

# Cedarburg Police Department

W75 N444 Wauwatosa Road  
Cedarburg, WI 53012  
262-375-7620

Page No. \_\_\_\_\_

## Voluntary Statement

Refer to Complaint No. \_\_\_\_\_

Date: \_\_\_\_\_, 20\_\_\_\_ I, \_\_\_\_\_, the undersigned, am \_\_\_\_\_ years of age and  
(First Name, Middle Initial, Last Name)  
 was born on \_\_\_\_\_ . I now live at \_\_\_\_\_  
(Date of Birth) (Street Address)  
(City, State, Zip Code) Phone Number \_\_\_\_\_

The following voluntary statement is of my own free will without any promises:

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I have read this statement. The facts contained therein are true and correct to the best of my knowledge. I was not told or prompted what to say in this statement.

This statement was completed at \_\_\_\_\_ AM/PM on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
(circle one)

This statement was made by \_\_\_\_\_  
(Signature of person giving voluntary statement)

Witnessed by: \_\_\_\_\_

Witnessed by: \_\_\_\_\_