# BUNKER HILL COMMUNITY COLLEGE POLICE DEPARTMENT



Person Giving Statement:

250 New Rutherford Ave., A-200 Charlestown MA. 02129-2925 Phone 617-228-2053



### **VOLUNTARY STATEMENT FORM**

Please download this document to your computer saving it and adding your last name to the end (example: Voluntary Please

fill out the form below. Use additional pages for your statement if needed. Provide your name on each page. Once Statement Form J Smith.pdf), Fill in all fields, save and then either print and bring it to the office listed above or e-mail the completed PRINT OUT all pages of the statement form, staple together and submit to BHCC Public Safety Office Room E-127, document, as an attachment, to the address given to you by the staff member you spoke with. You will receive a return e-Charlestown Campus or Room 107, Chelsea Campus. mail stating it was received. I, \_\_\_\_\_, volunteer the following information of my own freewill, for whatever purposes it may serve, to Officer\_\_\_\_\_of the Bunker Hill Community College P o I i c e Department. I am years old and was born on . I reside at: My phone number is: **VOLUNTARY STATEMENT** I have just read each page of this statement, consisting of \_\_\_\_page(s), each page of which bears my signature, and corrections, if any, bear my initials, and I certify that the facts contained herein are true and correct my knowledge. This day of

### **OFFICE USE ONLY**

Incident # \_\_\_\_\_\_ Intake Officer: \_\_\_\_\_

# BUNKER HILL COMMUNITY COLLEGE POLICE DEPARTMENT



250 New Rutherford Ave., A-200 Charlestown MA. 02129-2925 Phone 617-228-2053



# **VOLUNTARY STATEMENT CONTINUATION**

	rageoi
	<del> </del>
<del></del>	<del> </del>
Person Giving Statement:	

## **OFFICE USE ONLY**

Incident #	Intake Officer: