[WITNESS' NAME, ADDRESS, & PHONE #]

Re: [TYPE OF CLAIM] injury on [DATE OF INCIDENT]

Dear Mr./Mrs. [WITNESS],

Please be advised that I am pursuing a claim for personal injuries as a result of a [TYPE OF CLAIM] which occurred on [DATE OF INJURY] at [LOCATION].

You witnessed this incident. Attached to this letter you will find a witness statement that I implore you to fill out. Please explain in detail exactly what you witnessed on the above referenced date.

Please complete your statement and return it in the enclosed self-addressed, stamped envelope, provided for your convenience. At some time in the future, I may need to contact you further with regard to this statement.

I greatly appreciate your cooperation with regard to this matter.

Sincerely,

[YOUR NAME, ADDRESS, & PHONE]

WITNESS STATEMENT

E: [INJURED PARTY'S NAME]
Pate of Incident:
Vitness name:
Vitness address:
Vitness phone number:
ocation of incident:
Describe fully how the incident occurred (include what you saw, heard, said and did, and it should include events that occurred immediately before and after the accident):
believe the facts given in this witness statement are true.
ignature: Date:

27 2 4 5		
Names of other witnesses:		
I believe the facts given in this witness statement are true.		
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Signature:	Date:	