Report No.:_____

WATAUGA POLICE DEPARTMENT
WITNESS STATEMENT

Witness' Name: _____ DOB: _____

DL or ID #: _____ Other ID information: _____

Home Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Business Phone: _____ Pager: _____

Employer's Name: _____

Employer's Address: _____ City: _____ State: _____ Zip: _____

Name of Someone who can always locate you? *(Not from the same home address.)*

Name: _____ Phone: _____ Relationship:_____

Address: _____ City:_____ State:_____ Zip: _____

My name is _____ and I have _____ years of formal education and do read, write, and understand the English Language. I am giving this statement to _____; of the Watauga Police Department of my own free will, for whatever purposes it may serve. I am not under arrest, nor am I being forced in any manner to make these statements. They are and will be the same statement I would make during the presentation of this case in a court of law.

I have read this statement consisting of _____ pages before signing it.

_____ _____

Signature of Victim/Witness Printed name of Victim/Witness

Signature of Officer: _____ Others Present: _____

Date: _____ Time:_____ Location: _____

Report No.:_____

WATAUGA POLICE DEPARTMENT
WITNESS STATEMENT (continuation)

WITNESS' NAME_____ DOB:_____ DL or ID:_____

I have read this statement consisting of _____ pages before signing it.

_____ _____

Signature of Victim/Witness Printed name of Victim/Witness

Signature of Officer: _____ Others Present: _____

Date: _____ Time:_____ Location: _____