## Power of attorney form

✓ I have been charged and/or detained.																			RETST		3	STER		
Date of t	he incident		/		-	2	0	2											•	ÆLP	TIL	KIN		
Place of	the incident																							
□ court. □ If I was adr	be charged ministratively urt, cf. chapto	/ detai	nec	d (ad	miı	nist	trat	tivt 1	frih	eds	sbe	rø∨∈	t), I	war	nt t	he								
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☐ Request and	police on m	ny beh ess to	alf t	to ful	lfill owi	the	e al	bov forn	nati	on	ab					· · ·	L							
☐ charges	<b>nformation:</b> s against me e charges ar	e. <b>3)</b> W	'het	her I	I ha													r						
□ make bindir □ Submit com	yers on my lang agreeme applaints again ag	nts. nst the	e po	olice	on	ı m	y b	eha	lf ir	n re	elati	ion t	o th	ne in	cid	by	t ar	ritir			ett	ers!		
Full name:																								
Address:																								
CPR number:			,	-																				
Signature:			•	•			•															_		
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Phone number:																								
Email:																								