



LINEUP ADVISEMENT FORM

by Independent Administrator

Hanover Park Police Department

To Be Read to Eyewitness and Acknowledged Pursuant to 725 ILCS 107A-2(e)

I, _____ (the eyewitness) agree to view a lineup
(Print Name)

administered by _____, at _____ on
(Name of Administrator) (Location of Lineup)

_____, _____ AM/PM.
(Date) (Time)

I understand the following;

1. The persons in this lineup and I may be recorded for the purpose of accurately documenting all statements made by me unless I refuse to be recorded.
2. The perpetrator of the crime may or may not be presented in the lineup.
3. The administrator of this lineup does not know the suspected perpetrator's identity.
4. I should not feel compelled to make an identification.
5. It is as important to exclude innocent persons as it is to identify a perpetrator.
6. The investigation will continue regardless of whether an identification is made.

| | |
|----------------------|-----|
| Eyewitness Signature | |
| Date and Time | |
| Investigator | ID# |
| Case Number | |