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VOLUNTARY STATEMENT

DATE:	TIME:	PHONE #:
NAME:		
DATE OF BIRTH	- (DD/MM/YYYY):	
	_	
corrections, if any, bear certify that I made no re nor at any time was I tol	my initials, and I certify that the equest for the advice or presence of dor prompted what to say in this s	_ pages. Each page of which bears my signature, and facts contained herein are true and correct. I further f a lawyer before or during any part of this statement, statement. day of, year
WARNING False makes a false statement	statements made on this form a con this form or in the reporting of to \$2,500.00 or by both a fine	re punishable under the penalty of perjury. Whoever the incident shall be punished by imprisonment for up and imprisonment. Subsequent false reports require
Witness (Print):	Of	ficer (Print):
Witness Signature:	Of	ficer Signature:



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This statement of pages has been read by memory own statement, which is true to the best of my	e and I understand it all. I sign it of my own free will as memory.
	Signature
	· ·
	Print