	ant to 53-13-113 o 102, acting within r			· <b>1</b>		e
	Do you swear	the states	ment you are	about to give is a	the truth?	
	Response :		<i>No</i> • PLEASE PRIN	Officer Initials		
Name:	T			First		
Address:	Las	st		First	MI	
Address.	Addr	ess		City	State	
Date of Birth: _	Sex:		Phone #:	Other Phone:		
Email Address:						
Describe In			ed:			
Describe In	Detail What You					
Describe In						
Describe In						
Describe In						
Describe In						
Describe In	Detail What You				ignature	



Date of Incident:	

Date of Statement:

- Notice: You are notified that statements you are about to make may be presented to a magistrate or a judge in lieu of your sworn testimony at a preliminary examination. Any false statement you make and that you do not believe to be true may subject you to criminal
- ction





Zip

7/2020

Case Number: \_\_\_\_\_

CAD Number: \_\_\_\_\_



## BOUNTIFUL CITY POLICE DEPARTMENT Witness Statement Continuation Page



Page of Pages		