

SWORN AFFIDAVIT FOR LOG NUMBER INVESTIGATION (ELECTRONICALLY RECORDED STATEMENT)
CHICAGO POLICE DEPARTMENT

STATE OF ILLINOIS)
) CC
COUNTY OF COOK)

Location of Incident	Date	Time
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Summary of Statement(s):

I, _____ hereby state as follows:

1. I provided an electronically recorded statement.
2. Under penalties as provided by law pursuant to 735 ILCS 5/1-109, I certify that the information set forth in the statement(s) above and/or attached summary are true and correct, except as to any matters therein stated to be on information and belief as to such matters, I certify as aforesaid that I verily believe the same to be true.

Print Affiant's Name

Print Witness' Name

Affiant's Signature

Witness' Signature

Date

Date

INVESTIGATOR USE ONLY

COMPLETE THIS SECTION ONLY WHEN THE SWORN AFFIDAVIT HAS NOT BEEN SIGNED.

A Sworn Affidavit has not been signed for this investigation under the following circumstances:

NO AFFIDAVIT
- NO CONTACT

NO AFFIDAVIT
- REFUSED

NO AFFIDAVIT
- NO COOPERATION

NO AFFIDAVIT
REQUIRED

DECLARACIÓN JURADA DEL REGISTRO DE QUEJA (DECLARACIÓN ELECTRÓNICAMENTE GRABADA)
 Departamento de Policía de Chicago

Estado de Illinois)
 Condado de Cook) cc

Dirección del Declarante	Fecha	Tiempo
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Resumen de Declaraciones:

Yo, _____ por este medio indico lo siguiente:

1. He proporcionado una declaración electrónicamente grabada.
2. Bajo penas proporcionados como conforme a la ley 735 ILCS 5/1-109, certifico que la información en mi declaración son verdaderas y correctas, excepto en cuanto a cualquier asunto donde indicé ser información y creencia cuanto a tales asuntos, como previamente mencionado, yo certifico que creo lo mismo ser verdad.

Nombre del Declarante Deletreado

Nombre de Testigo Deletreado

Firma de Declarante

Firma de Testigo

Fecha

Fecha

INVESTIGATOR USE ONLY

COMPLETE THIS SECTION ONLY WHEN THE SWORN AFFIDAVIT HAS NOT BEEN SIGNED.

A Sworn Affidavit has not been signed for this investigation under the following circumstances:

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> NO AFFIDAVIT
- NO CONTACT | <input type="checkbox"/> NO AFFIDAVIT
- REFUSED | <input type="checkbox"/> NO AFFIDAVIT
- NO COOPERATION | <input type="checkbox"/> NO AFFIDAVIT
REQUIRED |
|---|--|---|---|