TOWN OF LEEDS
218 NORTH MAIN STREET
PO BOX 460879
LEEDS, UT 84746-0879
PHONE: 435-879-2447 FAX: 435-879-6905
E-mail: leedstownhall@beyondbb.com // Website: www.leedsutah.org

LEEDS POLICE DEPARTMENT
COMPLAINT FORM

VOLUNTARY STATEMENT OF FACTS

Name: _____ Birth Date: _____ Age: _____

Phone: Home _____ Work _____ Cell _____

Address: _____

Driver's License # _____ State _____

Sex: Male _____ Female _____ Race _____

Employer/Address: _____

Read Carefully: Pursuant to Section 76-8-504.5, you are notified that the statement you are about to make maybe presented to a magistrate or Judge in lieu of your sworn testimony at a preliminary examination. Any false statement you make and that you do not believe to be true may subject you to criminal punishment as a Class A Misdemeanor.

Statement – attach additional pages if needed:

_____

_____

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_____

_____

_____

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_____ _____

Signature of person giving statement Date

_____ _____

Witness Signature Date