



SHERIFF

KIT CARSON COUNTY

Travis Belden, Sheriff

Mike Jones, Undersheriff

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VOLUNTARY STATEMENT FORM

Case No. _____

Name: _____ Date of Birth: _____
LAST FIRST MI

Home Address: _____

City: _____ State: _____

County: _____ Zip Code: _____

Phone Number: (____) _____ Business: (____) _____

Concerning the Incident At: _____,

On the date of _____, 20____, at the time of _____: _____ AM/PM (Circle One), my statement is as follows:

Lined area for the voluntary statement.



I HAVE READ MY FOREGOING STATEMENT, AND BELIEVE THE FACTS CONTAINED THEREIN ARE TRUE TO THE BEST OF MY KNOWLEDGE. I DO NOT MAINTAIN THAT ALL FACTS AND DETAILS OF THE INCIDENT ARE INCLUDED, ONLY THOSE FACTS ABOUT WHICH I HAVE BEEN ASKED.

Signature _____ **Date:** _____, 20____