

STATEMENT OF WITNESS

STATEMENT OF: Det Anthony Chisakata
Name Rank

AGE OF WITNESS (if over 18 enter "over 18"): 022 18

TO BE COMPLETED
WHEN THE
STATEMENT HAS
BEEN WRITTEN

I declare that this statement consisting of _____ pages, each signed by me is true to the best of my knowledge and belief and I make it knowing that, if it is tendered in evidence at a preliminary enquiry or at the trial of any person, I shall be liable to prosecution if I have wilfully stated in it anything which I know to be false or do not believe to be true.

Dated this 2 day of FEB 20 05

[Signature]

SIGNATURE OF MEMBER by whom
statement was recorded or received

SIGNATURE OF WITNESS

Det Cross has asked me did any person, from the ~~SP~~ contact me in relation to the death of Lucy Crawford and attempt to influence me with regard to the cause of Lucy's death. My reply to this is NO.

64B