STATEMENT OF FACTS

FAIR HAVEN POLICE DEPT.

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DATE	TIME	TEL. #
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	AM years o	f age, and do hereby make the following
statement of facts to	of the Fair Haven Police	Department, Fair Haven, N.J. of my own
ree will and accord, without threats of b	podily injuries or promise of any rewa	rd.
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3-30.0	214	
I have read this statement, and it is true	e to the best of my knowledge.	
Witnesses:		
		

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STATEMENT OF FACTS (CONTINUED) (AND/OR OTHER SWORN INFORMATION)

그림 시간에 집안하다 아니라 아니라 나를 다 하게 되었다면 하는데 하는데 그렇게 되었다면 하는데 되었다.
I have read this statement, and it is true to the best of my knowledge.
Witnesses:

PAGE ____