North Liberty Police Department

340 N Main St•PO Box 77•North Liberty, Iowa•52317•(319) 626-5724/Fax: 5724

Voluntary Statement

Case #: _____

Person Giving Statement: _____

Address: _____ City: _____ State/Zip: _____

Home Phone: _____ Cell Phone: _____ DL#: _____

Email Address: _____

Employed By: _____ Work Phone: _____

Person Taking Statement: _____

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Statement Completed on _____ Day of _____, 20 _____ at _____ (AM/PM)

Witness: _____ X _____

(Print) (Signature)

North Liberty Police Department

340 N Main St•PO Box 77•North Liberty, Iowa•52317•(319) 626-5724/Fax: 5724

Voluntary Statement Continued

Case #: _____

Person Giving Statement: _____

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X_____

(Signature)

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