

TRESPASS ADMONISHMENT

Incident #: _____

Langley Police Department

Post Office Box 366

Langley, WA 98260 (360) 221-4433

Date: _____

Complainant

Name (Last/First/MI): _____ Alias: _____ Sex: M F

Address: _____ City: _____ State: _____ Zip: _____

Birthdate: _____ Phone: _____ Cell: _____

Subject Being Trespassed

Name (Last/First/MI): _____ Alias: _____ Sex: M F

Address: _____ City: _____ State: _____ Zip: _____

Birthdate: _____ OLN: _____ STATE: _____

Location Subject Trespassed from: _____
Name of location and street address

This action Authorized by: _____ / _____
Print Name Signature

- I further understand that I am not allowed to enter or remain on the premise(s) listed above for a period of _____, effective immediately.
- **RETURNING TO THE LISTED LOCATION IN VIOLATION OF THIS WRITTEN ORDER WILL RESULT IN THE PROSECUTION FOR CRIMINAL TRESPASS PURSUANT TO RCW 9A.52.070.**
- I have read, or have had read to me, the above criminal trespass warning and I understand that I am subject to arrest for CRIMINAL TRESPASS if found entering or remaining at the above location(s).
- **Refusal to sign this warning does not relieve me from criminal prosecution should I ignore this warning.**

Subject's Signature: _____ Refused: _____ Date / Time: _____

Witness: _____ Title: _____

Spillman involvement entered? Yes No If yes, date entered: _____

Officer's Signature/ Personnel #: _____ Date: _____