Ephraim
RICH IN HERITAGE. INVESTED IN THE FUTURE.
Ephraim City Police Department
5 South Main
Ephraim, UT 84627
Phone: (435)283-4602
Fax: (435)283-5841

CASE #: _____

WITNESS STATEMENT

Name: _____ Date of Birth: _____

Social Security: _____ Driver's License: #_____

Address: _____ City: _____ Zip: _____

Home Phone #: _____ Cell #: _____

Type of Incident: _____ Date/ Time of Incident: _____

Location of Incident: _____ Date/Time of Statement: _____

PLEASE DESCRIBE WHAT YOU SAW, HEARD, OR KNOW OF THIS INCIDENT:

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Notice: You are notified that statements you are about to make may be presented to a magistrate or judge in lieu of your sworn testimony at a preliminary examination. Pursuant to Utah Code Annotated 76-8-504 and Utah Code Annotated 76-8-506, it is a crime to knowingly provide false information in this statement. By my signature below, I certify that this statement is true, accurate, and complete, to the best of my knowledge:

_____ _____

Signed **Date**

PLEASE DESCRIBE WHAT YOU SAW, HEARD, OR KNOW OF THIS INCIDENT:

Notice: You are notified that statements you are about to make may be presented to a magistrate or judge in lieu of your sworn testimony at a preliminary examination. Pursuant to Utah Code Annotated 76-8-504 and Utah Code Annotated 76-8-506, it is a crime to knowingly provide false information in this statement. By my signature below, I certify that this statement is true, accurate, and complete, to the best of my knowledge:

Signed **Date**