Stanwood Police Department

Case #_____

Statement Form

Statement of: Last Name: _____First: _____ Middle: _____

DOB: _____ Race: _____ Hispanic: Sex: _____ Hgt: _____ Wgt: _____ Eye: _____ Hair: _____

Home Address: _____ City: _____ Zip: _____

P. O. Box Number: _____ City: _____ Zip: _____

Employer: _____ City: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

E-mail Address:_____ Contact Phone: _____
(Established Family Member or Friend)

Place statement taken (City): _____ Date: _____ Time:

Statement:

I HAVE READ EACH PAGE OF THIS STATEMENT CONSISTING OF _____ PAGE(S).
I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE ENTIRE STATEMENT IS TRUE AND CORRECT. _____(initial)

Signature:_____ Deputy: _____#_____ 1 of ___

Stanwood Police Department

Case #_____

Statement Form

I HAVE READ EACH PAGE OF THIS STATEMENT CONSITING OF _____ PAGE(S)
I CERTIFY (OR DECLARE0 UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE ENTIRE STATEMENT IS TRUE AND CORRECT._____(INITIAL)

Signature:_____ Deputy: _____#_____

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PRINT FORM AND EMAIL, FAX, MAIL, OR DELIVER TO STANWOOD POLICE DEPARTMENT FAX: 360-629-2886 EMAIL: STANWOOD.POLICE@SNOCO.ORG
MAIL: PO BOX 127 STANWOOD WA 98292 ADDRESS: 8727 271ST ST NW STANWOOD WA 98292