

# Theft Event Initial Statement Sample

## Personal Information

Full Name

Enter your name

Contact Number

Enter contact number

Address

Enter your address

Date of Report

## Incident Details

Date & Time of Theft

Location of Incident

Specify the location

Description of Incident

Provide a brief narrative of the theft event

Items Stolen

List stolen items

## Additional Information

Did you witness the theft?

Yes/No

Were there any other witnesses?

Provide names or details if any

Suspect Description (if known)

Provide details

Signature: \_\_\_\_\_ Date: \_\_\_\_\_