

WITNESS STATEMENT**Criminal Procedure Rules, r 16.2; Criminal Justice Act 1967, s.9**

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Statement of: PC 1989 Jones

Age if under 18: OVER 18

(if over 18 insert 'over 18')

Occupation: Police officer

This statement (consisting of 2 page(s) 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, 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.

Signature: PC JONES (witness)

Date: 01/06/2020

I am a serving Police Officer in Anyshire Police force. On the 1st June I was on duty patrolling the North Marsh area.

At approximately 21:35 I received a call via the control room to attend an ongoing incident in the North Marsh area. At 21:40 I and PC Brennan arrived at 29 Accacia Road. On knocking at the door we were invited in by a visibly upset lady who I now know to be SHELAGH MCLOVE. I noted that she had a cut to the left temple side of her head and there was further reddening around that area.

SHELAGH MCLOVE detailed to me that she had been assaulted by her partner Eoin MCLOVE who had left the scene in her Nissan car. Ms MCLOVE further told me that EOIN MCLOVE was under the influence of alcohol and as such I radioed to colleagues to look out for that car.

When SHELAGH MCLOVE had calmed slightly she was able to explain that she was struck to the head by EOIN MCLOVE when he was holding a remote control. I could see a remote control that appeared broken on the living room floor and SHELAGH MCLOVE confirmed that was the object used to strike her twice to the head. There did not appear to be any blood on that remote control.

SHELAGH MCLOVE was asked if she needed treatment in relation to her injuries but she refused the assistance of an ambulance.

Ms MCLOVE appeared to be under the influence of alcohol as her eyes were glazed and I could smell alcohol on her breath. Ms McLove explained to me that prior to the incident she had been drinking alcohol with her friend and neighbour LUCY DOYLE.

EOIN MCLOVE had returned after 9pm and an argument had ensued which resulted in the assault.

Eoin MCLOVE was described as around 6ft 1" tall and is stocky in his build. SHELAGH MCLOVE is petit and 5ft 2" tall.

Whilst at the property I was able to inform SHELAGH MCLOVE her car had been recovered and that EOIN MCLOVE had been arrested. I left the scene once I had obtained a statement from SHELAGH MCLOVE.

On arrival at the scene I switched my body worn camera on. I captured the scene from arrival and I can exhibit this as NJ1. This footage also contains a short conversation with LUCY DOYLE dob

21/3/1985 who is the neighbour of SHELAGH MCLOVE and heard part of the incident. She stated that she was available to be contacted on 07811 232222.

Signature: PC Jones

Signature witnessed by; na

Witness contact details

URN

Name of witness: Shelagh McLove

Home Address:

Postcode:

E-mail address:

Mobile:

Home Telephone Number:

Work Telephone Number:

Preferred means of contact *(specify details for vulnerable/intimidated victims and witnesses only)*:

Gender:

Date and place of birth:

Former name:

Ethnicity Code (16 + 1):

DATES OF WITNESS NON-AVAILABILITY:**Witness care**

- a) Is the witness willing to attend court? If 'No', include reason(s) on form **MG6**.
- b) What can be done to ensure attendance?
- c) Does the witness require a Special Measures Assessment as a vulnerable or intimidated witness? *(youth under 18; witness with mental disorder, learning or physical disability; or witness in fear of giving evidence or witness is the complainant in a sexual offence case)* If 'Yes' submit **MG2** with file in anticipated not guilty, contested or indictable only cases.
- d) Does the witness have any particular needs? If 'Yes' what are they? *(Disability, healthcare, childcare, transport, disability, language difficulties, visually impaired, restricted mobility or other concerns?)*.

Witness Consent (for witness completion)

- a) The Victim Personal Statement scheme (victims only) has been explained to me Yes ☐ No ☐
- b) I have been given the Victim Personal Statement leaflet Yes ☐ No ☐
- c) I have been given the leaflet "Giving a witness statement to the police..." Yes ☐ No ☐
- d) I consent to police having access to my medical record(s) in relation to this matter *(obtained in accordance with local practice)* Yes ☐ No ☐ N/A ☐
- e) I consent to my medical record in relation to this matter being disclosed to the defence Yes ☐ No ☐ N/A ☐
- f) I consent to the statement being disclosed for the purposes of civil, or other proceedings if applicable, e.g. child care proceedings, CICA Yes ☐ No ☐ N/A ☐
- g) **Child witness cases only.** I have had the provision regarding reporting restrictions explained to me. Yes ☐ No ☐ N/A ☐
- I would like CPS to apply for reporting restrictions on my behalf. Yes ☐ No ☐ N/A ☐

'I understand that the information recorded above will be passed on to the Witness Service, which offers help and support to witnesses pre-trial and at court'.

Signature of witness:

PRINT NAME:

Signature of parent/guardian/appropriate adult:

PRINT NAME:

Address and telephone number (of parent etc.), if different from above:

RESTRICTED (when complete)

Statement taken by:

Station:

Time and place statement taken: