PENDLETON POLICE DEPARTMENT

Pendleton, Oregon

CASE NUMBER _____

STATEMENT OF _____ PAGE _____of _____

ADDRESS _____ DATE_____

CITY _____ STATE _____ LOCATION _____

I, _____ HEREBY MAKE THE FOLLOWING STATEMENT TO:

_____ AND _____ A POLICE OFFICER OF PENDLETON, OR.

(MIRANDA WARNING)

1. YOU HAVE THE RIGHT TO REMAIN SILENT. 2. ANYTHING YOU SAY CAN AND WILL BE USED AGAINST YOU IN A COURT OF LAW. 3. YOU HAVE THE RIGHT TO TALK TO A LAWYER AND HAVE HIM/HER PRESENT WHILE YOU ARE BEING QUESTIONED. 4. IF YOU CANNOT AFFORD TO HIRE A LAWYER, ONE WILL BE APPOINTED TO REPRESENT YOU BEFORE ANY QUESTIONING, IF YOU WISH ONE.

(WAIVER)

1. DO YOU UNDERSTAND EACH OF THESE RIGHTS I HAVE EXPLAINED TO YOU? 2. HAVING THESE RIGHTS IN MIND, DO YOU WISH TO TALK TO US NOW?

SIGNATURE _____

WITNESS _____ SIGNATURE _____

WITNESS _____ SIGNATURE _____

Pendleton Police Department, 109 SW Court Avenue, Pendleton, OR 97801
(541) 276-4411/FAX (541) 276-9108