

Volusia County Schools

Witness Statement

Name: (Print) _____ Date: _____

I declare that the following statement is given freely and voluntarily, without promise of benefit, or threat of use of force or duress, do proceed to state the following:

I have read each page of this statement and certify that the facts contained herein are true and correct to the best of my knowledge

Signature of person giving statement

Sworn to and subscribed to before me
and officer duly authorized to administer
oaths this ____ day of _____
_____ (year).

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