Case #		
Cascii		

Victim / Witness Statement

Name	ID/DL #	Date of Birth
Address (Home)		
Address (Work)		
Telephone: (Home) ()	(Work) (_)
E-mail:		
Date/ Time a.m. /	p.m. Location statement taken:	
I hereby authorize the Sunset Valley Police Departmedeemed as helpful or necessary. I give the following Also, I understand that at the time of this statement, I	information freely, without any promise of re	ves, to utilize the following information for whatever may be emuneration and without being under any form of duress. stemming from the incident described below.
-		
Signature		Date
Sworn to and subscribed before me	this day of	,
	Page of	

Peace Officer / Notary Public, Travis County, Texas

	Case #				
Statement of: (Name)		Dat	e	_/	_/
Signature	Date		_/	/_	
Witness		;	_/	/	

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