RESTRICTED

Form MG11(T)

Page 1 of 1

WITNESS STATEMENT

(CJ Act 1967, s.9; MC Act 1980, ss.5A(3) (a) and 5B; MC Rules 1981, r.70)

Statement of: JORDAN, WENDY

Age if under 18: O.18

(if over 18 insert 'over 18') Occupation: PERSONNEL ASSISTANT

This statement (consisting of 1 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 anything which I know to be false or do not believe to be true.

Signed:

W Jordan

Date:

15/06/2005

I am the above named person and I live at the address shown overleaf. At the request of the Hampshire Police I produce as Exhibit WJ/CA/1 the job description for Clinical Assistant at the Gosport War Memorial Hospital.

I do not know the author of this document or when it was written. However there was only one Clinical Assistant in post and this would have been relevant to the period that Dr Jane BARTON worked at the Gosport War Memorial Hospital.

I cannot say that Dr BARTON would have been served a copy of this document.

Signed: W Jordan

2004(1)

Signature Witnessed by: