CALL # _____

ARREST # _____

INCIDENT#_____

INCIDENT DATE_____

NARRAGANSETT POLICE DEPARTMENT

WITNESS STATEMENT

Date_____ Time _____ Officer _____

Name _____ Date of Birth _____

Address _____ Soc Sec No. Last 4 numbers XXX-XX- _____

_____ Occupation _____

Phone _____ Work Phone _____

All statements must contain complete & accurate information. Be sure to include complete descriptions of persons, vehicles, or items involved, exact dates, times, & location(s) where the event(s) took place.

_____

_____

Signature _____ **Officer Taking Statement** _____

CALL # _____

INCIDENT # _____ ARREST # _____

NARRAGANSETT POLICE DEPARTMENT

WITNESS STATEMENT - CONTINUED

Signature _____ **Officer Taking Statement** _____

~~~
~~~