

CORTLAND POLICE DEPARTMENT
400 North High Street, Cortland, Ohio 44410
Phone: (330) 638-1000 Fax: (330) 637-4916

VOLUNTARY STATEMENT

Case Number:

Date/Time:

I, _____ hereby make the following voluntary statement to
Officer _____ of the Cortland Police Department.

I VOLUNTARILY MAKE THE FOLLOWING STATEMENT:

Signature:

DOB:

Telephone:

Address:

Location:

Witness: