

SALEM POLICE DEPARTMENT VOLUNTARY STATEMENT

INCIDENT NO. _____

Name of person giving statement _____ Age ____ DOB _____

Address _____ Phone _____

Occupation _____ Employer or Business _____

Business Address _____ Phone _____

I understand that I am not under arrest for, nor am I being detained for any criminal offenses concerning the events I am about to make known to the Salem Police Department. Without being accused of or questioned about any criminal offenses regarding the facts I am about to state, I volunteer the following information of my own free will for whatever purpose it may serve.

I further understand that I may be required to testify in court to the information which I am about to state.

If this statement is made with the intention of filing a criminal or traffic complaint against an individual or individuals, I understand that it will be reviewed by the Salem Police Department to determine if a crime has been committed. If it is the determination of the Salem Police Department that no crime has occurred or that there is insufficient evidence to prosecute, this statement will only be retained in Salem Police Department files. It will not be forwarded for prosecution.

I have read each page of this statement consisting of page(s), each page of which bears my signature, and corrections, if any, bear my initials, and I certify that the fact contained herein are true and correct.

Dated at _____, this ____ day of _____

Witness: _____

Signature of person giving statement

(Please **DO NOT EMAIL THIS FORM**. Please print the completed statement form, sign in the signature field, and deliver the original statement to the investigating officer responsible for the case.)

***SALEM POLICE DEPARTMENT
VOLUNTARY STATEMENT
(CONTINUED)***

INCIDENT NO. _____

Date _____

STATEMENT OF: _____

Signature of Person giving Statement