Mahanoy Township Police Department
P.O. Box 55
1010 W. Center Street
Mahanoy City, PA 17948
570-773-1239

VOLUNTARY STATEMENT

DATE_____,20____. TIME_____. PLACE_____
I,_____,AM_____YEARS OLD AND I LIVEAT:_____
I AM GIVING THIS STATEMENT TO PTLM_____

He has duly warned me that I have the following rights: I have the right to remain silent and not make a statement at all: that any statement I make may be used as evidence and can be used against me at trial: that I have the right to have an attorney present to advise me prior to and during any questioning: that if I am unable to employ an attorney, I have the right to have an attorney appointed to advise me prior to and during any questioning and I have the right to terminate the interview at any time.

Prior to and during the making of the statement, I have and do hereby knowingly, intelligently, and voluntarily waive the above explained rights and I do make the following voluntary statement to the aforementioned person of my own free will and without any promises or offers of leniency or favors, and without compulsion or persuasion by any person or persons whomsoever:

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_____I have read this statement consisting of _____page(s), each page of which bears my signature, and do affirm that all facts and statements contained herein are true and correct.

Signature_____Date_____

Witness_____Date_____