CS Number_		_
	(DPD Use Only)	

Dallas Police Department Embezzlement Squad 1400 S. Lamar Street 4th Floor Dallas, TX 75215

Embezzlement Complaint Form

(PLEASE TYPE OR PRINT)

Additional Witnesses				
Witness				
Name:				
Race/Sex:		Date of Birth:	Phone:	
Residence Address:				
City:		State:	ZIP Code:	
Title/Position:	E-mail Ad	dress:		
Witness				
Name:				
Race/Sex:		Date of Birth:	Phone:	
Residence Address:				
City:		State:	ZIP Code:	
Title/Position:	E-mail Address:			
Witness				
Name:				
Race/Sex:		Date of Birth:	Phone:	
Residence Address:				
City:		State:	ZIP Code:	
Title/Position:	E-mail Address:			
Witness				
Name:				
Race/Sex:		Date of Birth:	Phone:	
Residence Address:				
City:		State:	ZIP Code:	
Title/Position:	E-mail Address:			
Witness				
Name:				
Race/Sex:		Date of Birth:	Phone:	
Residence Address:				
City:		State:	ZIP Code:	
Title/Position:	E-mail Address:			