



Rene King, Sheriff
 115 West A Street
 Shoshone, ID 83352

Lincoln County Sheriff's Office

Kammeron Hairston, Chief Deputy
 Office (208) 886-2250
 Fax (208) 886-2851
<http://lincolncountyid.us/>

Deputy Name & Badge Number: _____

Case Number: _____

Date: _____ Time: _____ AM PM Type of Incident: _____

Name: _____ DOB: _____

Telephone: Main: _____ Best time: _____ Other: _____

Home Address: _____

Mailing Address (If Different): _____

Incident Location(If Different): _____

Please describe to the best of your ability what you saw, heard, or know of this incident in full detail:

I am of sound mind and am not under the influence of Alcohol and or Drugs. I am making my statement to a Lincoln County Sheriff's Deputy. I have been advised of and understand my rights. I am willing to make a statement and answer questions without a lawyer present. No promises or threats have been made to me and no pressure or coercion of any kind has been used against me for my statement. Please use back or more pages if necessary.

Please use the back or more pages if necessary

Page ____ of ____ pages. Date: _____ Signature: _____

I have read this statement and the facts contained therein are true and correct to the best of my knowledge.

