

LOUISIANA CRIME VICTIMS REPARATIONS
RELOCATION EXPENSE VERIFICATION FORM

*** If a victim or claimant is applying for relocation reimbursement, in addition to this form the “CVR Application” will also need to be completed and submitted with this form.** This worksheet is provided to assist you in filing for relocation reimbursement. Please provide a **receipt or a form of verification** for each expense for which you are requesting. Louisiana Crime Victims staff will verify and review the requested items and recommend the final amount to be paid.

Types of Expenses and Limits	
Total payment or reimbursement not to exceed \$5,000*	Amount (\$)
Rental Housing: <ul style="list-style-type: none"> • Please provide a copy of your rental/ lease agreement. 	\$
Utilities Deposit: <ul style="list-style-type: none"> • Please provide receipts and/ or statements. 	\$
Telephone Deposit and Connection Fee: <ul style="list-style-type: none"> • Please provide receipts and/ or statements. 	\$
Temporary Lodging: <ul style="list-style-type: none"> • Please provide receipts and/ or statements. 	\$
Other Necessary Expenses: <ul style="list-style-type: none"> • Please provide receipts and a statement explaining the reasons these items were necessary as a direct result of the crime. Examples of expenses may include moving van/truck rental, airplane tickets, moving expense, fees, etc. 	\$
Total Relocation Expenses:	\$

I certify under penalty of law that all information submitted with this form is true and correct to the best of my knowledge and that expenses or losses to be claimed are a direct result of a violent crime.

Your signature designates you have read and agree with the above statement.

Signature: _____ **Date:** _____