

**WITNESS STATEMENT FORM**

WITNESS \_\_\_\_\_ TITLE \_\_\_\_\_

WORK LOCATION \_\_\_\_\_ PHONE \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

INVESTIGATOR \_\_\_\_\_ CASE # \_\_\_\_\_ CASE NAME \_\_\_\_\_

INTERVIEW DATE \_\_\_\_\_ TIME \_\_\_\_\_ LOCATION \_\_\_\_\_

REASON FOR INTERVIEW \_\_\_\_\_

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Witness Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Page: \_\_\_\_\_ of \_\_\_\_\_

Interviewer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

