Firestone Police Department

Case#_____

Voluntary Statement

Page ___ of ____

Name Last, First, Middle Initial						Person Making Statement Reporting Party( ) Victim( ) Witness( ) Other( )
Height	Weight	Hair	Eyes	Date of Birth	SS Number	Driver License Number

Residence Street Address	City	State	Zip Code	Telephone Number (Home) (Cell)
Business Street Address	City	State	Zip Code	Telephone Number

Officer Taking Statement	Badge Number	Date	Time

Concerning an Incident Occurring at:	Location Where Statement Was Taken:

Summary of Statement: _____

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I have read the foregoing statement and the facts contained therein are true to the best of my knowledge and belief.

Date: _____ Time: _____A.M ( ) P.M ( )

Signature of Person Making Statement: _____

I have read the foregoing statement and the facts contained therein are true and to the best of my knowledge and belief.

Date: _____ Time: _____A.M( )P.M.( )

Signature of Person Making Statement:_____