Wildfire Investigation Voluntary Statement Template

This is a template for the Bureau of Indian Affairs, Wildfire Investigation Voluntary Statement. It is from the Wildfire Investigation Field Report, updated in February 2018. It is intended to be printed out and written on by hand.

This page is not a part of the voluntary statement.

If a higher resolution copy of the Evidence Log is needed, please contact a regional WUI/Prevention Specialist.
Voluntary Statement

<table>
<thead>
<tr>
<th>INCIDENT NAME</th>
<th>DATE OF INCIDENT</th>
<th>DATE OF STATEMENT</th>
<th>TIME</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>MM DD YYYY</td>
<td>MM DD YYYY</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NAME (LAST, FIRST, MI)</th>
<th>AGE</th>
<th>SEX</th>
<th>LOCATION OF STATEMENT:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>ADDRESS (NO., STREET, CITY, STATE, ZIP)</th>
<th>PHONE NO.</th>
</tr>
</thead>
</table>

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<tr>
<th>INCIDENT LOCATION</th>
<th>INVESTIGATOR TAKING STATEMENT</th>
</tr>
</thead>
</table>

I, _____________________________ do make this voluntary statement of the facts and circumstances known to me concerning the above named incident. This information is given of my own free will to___________________________, of the Bureau of Indian Affairs, for whatever purpose it might serve.

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

I have, ___ read or ___ had read, to me the foregoing statement consisting of _____ pages, handwritten by _____________________________. It is true to the best of my belief and knowledge.

INVESTIGATOR'S SIGNATURE

SIGNATURE OF STATEMENT

WITNESS SIGNATURE

WITNESS PRINTED NAME

CONTINUATION PAGE: ____ YES ____ NO
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NAME (LAST, FIRST, MI)

AGE
SEX
LOCATION OF STATEMENT:

CONTINUATION PAGE ____ of ____

INVESTIGATOR'S SIGNATURE

SIGNATURE OF Statement

WITNESS SIGNATURE

WITNESS PRINTED NAME

Confidential/Protected Investigation Work Product
*Not for Public Release or Distribution Outside of Jurisdiction