Case #: _____

Lake Quivira Police Department
10 Crescent Blvd
Lake Quivira, Kansas 66217

P. _____ of _____

Voluntary Statement

Completed by Officer:		
Statement Date:	Time:	Location:

Completed by Person Giving Statement:							
Name:							
Address:			City, State, & Zip:				
DOB:	Age:	Race:	Sex:	Hair:	Eyes:	Hgt:	Wgt:
Employer:							
Employer Address:			Employer City, State, & Zip:				
Phone (Home):	Phone (Cell):			Phone (Work):			
Driver's License (DL) #:	DL State:	Email:					

I freely volunteer the following information:

_____

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_____

_____

_____ Signature of Person Giving Statement

_____ Signature of Officer Taking Statement

_____ Printed Name of Person Giving Statement

_____ Printed Name of Officer Taking Statement

Case #: _____

Voluntary Statement (cont.)

P. _____ of _____

Signature of Person Giving Statement

Signature of Officer Taking Statement

Printed Name of Person Giving Statement

Printed Name of Officer Taking Statement