



## Guidelines for Lost Support

### Section 1: Guidelines. Please read carefully

The Violent Crimes Compensation Board can compensate a qualifying dependent of a homicide victim up to \$40,000 for loss of support. Up to \$80,000 may be available if there are multiple dependents that were financially dependent upon the victim at the time of the incident.

Lost support awards are generally provided to the victim's minor children, however, the VCCB may compensate lost support of a spouse or domestic partner who was financially dependent upon the victim at the time of the incident.

To request lost support, you must provide the following documentation:

- Adult Dependency Questionnaire
- Documentation to support your dependence upon the victim at the time of the incident, such as copies of the victim's federal income tax returns or alimony order.

## Section 2: Adult Dependency Questionnaire

Claimant's Name: \_\_\_\_\_ Claimant's SSN: \_\_\_\_\_

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

Claimant's Relationship to Victim: \_\_\_\_\_

1. Were you living with the victim at the time of the incident? Yes  No
2. Were you financially dependent upon the victim at the time of the incident? Yes  No 
  - a. If yes, what percentage of the household income did the victim contribute? \_\_\_\_\_%
3. Did you or the victim file Income Tax Returns at least once during the three years prior to the crime?
   
Yes  No 
  - a. If yes, did you file jointly? Yes  No
4. What was the total monthly income at the time of the incident? \_\_\_\_\_
5. Were you working at the time of the incident? Yes  No 
  - a. If yes, did you lose wages as a result of the incident? Yes  No
6. Was the victim working at the time of the incident? Yes  No 
  - a. If yes, what was the victim's monthly income? \_\_\_\_\_

If you were not living with the victim at the time of the incident, describe how your income was impacted:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I declare under penalty of perjury that all the information I have provided is true, correct, and completed to the best of my knowledge and belief.

Signed:

Date:

Please return this form to: Violent Crime Compensation Board

P.O. Box 110230

Juneau, AK 99811-0230