

Witness Statement

Statement of: [Witness Name]

Address: [Witness Address]

Date: [Date of Statement]

Incident Details

Date of Incident: [Date of Incident]

Time of Incident: [Time of Incident]

Location of Incident: [Location of Incident]

Statement

I, [Witness Name], hereby declare the following:

On [Date of Incident], at approximately [Time of Incident], I witnessed an incident involving [Description of Involved Parties, e.g., the Plaintiff and Defendant]. I was located at [Your Location] when I saw [Description of Events]. I noticed [Specific Details such as actions, behaviors, surroundings]. This incident resulted in [Brief Description of the Injury and Consequences].

Additional Information

I have known [Plaintiff/Defendant] for [Duration], and I believe my statement to be true and accurate.

Signature

[Witness Signature]

[Print Name]