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Reporting Officer: Doe, John 04/29/2017

**INFORMATION**

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**DATE**

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**VENUE**

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**COMPLAINANT**

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**VICTIM**

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**WITNESS**

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**SUSPECT**

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**EVIDENCE**

**OTHER**

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**OFFICER SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE \_\_\_\_\_\_\_\_\_\_\_\_\_**

**SUPERVISOR SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE \_\_\_\_\_\_\_\_\_\_\_\_\_**