Certified a true copy of original

STATEMENT OF:

WILLIAM NEVILLE CRAWFORD

Name

Rank

AGE OF WITNESS (If over 18 enter "over 18"):



To be completed when the statement has been written

I declare that this statement consisting of 1 page, 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 3

day of

**MARCH** 

2005

William R Cross

SIGNATURE OF MEMBER by whom statement was recorded or received

W N Crawford

SIGNATURE OF WITNESS

PRINT NAME IN CAPS

D/Sergeant Cross has asked me if I recall Marion Doherty, Health Visitor calling with us after Lucy's death. I recall Marion calling at the house on two or three occasions. I do not recall her ever giving us an explanation for Lucy's death. D/Sergeant Cross has also asked me if Dr O'Donohoe contacted me to offer support after Lucy's death. I can confirm he made no contact with me in any shape or form. Any contact I had was after I asked to see him on one occasion. D/Sergeant Cross has asked if I recall Lucy standing up in her cot a few minutes after the intravenous fluids had started. I can reply that I was present at that time, that I do not specifically remember Lucy standing up but it would not surprise me. I also want to confirm that I said in my deposition that I overheard a nurse saying on a telephone, "Not another one. I've had enough of this. I'll make sure I'm not here tomorrow night". When I wrote my deposition I did not know the name of this nurse, but after seeing her being called at the Inquest I now know that nurse was Nurse Swift. D/Sergeant Cross has asked me if I remember when Dr O'Donohoe left the hospital in Belfast. I cannot recall seeing Dr O'Donohoe leaving the hospital in Belfast and I had no contact with him in Belfast.

3ช/36 7/04 SIGNATURE OF WITNESS: W N Crawford

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Lawyer 1 STATEMENT OF WITNESS CRAWFORD NEVILLE Rank NUMBA STATEMENT OF: . Name AGE OF WITNESS (if over 18 enter "over 18"): pages, each signed by me is true to the pages, each signed by me is true to the 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 OMPLETED N THE stated in it anything which I know to be false or do not believe to be true. MENT HAS MARCH day of Dated this SIGNATURE OF WITNESS SIGNATURE OF MEMBER by whom statement was recorded or received Mourar Moll o coasion torched

SIGNATURE OF WITNESS: M- N

orm 38/36 **∢**Lined)

LC - PSNI

## STATEMENT OF WITNESS

-	STATEMENT OF: NEW NEVIUE CRAWFORD
	Name Bank
	AGE OF WITNESS (if over 18 enter "over 18"):
7	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 3 day of MARCH 2005
	floor Company
	SIGNATURE OF MEMBER by whom SIGNATURE OF WITNESS statement was recorded or received
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-	Contact I had was after I asked to see him on
-	One occasion. Net Cross has esked & I recall
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	SIGNATURE OF WITNESS: M-D. Crauld

Form 38/36 (Lined)

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TO BE COMPLETED WHEN THE STATEMENT HAS BEEN WRITTEN

## STATEMENT CONTINUATION PAGE

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LC - PSNI