Lena Police Department

117 East Main Street, Lena, WI 54139-9486 Emergency 9-1-1 • Non-Emergency (920) 829-5950 • FAX (920) 829-5746

Voluntary Statement

Complaint Number

Date and time of this statement				_		
(First Name)						
(First Name)	(M. I.)	(Last Name)	(Gender)	(Date of Birth)	(Age)	
Residing at						
	(Full address, City, Sta	ate, Zip Code)	(I	(E-mail address)		
Telephones	(Home)					
	(Home)	(Work)		(Cell)		
I understa	and that I do not have and voluntarily. All info	to Lena Police Departmer to give any statement tha ormation is true and corre	t will incriminate me	and that I am m		
On		at approximately				
(Ir	ncident Date)	, at approximately	(Incident Time)			
	(Signature)		(Wi	tness)		