RADFORD UNIVERSITY POLICE DEPARTMENT
VOLUNTARY STATEMENT

Page ____ of _____

DATE: _____ **TIME:** _____

NAME: _____ **ADDRESS:** _____

PHONE: _____ **DOB:** _____ **SSN:** _____

I have read each page of this statement consisting of _____ page(s), each page of which bears my signature, and correction if any, bear my initials and I certify that the facts contained herein are true and correct.

Signature: _____ Witness: _____

RUPD VS 0700