Complaint Standard Report Form

1. Person/Unit Reporting		2. Date Accomplished	3. Referring Party and Contact Numbers
4. Investigation/Case No.		5. Name of Investigator	
	A. OFFEN	ISE DATA	
6. Time/Day/Month/Year of Commission	7. Place of Commission		
8. Offense/s Committed			
	B. VICTI	M'S DATA	
9. Name Aliases	10. Gender/Sex	11. Age and Date of Birth	12. Place of Birth
13. Highest Educational Attainment		14. Civil Status	15. Nationality/Citizenship
16. Present Address		17. Provincial Address	18. Parents/Guardian Name
19. Employment Information - Occupation	20. Identifying Documents Presented	21. Contact Person, Address, and Contact Number	
	C. OFFEND	DER'S DATA	
22. Name Aliases	23. Gender/Sex	24. Age and Date of Birth	25. Civil Status
26. Highest Educational Attainment	27. Nationality	28. Previous Criminal Record Pls. specify:	
29. Employment Information Occupation:	30. Last Known Address		31. Relationship to Victim
32. Identifying documents pr	esented (company ID	, Driver's license, etc.)
	D EVIDE	NCE DATA	
33. Weapons/Means Used	D. EVIDEI	TOL DATA	
34. Motive/Cause			
35. Suspect under the influe	nce of		
36. Medico Legal Examination	on		

E. ADDITIONAL INFORMATION RELATING TO TRAFFICKING IN PERSON'S CASES
F. CASE DISPOSITION
47. Disposition
48. Victim in custody of
49. Suspect
Signature of Investigator: