Pittsfield Police Department
Voluntary Statement

Name _____ **Address** _____

Home Phone _____ **Work Phone** _____

DOB _____ **Social Security** _____

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Signature _____ Date _____

Personally appeared before me the above named individual and made oath to me that the foregoing statement by him/her subscribed is in his/her belief to be true.

Date _____ Justice of the Peace _____