

# Voluntary Statement Form

Statement of: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Last First MI Month / Day / Year

Address: \_\_\_\_\_ Home Phone: (\_\_\_\_)\_\_\_\_-\_\_\_\_\_  
Street  
\_\_\_\_\_ Cell Phone: (\_\_\_\_)\_\_\_\_-\_\_\_\_\_  
City State Zip Code

Date of Incident: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Time of Incident: \_\_\_\_\_:\_\_\_\_\_ AM PM  
Month/ Day / Year Hr : Min Circle One

Location of Incident: \_\_\_\_\_

Suspect / Offender: \_\_\_\_\_ Victim: \_\_\_\_\_  
If Known If Known

I understand that I am not under arrest, nor am I being detained for any criminal offenses concerning the events I am about to make known to the Officer. I understand that I may leave at any time I wish and that I am under no obligation to make any statements of any kind. I certify that this statement is made of my own free will and that no threats or promises have been made to induce or coerce such statements. I understand that this statement may be used as evidence in criminal proceedings. I have read each page of this statement consisting of \_\_\_\_\_ page(s), each page of which bears my signature, and corrections, if any, bear my initials, and I certify that the facts contained herein are true and correct.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

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Officer Collecting Statement: \_\_\_\_\_