County of Cameron		Statement Date:, 20_		
		Statement Time:	AM/PM	
Before me, the unc	dersigned authority, appeared		, who after	
being sworn on his	/her oath deposes and says:			
My name is		I am years of age. My	y date of birth is	
	I live at		,	
Zip Code	My home phone number is	and my w	ork phone	
number is	I can also be contact	ted at	•	
I HAVE BEEN INF	ORMED THAT UNDER TEXAS GOV	/ERNMENT CODE. SECTION	N 614.022 THAT	
	complaint to be considered by the			
	t must be in writing and signed by			
•		,	•	
In order to conduct	a complete and thorough investigation	on of your complaint, we nee	d you to answer	
the following quest	ions.			
PLEASE BE SPEC	<u>:IFIC</u>			
Date of Incident:	Time of Inciden	nt:AM/	'PM	
Location of Inciden	t (Address):			
Number of Police C	Officer(s) involved:			
List any names, ba	dge number, vehicle number and/or l	license plate number, and/or	provide any	
physical description	n(s) of the officer(s) involved:			
E				

	f witnesses involved: Provide any full names, addresses, and phone numbers.
IF THERE	ARE NO WITNESSES, PLEASE WRITE " <u>NONE</u> ."
Δ	
F	
Did you รเ	ustain any injuries? If yes, list type of injuries which were a result of the incident:
number of	ceive medical treatment? If yes, please provide the name, address and phone the doctor or hospital. ADDITIONALLY, PLEASE ATTACHED ANY MEDICAL RELEASE RMATION FORMS RELATED TO THIS INCIDENT.
	arrested? Were you issued any tickets?
•	the charges filed and/or citations issued and the disposition.
Ticket # _	
Dispositio	n:

Give a full, detailed description of the incident. PLEASE BE SPECIFIC

I have completed	_years of school and car	n read and write the	English language. I	have read this			
statement, and it is true and correct to the best of my knowledge. I have given this statement to							
	of the Harlingen Police Department						
Signature of person m	naking statement						
Subscribed and sworr	n to before me this	_day of	, 20				
Notary Public							