

# Anonymous Witness Form

If you see or hear of something which you believe should be brought to the attention of the police, you can report it here by filling out the form below; although not checked daily, LHUPD staff routinely check for Anonymous Witness Form Submissions.

When filling out the form, please provide as much detail as you can about date, time, locations, descriptions or names of individuals involved, and details of the incident. If there are vehicles involved, a license plate and description of the vehicle (s) would be very useful.

Please consider speaking with one of our officers to assist in the investigation process. If you are willing to help in this way, fill out your contact information below. If you are not interested in speaking with an officer, your submission remains anonymous, there is no way to trace the sender of the information.

If you would rather talk with someone on the phone, call 570-484-2278. If you would rather print and mail your form or drop off in interoffice mail send to: Chief Paul Altieri, Lock Haven University-Public Safety 401 North Fairview Street Glennon Infirmary Building, Lock Haven, PA 17745.

Thank you for your assistance in keeping our community safe.

Type of Crime

When did the Crime Occur

(mm/dd/yy)

Please list the Location(s)

Where the Crime Occurred

Did you actually witness this crime

Yes

No

Please describe the incident with as much detail as possible:

**Suspects:** Please list the names of everyone involved in the incident. If you do not know the suspects name, please provide a physical description of their appearance, clothing, etc.

**Optional:** If you are willing to allow a Lock Haven University Police Officer to contact you, please provide your contact information. Otherwise this form will be completely anonymous.

Name:

Address:

Telephone:

e-mail: