

Extra page if needed...

3. Have you received any counseling or therapy as a result of this incident? (If yes, please describe the length of time you have been or expect to be undergoing counseling/therapy, the facility used, the type of treatment you have received, etc.)

4. Please state the expenses that have been incurred as a result of counseling, therapy or treatment.

5. Have you incurred any other expenses or losses as a result of this incident? If yes, please describe:
