

Page Number _____

STATEMENT

I, _____
 NAME DATE OF BIRTH POSITION / GRADE

ADDRESS: STREET CITY STATE ZIP CODE

 (AREA) HOME TELEPHONE (AREA) CELL PHONE DATE

having been advised that I need not make this statement, declare that the following statement is given freely and voluntarily, without promise to benefit or threat, or use of force or duress, do proceed to state as follows:

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 to the best of my knowledge.

Signature of person giving statement

 Signature of person witnessing statement