PAXTON POLICE DEPARTMENT VOLUNTARY STATEMENT

			Page	_ or Pages
I,		, am	years of ag	e, my address is I volunteer the following
information of my own f	ree will, for wh	atever purposes	it may serve.	_I volunteer the following
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I have read each page of my signature, and correlated herein are true and correlated to the second sec	ctions, if any, b			each page of which bears at the facts contained
Dated at	, this	day of		, 20
Signature of Person Givi	ng Voluntary S	tatement	C	Guardian (if applicable)
Signature of Police Office				