

## MILFORD POLICE DEPARTMENT

430 Boston Post Road  
Milford, CT 06460  
203-878-6551

### LOST or STOLEN CELL PHONE REPORT FORM

Case Number	Date of Report	Time of Report
Date Lost/Stolen	Time Lost/Stolen	Location Lost or Stolen

The complainant should complete the Information Section with as much detail as possible.

Do not sign this form until it is reviewed by the Desk Officer

Information Section			
The Cell phone was: <input type="checkbox"/> <b>Lost</b> or <input type="checkbox"/> <b>Stolen</b> (check the appropriate box)			
<b>Complainant Information:</b>			
Name: Last Name, First Name, MI		Date of Birth	Sex
Address		Town	State
Zip		Home Phone	
<b>Cell Phone Information:</b>			
Make	Model	Serial #	
Cell Service Provider	Cell Phone Number	Value (\$)	
<p>I have completed and read (or had read to me) the above statement and it is true to the best of my knowledge. I fully understand that if I make a statement which is untrue and which is intended to mislead a law enforcement official in the performance of their official function, I will be in violation of Section 53a-157 of the Connecticut General Statutes. A false statement is a Class - A Misdemeanor</p>			
_____ Complainant's Signature			
Subscribed and sworn to me this _____ day of _____, 20_____			
_____ Police Officer/Notary Public			
<b>Official use Only: Do not write below this line</b>			

OCA#	Message #	Reviewing Sergeant
Officer Taking Complaint	Badge #	Entered by Steno

Revised 7/13/05