GUAM FIRE DEPARTMENT

DIPATTAMENTON GUAFI GUAHAN

*Professionalism * Respect * Integrity * Dedication * Empathy*

Voluntary Statement Form

PAGE _____ OF _____

PLACE STATEMENT WAS TAKEN: _____ GFD CASE NO.: _____

NAME: _____ NATIONALITY: _____ TIME: _____ DATE: _____

ADDRESS: _____ D.O.B.: _____ HOME TEL: _____

OCCUPATION: _____ EMPLOYER: _____ WORK TEL.: _____

I am hereby giving my statement freely and voluntarily.

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DATE: _____ TIME: _____

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PRINT NAME

_____
SIGNATURE

DATE: _____ TIME: _____

_____
PRINT (WITNESS)

_____
SIGNATURE (WITNESS)

GFD FORM #