

JUVENILE RESTITUTION FORM

STATE OF SOUTH DAKOTA

IN CIRCUIT COURT

COUNTY OF _____

FIRST JUDICIAL CIRCUIT

IN THE INTEREST OF,

MINOR CHILD AND CONCERNING

PARENT

JUVENILE
RESTITUTION ACCOUNT
INFORMATION

IF RESTITUTION IS BEING REQUESTED IN A JUVENILE CASE THIS FORM MUST BE COMPLETED BY THE PROSECUTOR AND REPRESENTED TO THE COURT **AT THE TIME OF DISPOSITION**. IF JOINT AND SEVERAL RESTITUTION IS REQUESTED FILL IN THE BOXES BELOW AND ATTACH A SHEET FOR EACH RESPONSIBLE PARTY WITH ACTUAL AMOUNTS OWED BY EACH RESPONSIBLE PARTY FILLED IN.

NUMBER OF RESPONSIBLE PARTIES \$ TOTAL RESTITUTION DUE FROM ALL RESPONSIBLE PARTIES

DOCKET #(S) OF RELATED CASES:

VICTIM 1:

NAME: _____ DOB: _____ AMOUNT: \$ _____
MAILING ADDRESS: _____
PHONE: _____ EMAIL: _____

VICTIM 2:

NAME: _____ DOB: _____ AMOUNT: \$ _____
MAILING ADDRESS: _____
PHONE: _____ EMAIL: _____

VICTIM 3:

NAME: _____ DOB: _____ AMOUNT: \$ _____
MAILING ADDRESS: _____
PHONE: _____ EMAIL: _____

VICTIM 4:

NAME: _____ DOB: _____ AMOUNT: \$ _____
MAILING ADDRESS: _____
PHONE: _____ EMAIL: _____

TOTAL RESTITUTION DUE FROM JUVENILE
(if joint and several fill in only this defendant's share) \$ _____

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IF ADDITIONAL VICTIMS CHECK THIS BOX AND ATTACH EXTRA FORMS.