

Blue River Marshal's Office Witness Statement

Case #:			
Officer:		Location:	
Subject:			
I make the following stat	tement of my own free v	vill, with no force or threats used agains	st me, and
no promises have been n	nade or implied to induc	e me to make this statement.	
Name:		Home Phone:	
PO Box/City:		Business Phone:	
Physical Address:		Business Name:	
City:		Business Address:	
Date of Birth:	Age:	Social Security #:	
Statement:			
Signature:		Date:	
		Page	of

Initials:	Page of
Witness Statement (cont.)	