Holmen Police Department

Voluntary Statement

Date _____ Time Started _____ M Case No. _____

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I have read this statement consisting of _____ pages, and I certify that the facts contained therein are true and correct. I also declare that I was not told or prompted what to say in this statement.

_____
Signature of Person Giving Statement.

Witness _____

_____
Date of Birth Phone

Witness _____

_____
Address

Page _____ Time statement completed _____ M