**Sample Consent to Draw Blood**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby grant my consent to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, a peace officer, and his/her agents to draw blood from my person.

I understand that I have the right to refuse to consent to the blood draw described above.

I further state that no promises, threats, force, or physical or mental coercion of any kind whatsoever have been used against me to get me to consent to the draw of the items described above or to sign this form.

Date: \_\_\_\_\_\_\_

Time: \_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Person Consenting

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Witness