DATE:_____ OFFICER: _____

TIME:_____ CASE NUMBER: _____

(Date & Time you are completing this form)

VOLUNTARY STATEMENT

WRITTEN STATEMENT: Please write your account of the incident; including the Date and Time it occurred and all relevant details. **Also, please complete the bottom of this form with your personal information.**

The information I have written in this statement is true and correct to the best of my knowledge. I understand that giving a false statement may result in criminal charges under Kansas State Law (KSA 21-5904 / UPOC 7.2 – *Interference with Law Enforcement)*.

_____ _____

Signature of Person giving Voluntary Statement Witness

PLEASE PRINT THE FOLLOWING INFORMATION

Last Name: _____ First: _____ Middle: _____

Address: _____ City: _____ State: _____ ZIP Code: _____

Phone: _____ Email: _____ Date of Birth: _____

Driver's License No: _____ State: _____ S.S.N.: _____

Height: _____ Weight: _____ Hair: _____ Eyes: _____ Sex: _____

Place of Employment: _____ Address: _____ Phone: _____