

ALVARADO POLICE DEPARTMENT
PROPERTY CRIME SUPPLEMENT

NAME: _____ CASE#: _____ DATE: _____

PROPERTY CRIMES:
Description of Property Damaged or Stolen: _____

Serial Number: _____ License Plate #: _____ State: _____
Color: _____ Year: _____ Make: _____ Model: _____ Other: _____

PROPERTY CRIMES:
Description of Property Damaged or Stolen: _____

Serial Number: _____ License Plate #: _____ State: _____
Color: _____ Year: _____ Make: _____ Model: _____ Other: _____

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Description of Property Damaged or Stolen: _____

Serial Number: _____ License Plate #: _____ State: _____
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Description of Property Damaged or Stolen: _____

Serial Number: _____ License Plate #: _____ State: _____
Color: _____ Year: _____ Make: _____ Model: _____ Other: _____

I affirm that all facts and statements contained herein are true and correct.

Signature of person making voluntary statement

Date