Case	Number			

Oelwein Police Department

Property Crimes Complaint Packet

In an effort to better serve you and our community; you have been given a Property Crimes Complaint Packet. It is important that you fill out the packet in its entirety and as accurately as possible.

Before the filing of Formal Criminal Charges, complete and accurate information is necessary. The attached Statement(s), Inventory of Property Loss, and other forms contained within are required to provide an accurate assessment of this case and in turn successfully prevail in any court process that might follow after the conclusion of the investigation.

NOTE: The Complainant or Witness Information Form must be attached for each witness that can offer relevant testimony in this matter. For more copies, photocopy any of the attached documents as required.

IMPORTANT:

Attach photocopies all related contracts, invoices, reports, documents or any other paperwork that may have a bearing on this matter. Include copies of any video or photographic evidence with your packet.

Take your time in completing the packets. Remember, when providing a statement it's important that it is in a chronological manner, as accuracy, completeness and legibility are far more important than speed. We are happy to type the statement for you if you would allow us to do so at the police department.

****WARNING*****Please be Advised: Giving a statement to law enforcement one knows is false, misleading, or that contains information that is not true is a crime.

Case Numbe	r

Complainant/victim Information

Name:	DOB:		Race:
Company Name of Applica	ble:		
Address:	City:	State:	ZIP:
Phone Number:	Cell Phone:	Email:	
	Witness Inform	<u>mation</u>	
1. Name:	DOB:		Race:
Address:	City:	State:	ZIP:
Phone Number:	Cell Phone:	Email:	
2. Name:	DOB:		Race:
Address:	City:	State:	ZIP:
Phone Number:	Cell Phone:	Email:	

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Suspect(s) Information Form

1. Name:	AKA:	Phone Number:	
		School (If Applicable):	
		Height: Weight:	
		Phone Number:	
		School (If Applicable):	
		Height: Weight:	
		Phone Number:	
		School (If Applicable):	
		Height: Weight:	

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Crime Reporting Information

Date/Time Occurred:	Date/time discovered:					
Location Occurred:	City:		State	Zip:		
Victim Name (if other than	Complainant or Busin	ess):				
Address:	City:	State: _	Zip:			
Phone:	Cell Phone:	Ema	il:			
	Crime	· -				
Criminal Mischief	(Circ	•	eft from unoc	cupied Vehicle)		
Burglary (Residential)		Theft				
Burglary (Business)	Motor Vehicle Theft					
Evidence or other Items follows:	s I am supplying to	the investigation	ng officer in	this case is as		
	(Circ	cle)				
Photographs			Receipts			
Video Evidence Proof of ownership			Monetary Es	stimate of repair		
Other Items:			Bank Record			
Signature:		Date: _				

Case Number			

Oelwein Police Department Voluntary Statement

Address:		City:	State:	
DOB:/_	SSN:		_ Phone #: ()	



Case Number			

Oelwein Police Department Voluntary Statement

Address:		City:	State:	
DOB:/	SSN:]	Phone #: ()	



Case N	umber		

Oelwein Police Department

Voluntary Statement

Address:	City:	State:	
DOB:/ SSN:	Phone #	: (

