



# Osage County Sheriff's Office

106 E. Main St, Linn, Mo 65051

## VOLUNTARY STATEMENT

Page ____ of ____ pages.		Date		Time		Location Making Statement	
Name: Last, First, Middle				Date of Birth		SSN	
Height	Weight	Eyes	Sex	Hair	Age	Race	Work Phone
Physical Home Address				Home Phone:			
I affirm that the above statement consisting of ____ page(s), including this page, is true to the best of my knowledge and belief.							
Signature of Person Making Statement				Signature of Witness			