

Lakewood Animal Rescue and Enforcement 9401 Lakewood Drive SW Lakewood, WA 98499 (253) 830-5010

LAKEWOOD
DUPONT
STEILACOOM
OTHER:

STATEMENT

Complaint #	:	Sta	tement Date:
Date of Birth	n :	Phone #:	Message/Cell Phone:
Current Add	ress:		
City:			Zip Code:
The Officer	will give this stater	nent to anyone wh	o wants to complain about an animal problem.
Enforcement (Your statem	, as an aid to inves	tigation. All facts he basic who, what	give the following statement to Lakewood Animal Rescue and contained herein are true to the best of my knowledge and belief. t, where, when, why and how they relate to the witnessed incident ing this matter.)
		Attach a	dditional pages if necessary
I certify or d correct.	eclare under penalt	ty of perjury under	the laws of the State of Washington that the foregoing is true and
	Signature		Date



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Reporting Party/Witness Statement of	continued.	
I have read this statement. I find it t	rue and correct.	
Signature	Date	