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NEW IPSWICH POLICE DEPARTMENT

Voluntary Statement Form

Date: _____ Time: _____ Place: _____

I, _____ I make the following statement(s) freely and voluntarily
to _____ who has identified themselves as a member of the New Ipswich
Police Department. Case #: _____

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Page _____ of _____

I certify that the above statement(s) made by me are the truth to the best of my knowledge.

DATE _____

MUST BE SIGNED