W.P.P.D. Voluntary Statement Incident #_____

Date: _____ Place: _____ Time Started _____am/pm

I, the undersigned _____, am _____ years of age, the date and place of birth

being the _____ day of _____,19_____, at _____.

I now live at _____.
Address City State Zip

My social security number is _____-_____-_____. My telephone number is (_____) _____-_____.

I declare the following voluntary statement is made of my own free will without the promise of hope or reward, without fear or threat of physical harm, without coercion, favor or offer of favor, without leniency or offer of leniency by any person or persons whomsoever.

I have read each page of this statement consisting of _____ page(s), each page of which bears my signature. I further certify that the facts contained in this statement are true and correct and I was not told or prompted as to what to say.

This statement was completed on the_____ day of _____, 20_____ at _____am/pm.

_____
Witness

_____
Signature of person giving statement

_____
Witness