

STATE OF VERMONT

SUPERIOR COURT

Unit

FAMILY DIVISION

Case No.

<b>In Re:</b> _____	<b>DOB</b> _____
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RESTITUTION JUDGMENT ORDER

Victim's Name: \_\_\_\_\_

- This matter is referred to a Juvenile Restorative Panel pursuant to 33 V.S.A. § 5262(b)(2) to establish the amount of uninsured material loss and fix the manner of payment. The finding of the Juvenile Restorative Panel shall be sufficient to authorize payment to the victim under 33 V.S.A. § 5235(d).

OR

Restitution Judgment

Based on victim's uninsured material loss, it is hereby **ordered** that the restitution amount is \$\_\_\_\_\_

- Judgment is against the juvenile individually for the whole amount.

OR

- Judgment is joint and several with the following offenders: *(use initials if co-defendant is a juvenile)*

Name: \_\_\_\_\_ Case No.: \_\_\_\_\_

Name: \_\_\_\_\_ Case No.: \_\_\_\_\_

Name: \_\_\_\_\_ Case No.: \_\_\_\_\_

Restitution Performance

- The Court finds the juvenile has the current ability or reasonably foreseeable ability to make payment(s) as ordered below:

Juvenile shall immediately pay \$\_\_\_\_\_.

Juvenile shall pay the amount of \$\_\_\_\_\_ per  week  2 weeks  month, beginning \_\_\_\_\_.

Payments may be made by cash, credit/debit card, certified check, or money order made payable to the State of Vermont Restitution Unit, PO Box 10, Waterbury VT 05676-0010 (Phone: 1-800-584-33485; Outside Vermont 1-802-241-4688)

- Payment of restitution is a condition of juvenile probation, and the juvenile probation officer shall determine the amount, frequency of periodic payment and facilitate payment to the Restitution Unit.

- The juvenile has no ability to pay at this time.

The juvenile remains liable for this judgment until paid in full, pursuant to 33 V.S.A. § 5235(k). The Restitution Unit may file a proceeding to enforce a restitution order once the juvenile reaches the age of 18.

Dated

\_\_\_\_\_

\_\_\_\_\_

Superior Court Judge

ACCEPTANCE OF SERVICE

I accept service of this and waive all other forms of service.

\_\_\_\_\_

Date

\_\_\_\_\_

Juvenile's Initials

\_\_\_\_\_

Parent/Guardian/Custodian