

**Gillette Police Department
Gas Drive Off Self-Reporting Form
(No Suspect Available)**

Department Use Only
IR# _____
Date: _____

Actual Street Address: _____

Business Name: _____

Pump #: _____

Fuel Amount: _____

Value: _____

Person Reporting: _____

Date of Birth: _____

Address: _____

Phone: **Home:** _____ **Work:** _____

Vehicle Make (if known): _____

Vehicle Color (if known): _____

License Plate (if known): _____

Suspect Description:

Narrative (Explain what happened):

I hereby affirm that the above information listed above is a true and accurate account of this incident. I understand that False Reporting to Authorities is a crime as provided by Wyoming Statute 6-5-210, and can carry a penalty of not more than 8 months imprisonment, a fine of not more that \$750.00, or both.

Signature