



State of Utah Department of Public Safety Bail Enforcement Complaint Form Voluntary Statement



COMPLAINANT INFORMATION:

NAME _____ HOME PHONE _____ WORK PHONE _____
(Last) (First) (Middle)

ADDRESS _____
(Street) (City) (State) (Zip Code)

BAIL ENFORCEMENT AGENCY COMPLAINED AGAINST:

AGENCY NAME _____ PHONE # _____

ADDRESS _____
(Street) (City) (State) (Zip Code)

BAIL ENFORCEMENT NAME _____
(Last) (First) (Middle)

BAIL ENFORCEMENT LICENSE NUMBER (if known) _____ PHONE # _____

EXPLAIN IN DETAIL THE COMPLAINT:

Pursuant to Utah Code Ann. §76-8-504.5: You are notified that statements you are about to make in the document may be presented to a magistrate or a judge in lieu of your sworn testimony at a preliminary hearing examination. Any false statements you make and that you do not believe to be true may subject you to criminal punishment as a class A misdemeanor.

I _____ declare this statement which consists of _____ page (s) is true and correct to the best of my knowledge. I have read the content and initialed all corrections.

SIGNATURE _____ DATE _____ Page 1 of _____

