Village of Shawnee Hills Police Department

Witness Statement

DATE:	TIME:	REPORT NUMBER:
LOCATION OF INCIDENT:		
NAME:		
STREET ADDRESS:		
DATE OF BIRTH:		PHONE NUMBER:

I,_____DO HERBY MAKE THIS FOLLOWING STATEMENT ON MY OWN FREE WILL TO

OFFICER_____ON THE_____ DAY OF_____20_____,_____

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I certify that I have made the above statement of my own free will and without duress. I fully understand that I am not required to make a statement and by making this statement, I do so understanding it can and will be used in court as evidence. I am aware that there are criminal penalties, up to and including prosecution, if this statement is made to deceive or obstruct the due process of law.

Signature: _____ **Date:** _____