	Agend	y Name			IN	CIDE	OCA																	
	ORI									INCIDENT/INVESTIGATION REPORT								Date / Time Reported S M T W T F S						
ATA										REPORT								Month Day Yr Time Hrs.						
	Crime / Incident(s)							Attempt	At Found S M T W				F S	Last Kn				T W		F S				
Ë	#1									Complete	Month		ay	Yr	Tim	e Hrs.	Month		ay	Yr		Time	Hrs.	
INCIDENT DATA	#2	Crime I	ncident							Attempt Complete	Location	n of In	cident							(	Offen	se Trac	t	
	#3	Crime II	ncident							Attempt	Premise	Туре				Victim Residence Type								
										Complete					1		☐ Single Family ☐ Multi Fam					ily		
MO	How A	Attacked	or Com	nmitted												Forcible Yes No	□ N/A	Weap	on / To	ols				
	# of V	ictims	Type:		erson [	Bus		inancial In	actitute.		Injury:	_	None		Minor		ss of Teet	h		Orug/Alc			·m	
				eligious	L.E. Off				Other/l								r Major			No				
		Victim/E	Busines	s Name (La		Victim DOB / Age of							Race	Sex		ionship		ident S Residen						
VICTIM	V1	Crime #														To O	ffender		Non-Res Jnknow	sident				
Ν																Home	Home Phone							
		oyer Nan		ess	ī											Business Phone								
	VYR	N	lake		Model		Style	•		Color	Lic/	Lis				Vin								
	CODE	S: V = V	ictim (D	enote V2, V			er (if othe	r than victi	im)	R = Repo	orting Pers	son (if												
	Type:	_		Business	Society	y	Govern	ment	Finan	cial Institute	e □R	eligiou	is	L.E. C	Officer Lir	ne of Duty	Othe				1		Τ_	
	Code Name (Last, First, Middle)  Victim of Crime # DOB / Age Race														Race	Sex								
OTHERS INVOLVED	Home Address Home Phone															<u> </u>								
ΛOL	Emplo	yer Nan	ne/Addr	ess														Bus	iness P	hone				
<u>Z</u>							_																	
Ë	Type: Code	Pers		Business First, Middle	Society	y	Govern	ment	Finan	cial Institute	e ∐R	eligiou	IS	L.E. (	Officer Lir	ne of Duty			r/Unknown DOB / Age Race Sex				Sex	
QŢ	Code	Name	(Last, i	i iist, wiidale	=)												Crime		Age			Nace	Jex	
	Home	Addres	S															Hom	Home Phone					
	Employer Name/Address														Bus	Business Phone								
Status Codes	L = Lo (Check		= Stoler column		ecovered d for other j		amaged	Z = S	eized	B = Burne	ed C=	= Cour	nterfeit /	Forge	i F=	Found								
	Victim #	Victim # DCI Status Value OJ QTY								P	Property D	Descri	ption				Make/Model				Serial Number			
													+											
₹I																								
PROPERTY																								
280																								
_																				+				
		er of Veh	icles Sto	olen				_			Number	of Veh	icles Re	covere	d									
₽	Office	fficer Name ID# Officer Signature Supervisor Signature																						
rus	Comp	lainant	Signatu	re				L	ase Stat Further	r Investigati	ion		ase Dis	inded		Juvenile/N			_ Extra	dition De	clined			
STATUS									Closed		nausted	=	Cleare	ed by A ed by A n of Off	Arrest by	☐ Refuse to Cooperate ☐ y Another Agency ☐ Prosecution Declined					Page .	of		

## INCIDENT/INVESTIGATION REPORT

Page 2

OCA	
0	

Status	L = L	ost	S = Stole	n R=	Recovered	D = D	amaged	Z = Seized	B = B	Burned	C = Co	unterfei	it / Forge	ed	F = Foun	d		U				
Codes													ch									
40	DCI	Status	s Qua	intity	Type Meas	ure			Suspecte	d Type	•	Pos		Buy	Sale	Mfg.	Importing	Operating				
DRUGS								-														
DR																						
OFFENDER	Offende Alcoho Compu	l/Drugs	Yes No	Unk N/A Unk		Race			Age:				Age:		Race: Sex:			Primary ( Resident Reside Non-R	Status ent lesident			
	Name (Last, First, Middle)				Age. Race. Sex.			x: Age: Race: Sex: Alias or Nickname					Age:	Home Ac	lace: idress	Sex	<u>c</u>					
	Occupa	tion					Business Address															
	DOB / Age				Race Sex		Height		Veight		Build		Hair Color		Hair Style		Hair Length		Eye Color	Glasses		
ECT	ı																					
SUSPECT	Scars, I	/larks,	Tatoos, or	other dis	tinguishing f	eatures	(i.e. limp, fo	oreign acce	nt, voice	characteristics)				•	='	-			-	-		
S	Hat Jacket		et	Shirt/BI	ouse		Tie/Scar	Ŧ.		Coat/Suit				Pants/Dress/Skirt			Socks		Shoes			
	Was Suspect Armed?			<u> </u>	Type of Weapon					Direction of Tra				vel			Mode of Travel			1		
	VYR Make				Model		Style		Color	or Lic/Lis					Vin							
WITNESS	Name (I	ast, fir	st, middle)						DOB / Age			Race	Sex	OCA								
MIT	Home Address							Home Phone Employer					oyer		1	1		Pho	Phone			
	Suspec	t Hate	/ Bias Mot	ivated:	Yes 🗌	No 🗆					<u>'</u>							ı				
VE	Narrative																					
NARRATIVE																						
IARF																						
_																						