Occupation:  Relationship to deceased:  Date of birth:  Telephone no.: (H)	Witness Details				
Address:  Occupation:  Relationship to deceased:  Date of birth:  Telephone no.: (H) (W) (M)  Email address:  Notebook no.: Notebook pages: to  Reporting/Investigating Officer  I, the reporting officer declare the above information is true and correct to the best of my knowledge and belief.  TERRY, SEAN ASHLEY Sergeant 4015622  (Name) (Rank) (Reg. no.)  CAIRNS INQUIRY OFFICE  (Police Station/Establishment) (Contact no.)  Dated this Eleventh day of November , 2012	Name:,				
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(Name) (Rank) (Reg. no.)  CAIRNS INQUIRY OFFICE  (Police Station/Establishment) (Contact no.)  Dated this Eleventh day of November , 2012		RV. SEAN ASHLEV		Sergeant	4015622
(Police Station/Establishment) (Contact no.)  Dated this Eleventh day of November , 2012					
(Police Station/Establishment) (Contact no.)  Dated this Eleventh day of November , 2012		CAIRNS INO	UIRY OFFICE		
Dated this Eleventh day of November , 2012 (Day) (Month) (Year)					(Contact no.)
(Day) (Month) (Year)	Dated this	Eleventh	day of	November	
		(Day)		(Month)	(Year)
	(Sig	nature of reporting officer	)		

## Caveat

"The information in this form is disclosed pursuant to Information Privacy Principle 11(1)(b) in Schedule 3 of the Information Privacy Act 2009. Under Information Privacy Principle 11(3), a person, body or agency to whom personal information is disclosed shall not use or disclose the information for a purpose other than the purpose for which the information was given to the person, body or agency."



