**MINOCQUA POLICE DEPARTMENT**
WRITTEN STATEMENT

INCIDENT # _____

DATE & TIME OF STATEMENT _____ / _____ / _____ AT _____ A.M./P.M.

I,_____, Age_____, Sex_____, Date of Birth_____,

residing at _____,

phone ( ) _____ do hereby give the following statement to

_____, of the Minocqua Police Department. I have been

informed by_____, and clearly understand that I am not required

to give any statements except freely and voluntarily. Knowing this, I give the following

statement:

_____

_____

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_____

_____

The above statement is true and correct to the best of my knowledge. Any erasures, strikeouts, additions or corrections have been initialed by me.

_____
Signature (Full name including middle)

Witnesses:_____, Time:_____, Date:_____

_____, Time:_____, Date:_____

MINOCQUA POLICE DEPARTMENT
WRITTEN STATEMENT
(Additional page(s))

Incident #_____

Page_____

Date: _____

Time: _____

The above statement is true and correct to the best of my knowledge. Any erasures, strikeouts, additions or corrections have been initialed by me.

_____
Signature (Full name including middle)

Witnesses:_____, Time:_____, Date: _____

_____, Time:_____, Date: _____