:	Receipts or documentation?
Description:		
Date of expense:		

Amount paid by you:	Amount paid by insurance:	Receipts or documentation?
Description:		
Date of expense:		

Amount paid by you:	Amount paid by insurance:	Receipts or documentation?
Description:		
Date of expense:		

Total Lost Property Expenses:	
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[K] Other Damaged Property Expenses

Cost of item or repair:	Amount paid by you:	Amount paid by insurance:	Receipts or documentation?
Description:			
Date of expense:			

Cost of item or repair:	Amount paid by you:	Amount paid by insurance:	Receipts or documentation?
Description:			
Date of expense:			

Cost of item or repair:	Amount paid by you:	Amount paid by insurance:	Receipts or documentation?
Description:			
Date of expense:			

Total Other Property Expenses:	
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[L] Lost Wages

Hours missed:	Hourly wage:	Receipts or documentation?
Reason for missing work:		
Date(s) missed:		

Hours missed:	Hourly wage:	Receipts or documentation?
Reason for missing work:		
Date(s) missed:		

Hours missed:	Hourly wage:	Receipts or documentation?
Reason for missing work:		
Date(s) missed:		

Total Lost Wages:	
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[M] Lost Wages (Court attendance)

Hours missed:	Hourly wage:	Receipts or documentation?
Reason for missing work:		
Date(s) missed:		

Hours missed:	Hourly wage:	Receipts or documentation?
Reason for missing work:		
Date(s) missed:		

Hours missed:	Hourly wage:	Receipts or documentation?
Reason for missing work:		
Date(s) missed:		

Total Lost Wages (Court Attendance):	
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[N] Lost Wages (Other reasons)

Hours missed:	Hourly wage:	Receipts or documentation?
Reason for missing work:		
Date(s) missed:		

Hours missed:	Hourly wage:	Receipts or documentation?
Reason for missing work:		
Date(s) missed:		

Hours missed:	Hourly wage:	Receipts or documentation?
Reason for missing work:		
Date(s) missed:		

Total Lost Wages (Other):	
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[O] Future Lost Wages

Description:	
Estimated future loss:	
How did you estimate that?	
Other notes:	

Description:	
Estimated future loss:	
How did you estimate that?	
Other notes:	

Description:	
Estimated future loss:	
How did you estimate that?	
Other notes:	

Total Future Lost Wages:	
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[P] Travel Expenses (Car travel)

Date of travel:	
Round trip mileage:	
What was the reason for the travel?	

Date of travel:	
Round trip mileage:	
What was the reason for the travel?	

Date of travel:	
Round trip mileage:	
What was the reason for the travel?	

Total Travel Expenses:	
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[Q] Travel Expenses (Other travel)

Date:	Amount:	Receipts or documentation?
What was the reason for travel?		
Describe what kind of travel expense:		

Date:	Amount:	Receipts or documentation?
What was the reason for travel?		
Describe what kind of travel expense:		

Date:	Amount:	Receipts or documentation?
What was the reason for travel?		
Describe what kind of travel expense:		

Total Travel Expenses (Other):	
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[R] Moving Expenses

Date:	Amount:	Receipts or documentation?
Description:		
How does the expense relate to the crime?		
Expense notes:		

Date:	Amount:	Receipts or documentation?
Description:		
How does the expense relate to the crime?		
Expense notes:		

Date:	Amount:	Receipts or documentation?
Description:		
How does the expense relate to the crime?		
Expense notes:		

Total Moving Expenses:	
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[S] Safety Expenses

Date:	Amount:	Receipts or documentation?
Description:		
How does the expense relate to the crime?		
Payment notes:		

Date:	Amount:	Receipts or documentation?
Description:		
How does the expense relate to the crime?		
Payment notes:		

Date:	Amount:	Receipts or documentation?
Description:		
How does the expense relate to the crime?		
Payment notes:		

Total Safety Expenses:	
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[T] Loss of Education

Date:	Amount:	Receipts or documentation?
Description:		
Please describe how the crime impacted your schooling:		
Payment notes:		

Date:	Amount:	Receipts or documentation?
Description:		
Please describe how the crime impacted your schooling:		
Payment notes:		

Date:	Amount:	Receipts or documentation?
Description:		
Please describe how the crime impacted your schooling:		
Payment notes:		

Total Loss of Education:	
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[U] Other Expenses

Date:	Amount:	Receipts or documentation?
Description:		
How does the expense relate to the crime?		
Payment notes:		

Date:	Amount:	Receipts or documentation?
Description:		
How does the expense relate to the crime?		
Payment notes:		

Date:	Amount:	Receipts or documentation?
Description:		
How does the expense relate to the crime?		
Payment notes:		

Total Loss of Education:	
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SUMMARY REPORT

[A] Funeral Expenses	
[B] Medical Expenses	
[C] First Responder Expenses	
[D] Medication and Medical Supply Expenses	
[E] Future Medical Expenses	
[F] Recurring Medical Expenses (Future)	
[G] Mental Health Expenses	
[H] Future Mental Health Expenses	
[I] Stolen Property (Recovered items)	
[J] Stolen Property (Lost items)	
[K] Other Damaged Property Expenses	
[L] Lost Wages	
[M] Lost Wages (Court attendance)	
[N] Lost Wages (Other reasons)	
[O] Future Lost Wages	
[P] Travel Expenses (Car travel)	
[Q] Travel Expenses (Other travel)	
[R] Moving Expenses	
[S] Safety Expenses	
[T] Loss of Education	
[U] Other expenses	

Total expenses:	
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