

AFFIDAVIT

CAME UNTO me this day, , a person known to me and upon his oath swears as follows:

I.

My name is , and I have personal knowledge of the facts asserted below, and am competent to testify to those facts.

Affiant, , is a person over the age of 21, and is currently employed as a peace officer with the , MEDINA County, Texas.

II.

I have custody of, and acknowledge that, I have seized the property listed hereto and incorporated herein for all purposes.

III.

REASONS AND CIRCUMSTANCES OF SEIZURE

\_\_\_\_\_  
AFFIANT

SWORN TO AND SUBSCRIBED before me on the            day of choose month, 20    .

\_\_\_\_\_  
Notary Public, State of Texas

**EXHIBIT "A"**  
**SEIZURE WORK SHEET**

**AGENCY:**

**AGENCY CASE NUMBER:**

**OFFENSE:**

**DATE OFFENSE COMMITTED:**

**COUNTY WHERE OFFENSE OCCURRED: Medina**

**NAME OF CASE OFFICER WHO WORKED CASE AND WHO CAN TESTIFY IN COURT:**

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**A. NAMES & ADDRESS FOR ALL DEFENDANTS ARRESTED AND/OR INVOLVED IN THIS OFFENSE:**

- 1. DEFENDANT:  
DATE OF BIRTH:  
ADDRESS:
  
- 2. DEFENDANT:  
DATE OF BIRTH:  
ADDRESS:
  
- 3. DEFENDANT:  
DATE OF BIRTH:  
ADDRESS:
  
- 4. DEFENDANT:  
DATE OF BIRTH:  
ADDRESS:

**B. NAMES OF DEFENDANTS IN CUSTODY AS OF THIS DATE:**

C. NAMES & ADDRESS FOR ALL OTHER PERSONS:

1. PERSON:  
DATE OF BIRTH:  
ADDRESS:

2. PERSON:  
DATE OF BIRTH:  
ADDRESS:

VEHICLES SEIZED:

A. MAKE & YEAR OF VEHICLE: ,

- 1. VEHICLE IDENTIFICATION NUMBER:
- 2. LICENSE PLATE NUMBER:
- 3. NAME OF DRIVER:
- 4. ADDRESS OF DRIVER:
- 5. NAME OF OWNER:
- 6. ADDRESS OF OWNER:
- 7. AMOUNT OF LIEN ON VEHICLE: \$0.00
- 8. LIEN HOLDER:
- 9. ADDRESS OF LIEN HOLDER:
- 10. DRIVER IN CUSTODY:

B. MAKE & YEAR OF VEHICLE: ,

- 11. VEHICLE IDENTIFICATION NUMBER:
- 12. LICENSE PLATE NUMBER:
- 13. NAME OF DRIVER:
- 14. ADDRESS OF DRIVER:
- 15. NAME OF OWNER:
- 16. ADDRESS OF OWNER:
- 17. AMOUNT OF LIEN ON VEHICLE: \$0.00
- 18. LIEN HOLDER:
- 19. ADDRESS OF LIEN HOLDER:
- 20. DRIVER IN CUSTODY:

PROPERTY SEIZED:

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| 1.  | 11. |
| 2.  | 12. |
| 3.  | 13. |
| 4.  | 14. |
| 5.  | 15. |
| 6.  | 16. |
| 7.  | 17. |
| 8.  | 18. |
| 9.  | 19. |
| 10. | 20. |

DATE & TIME THIS WORK SHEET WAS SUBMITTED TO THE 38<sup>TH</sup> JUDICIAL DISTRICT ATTORNEY:

\_\_\_\_\_                      \_\_\_\_\_  
Date                                      Time

SUBMITTED BY: \_\_\_\_\_

SIGNATURE OF PERSON RECEIVING THIS WORK SHEET FOR THE 38<sup>TH</sup> JUDICIAL DISTRICT ATTORNEY'S OFFICE:

\_\_\_\_\_

APPROVED BY: \_\_\_\_\_                      DATE: \_\_\_\_\_

PLEASE TYPE THIS FORM AND RETURN TO THE 38<sup>TH</sup> JUDICIAL DISTRICT ATTORNEY'S OFFICE THE DAY THE OFFENSE OCCURRED OR THE DATE AFTER THE OFFENSE OCCURRED. ALSO, PLEASE SUBMIT CRIMINAL HISTORIES FOR EACH DEFENDANT ARRESTED IN THIS CASE.