Certified a true copy of original WCL KCESS DKV

STATEMENT OF:

MAUREEN DENNISON

Name

Rank

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

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

day of

DECEMBER

2004

R Hall

Maureen Dennison

SIGNATURE OF MEMBER by whom statement was recorded or received

R HALL

PRINT NAME IN CAPS

SIGNATURE OF WITNESS

Until April this year I worked in the Coroner's Office in Belfast. I had been based there since 1999 as a Civil Servant. My role was to take reports of deaths from either police, GPs or hospitals and then to report it on to the Coroner for his decision. I then would make a written record of the report and record details of the death. On 14 April 2000 I took the report of the death of Lucy Crawford, 5.11.98 of

Royal Victoria Hospital. I have written in the circumstances of the death as he reported to me. I spoke to Dr Curtis, Deputy State Pathologist, because I couldn't get in touch with the Coroner, that is why I have written Dr Curtis' name in the entry. I wrote DC in entry which means that Death Certificate was issued and giving gastro enteritis as the cause. I have been shown a copy of this entry regarding Lucy Crawford by D/Constable Hall. I can confirm that I made this entry, it is my writing. When I initially received the report of the death I recorded it in a shorthand notebook, and then transferred details in the main register for deaths. I don't have this notebook now, I disposed of it when I left the Coroner's Office. I have no particular memory of this entry other than what I have read in the register.

38/36 7/04

LC - PSNI

SIGNATURE OF WITNESS: Maureen Dennison

## STATEMENT OF WITNESS

	STATEMENT OF: Wailly Denison
	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 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 day of account 2004
•	Warren Donner
	SIGNATURE OF MEMBER by whom statement was recorded or received
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Form 38/36 (Lined)	
PB 5/02	SIGNATURE-OF-WITNESS:

## STATEMENT CONTINUATION PAGE

	STATEMENT OF: M DULLUON STATEMENT PAGE NO: 2
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-	Mariaen Dennison
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	SIGNATURE of STATEMENT MAKER:

LC - PSNI

Form 38/36[a] [Lined] PB 12/01

115-033-003