

Phone: (918) 396-2424
Fax: (918) 396-3477

www.cityofskiatook.com



Skiatook Police Department

220 S. Broadway St. • Skiatook, Oklahoma • 74070

Name:	Age:	DOB:
Address:		
Home Phone:	Cell Phone:	

I, _____, being duly sworn upon oath, make the following statement voluntarily, of my own free will, knowing that such statement if not true and correct could later be used against me in any court of law, and I declare that this statement is made without any threat, coercion, offer of benefit, favor or offer of favor, by any person whatsoever.

Name of accused:
Date and time of alleged incident:
Location of incident:

Signature of Complainant

Date

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CONTINUATION

please describe in detail the nature of complaint, giving specific details, including witness information if any:

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CONTINUATION

I will/will not (circle one) voluntarily agree, of my own free will, to submit to a polygraph examination to prove the truthfulness of my complaint. I swear this statement is true and I am aware if I make a false and/or deceptive statement I may be subject to a fine, imprisonment, or a civil law suit.

Signature of Complainant

Date