

WRIGHT COUNTY SHERIFF'S DEPARTMENT

VOLUNTARY STATEMENT

Date: _____ **Time:** _____ **Place:** _____

I, _____ **Date of Birth:** _____ **Social Security Number:** _____

Home Phone: (_____) _____ - _____ **Physical Address:** _____

Do hereby make the following statement to _____ of the Wright County Sheriff's Department, knowing that I may have an attorney present and that I do not have to make any statement nor incriminate myself in any manner. I make this statement voluntarily, of my own free will, knowing that such statement could be later used against me in any court of law and I declare this statement is made without threat, coercion, offer of benefit in court, leniency or offer of leniency by any person whatsoever.

Multiple horizontal lines for writing the statement.

Signature of person giving voluntary statement _____ Date _____ Witness _____ Date _____

