



CASTLE ROCK POLICE DEPARTMENT PROPERTY THEFT/DAMAGE REPORT

NAME:		CASE #:	
ITEM:		QUANTITY:	VALUE:
BRAND:	MAKE:	MODEL:	
SERIAL #:	OAN:	COLOR(S):	
CALIBER (IF GUN):	OTHER IDENTIFYING INFORMATION OR MARKS?		
STATUS: STOLEN DAMAGED LOST RECOVERED			<i>Date Recovered:</i>
ITEM:		QUANTITY:	VALUE:
BRAND:	MAKE:	MODEL:	
SERIAL #:	OAN:	COLOR(S):	
CALIBER (IF GUN):	OTHER IDENTIFYING INFORMATION OR MARKS?		
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STATUS: STOLEN DAMAGED LOST RECOVERED			<i>Date Recovered:</i>

I THE UNDERSIGNED, HEREBY DECLARE THIS INFORMATION TO BE TRUE AND CORRECT; I DID NOT GIVE ANYONE PERMISSION TO TAKE OR USE THE DESCRIBED PROPERTY (EXCEPT AS DECLARED IN MY ATTACHED STATEMENT); I AM THE OWNER OR PERSON WHO IS LEGALLY IN POSSESSION OF THE DESCRIBED PROPERTY AND WILL TESTIFY IN COURT, UNDER OATH, TO THE FACTS HEREIN. I UNDERSTAND THAT I MAY BE CHARGED WITH VIOLATION OF RCW 9A.72.030, "PERJURY IN THE SECOND DEGREE" BY FILING A FALSE REPORT. IF I REGAIN POSSESSION OF THIS PROPERTY, I UNDERSTAND THAT I MUST NOTIFY THIS POLICE AGENCY IMMEDIATELY OF THE RECOVERY.

DATE	TIME	SIGNATURE
REPORT TAKEN BY	PERS. NO.	DATE