

VERIFICATION

I, _____ verify that the statements made in the foregoing Answer are true and correct. I understand that false statements herein are made subject to the penalties of 18 PA C.S. Section 4904, relating to unsworn falsification to authorities.

DATE: _____

Officer Investigating Complaint _____

Disposition Date: _____ Founded Unfounded

Action Taken: _____

Signature of Investigating Officer

Date