

Mike O'Connell
Jefferson County Attorney

Restitution Division

600 W. Jefferson Street, Suite 2063
Louisville, Kentucky 40202
Phone: 502-574-6781 FAX: 502-574-5366
Email: CAOCS@louisvilleky.gov

RESTITUTION INQUIRY FORM

Please provide as much information as possible

DATE: _____

Name of Victim: _____

Current Address: _____

City: _____ State: _____ Zip: _____

Previous Address: _____

City: _____ State: _____ Zip: _____

Social Security #: _____ Date of Birth: _____

Driver's License #: _____

Current Phone #: _____ Cell #: _____

Name of Defendant/Offender _____

Case #: _____

Any other details you can provide: _____

**Please return this form by email, fax or mail to the above listed email/address/fax number.
You will be contacted upon our review of your information.**