

Complaint No. _____

Officer: _____

Date: _____

Badge No.: _____

Time: _____

Rio Police Department

Victim Statement of Non-Consent

Name: _____ Date of Birth: _____
(Print full first, middle initial, and last name)

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) _____ Work Phone: (____) _____

I am the _____ of _____
(Owner/Manager/Lessee/Tenant, Etc.) (Specify/describe property or name of business)

and I did **NOT** give consent to, nor would have I given consent if asked by, anyone to:

- Enter the above listed property
- Take possession of the above listed property
- Cause damage to the above listed property
- Harass me
- Cause bodily harm to me
- Sexually assault me
- Other (List) _____

This incident occurred at _____ a.m./p.m. on _____
(Time) (Date)

at _____
(Address) (City/Village/Town)

which is commonly known as _____
(Location name, if applicable)

Signature: _____
(Victim signature)