## **Voluntary Statement**

Or Email; <a href="mailto:lcdogs@lakecountyohio.gov">lcdogs@lakecountyohio.gov</a>	., Painesville OH 44077-4804	Phone: (440) 350-2	640
Today's Date:Detail #(Office Use)	Date of Incident	Time of Incident	am/pm
Statement of Occurrence:	<del>-</del>		
	** 18** - ***		
			·
		(use other side if neede	d to continue)
1.11.116			
Initial if you are willing to appear in Court r	egarding this incident to decla	re this animal dangerou	is or at large.
	landa a ka ka kana la la la la ka	e	
By signing this document, I acknowledge the fol			
County Dog Warden. No threats or promises have consisting of page (s), and I certify that the			
knowledge.	ie racis contameu dierem are i	true and correct to the i	best to the best of my
miowiedge.			
			·
(Signature of person providing statement)	(Printed Name of	of person providing state	ement)
			-
(Address of person providing statement)	(Phone # of per	son providing statement	:)

Continued)	