Form may be completed on-screen or by hand. Print, sign and return completed form to:
Hartford Police Dept. 110 North Johnson St. Hartford, WI 53027

Statement of _____ Date of Birth _____/_____/_____

Address _____ Tel. No. (_____)_____-_____

City/State/Zip _____ Complaint Number [ ]

This statement is true and correct to the best of my knowledge. Witnessed by:

Signed: _____ _____ #_____

HPD-37 Date: ____/____/_____ at _____ hours

PRINT