PROBABLE CAUSE STATEMENT FOR JUDICIAL DETERMINATION

CHICAGO POLICE DEPARTMENT

DEFENDANT INFORMATION

I.R. NUMBER	DEFENDANT	DATE OF BIRTH	CHARGE(S)	STATUTE(S)

ARREST INFORMATION

ADDRESS OF ARREST | CITY | COUNTY | STATE

DATE OF ARREST | TIME OF ARREST | R.D. NUMBER | CB NUMBER

THE FACTS BRIEFLY STATED ARE AS FOLLOWS:

ASSISTANT STATE'S ATTORNEY NAME PRINTED OR TYPED

DATE / TIME CONTACTED

INVESTIGATING MEMBER'S NAME PRINTED OR TYPED

ADDRESS

PHONE NUMBER

BEING FIRST DULY SWORN, _____ ON OATH, DEPOSES AND SAYS THAT HE/SHE HAS READ THE FORGOING FACTS AND THAT THE FACTS ARE TRUE.

INVESTIGATING MEMBER'S SIGNATURE

SUBSCRIBED AND SWORN TO ME ON THIS _____ DAY OF _____, 20_____

JUDGE OR CLERK OF THE COURT