

# City of Helena, Montana

## Barking Dog Log

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Complainant's Full Name

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Complainant's Address

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Address of Barking Dog

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Description of Dog (breed, color, size)

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Date	Time Barking Started	Time Barking Ended	During this time, did dog ever stop barking for 1 full minute?	Did you personally see the dog while it was barking?
			Y/N	Y/N
			Y/N	Y/N
			Y/N	Y/N
			Y/N	Y/N
			Y/N	Y/N
			Y/N	Y/N
			Y/N	Y/N
			Y/N	Y/N
			Y/N	Y/N
			Y/N	Y/N
			Y/N	Y/N
			Y/N	Y/N
			Y/N	Y/N
			Y/N	Y/N
			Y/N	Y/N

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I hereby certify the above facts are true and correct. (Knowingly providing false information is an offense punishable under § 45-7-205, MCA.

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Complainant's Signature

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Date

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CFS or DR #