

Fremont Police Department
VOLUNTARY WITNESS STATEMENT

Date: _____ Location: _____

Name: _____ Home Telephone: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Date of Birth: _____ Age: _____

Place of Employment: _____ Business Telephone: _____

Statement: _____

Witness

Signature

Witness

Signature

Incident Number: _____ Investigating Officer: _____
