

Hotchkiss Police Department

Statement Form



Current Date	Current Time			Case Report Number		
Name First, MI, Last				Date of Birth		
Home Address				Age	Sex	
Home City S			Zip	Home Phone or Cell		
Business Name			Your Occupation?			
Business Address						
Business City		State	Zip	Business	Business	
Do not write on the reverse side of the sheet, Ask for a "Continuation Sheet" Form.						
Your Signature	Receiving	Officers	Signature		Page 1 of	
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Hotchkiss Police Department, 276 W Main St. Hotchkiss, CO 81419 (970)872-3848



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## Continuation Statement Form

Your Name	Case Number					
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