



# Mauston Police Department

## Lack of Consent Form



<b>Location &amp; Time</b>	Case #	Date & Time of Occurrence:	
	Incident Address:		
<b>Victim Information</b>	Name:	DOB:	Phone #:
	Address:		

**Bodily Harm** Lack of Consent      **OR**       **Property** Lack of Consent

I, \_\_\_\_\_, was  Punched     Hit     Kicked     Clubbed

Other: \_\_\_\_\_

By: \_\_\_\_\_, of \_\_\_\_\_

Without my consent, and did receive  Pain     Injury     Physical Impairment     Illness as follows:

\_\_\_\_\_

<b>Witness Information</b>	Name:	DOB:
	Address:	Phone #:
	Name:	DOB:
	Address:	Phone #:

The victim states that they are/were the person in lawful possession of the following property or building and that such property was stolen and/or damaged without their consent. The value of said property and/or the cost of repairing damage to said property is approximated at \$ \_\_\_\_\_

Article	Brand	Model	Serial #	S-Stolen D-Damaged	Qty	Value	Date Recovered	Description: Color, Size, ID Marks
TV	Sony	G-361	AB Z-123-45-67-890	S	1	\$225.00		21" TV with black plastic housing and a missing on/off button on front.

Continued on Reverse

Insurance Company Name: \_\_\_\_\_ Contact #: \_\_\_\_\_

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Victim Signature: \_\_\_\_\_ Officer Signature: \_\_\_\_\_

