

ORLANDO POLICE DEPARTMENT

Case No: _____

Statement

Please fill out in full detail

Date of Statement:	Month:	Day:	Year:	Time:
Offense:				

Date of Offense:	Month	Day	Year	Time	Suspect (last, first, middle):
Location of Offense:					District:

Person Code:	Name (last, first, middle):			Age:	DOB:	Race:	Sex:
	Address Res.:			Zip:		Phone	
	Address Bus.:			Zip:		Phone	

Type of ID shown:	ID# if applicable:
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I, _____ do hereby voluntarily make the following statement without threat, coercion, offer of benefit, or favor by any persons whomsoever.

Sworn to and subscribed before me, this ____ day of _____, _____.

 Notary Public Law Enforcement Officer Name Key

Personally Known *Produced Identification* *Type* _____

I swear/affirm the above and/or attached statements are correct and true.

Signature: _____

My signature below means that I refuse to prosecute the person(s) named above for the alleged crime(s) that occurred to me or to the property under my control.

Signature _____ Date _____

(Departmental policy prohibits use of this section in domestic violence cases.)

Victim's Rights Booklet provided?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
I will testify in court and prosecute criminally.	Initials:	
Miranda Warning Read?	Page ____ of ____	
Yes <input type="checkbox"/> No <input type="checkbox"/>		