

KETCHIKAN POLICE DEPARTMENT

361 MAIN STREET, KETCHIKAN, AK 99901

PH: 907-225-6631 FX: 907-247-6631



CITIZEN'S STATEMENT

Statement of: _____, DOB: _____
(Print Your Name) *(Your date of birth)*

Cell Phone: _____ Home Phone: _____

Address: _____

Date & Time of Incident: _____ KPD Case Log # _____
(Completed by KPD)

Location of Incident: _____

Nature of Incident:

(Continue on the back of this sheet if additional space is needed)

I, _____ make the following signed statement to _____ who has been identified to me as an officer or employee of the Ketchikan Police Department. I have read the above and foregoing statement. I have been given the opportunity to make any corrections or changes that I might want to make (changes which I have made are initialed by me in my own handwriting). I now sign this statement in the presence of the above named representative to certify that the same is true and voluntarily made.

Signature: _____ Date: _____