



STATEMENT

| Complainant | | Witness | | Suspect | | Miranda | | X – all that apply | | |
|---|----------------|---------------------------|------------------|-------------|--|-------------|-------------------|--------------------|------------|--|
| Date | | | | Time | | | Place | | | |
| N A R R A T I V E | | | | | | | | | | |
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| | Name | | Signature | | | | Birth Date | | | |
| | Address | | | City | | | State | | Zip | |
| Phone # | | Offense/Incident # | | | | Page | | Of | | |