			ADMINIST	RATIVE						
1. ORI # TNO 450000			LOCATION							
2. INCIDENT #			REPORTING OF	FICER	BADGE #		ID#			
REPORT TYPE	SUPPLEMENTS ATTACHED T YES NO	INCIDENT	5 DATE	6 TIME	DAY OF WEEK	TODAY'S DATE	ZONE			
☐ SUPPLEMENT	LI TES LI NO	RANGE	То	То	То		GRID			
INCIDENT STATUS	3 EXCEPTIONAL	CLEARANCE D	PATE	4. TIME DISPATCH	IED					
CLEARED BY ARRES	ľ		REFUSED TO COOPERATE	ARRIVAL TIME						
CLEARED EXCEPTIONALLY	B ☐ PROSECUTION D C ☐ EXTRADITION DE		JUVENILE NO CUSTODY	TIME CLEAR						
FOLLOW - UP STATUS										
	UNFOUND CASE CLOSED			ASSIGNED TO	AUTHORITY		ATE			
			OFFEN	ISE						
7 UCR OFFENSE	CODE		OFFENSE	RELATED OFFENSE	OFFENSE REL WARRANT #	ATED TO TCA	# TCA			
1										
2										
8(*) BIAS MOTIV	ATION CODE 1() 9	(*) LOCATION OF OF	FFENSE 1()	10(*) TYF	E OF RESIDE	NCE 1()			
(SUBMIT CO	DE ONLY 2()	(SUBMIT CODE	ONLY) 2()			2()			
11 OFFENSE STATUS 12 OFFENDER USED (CHECK AS MANY AS APPLY)										
1 A ATTEMPTED C COMPLETED 1 A ALCOHOL C COMPUTER EQUIPMENT D DRUGS N NOT APPLICABLE 2 A ATTEMPTED C COMPLETED 2 A ALCOHOL C COMPUTER EQUIPMENT D DRUGS N NOT APPLICABLE										
13 (*) TYPE OF	4		14 (*)	4	WAS THE	REA 1	⊒YES 2 □ NO			
	TYPE OF 1 WHERE WERE THE 1 1 HOSTAGE INVOLVED 1 YES 2 NO									
15 (*) ALARM WAS 16 (*) POINT OF ENTRY? 17 (*) EVIDENCE AT SCENE										
1.		1.		-	1					
	EAPON / FORCE IN	OLVED (SUBM	IT UP TO THREE)	19 (*) INST	TRUMENTS USED					
				1 2						
2 20 (FOR BURGLA	ARY ONLY) METHOD	OF ENTRY			R OF PREMISED EN	ITEREN				
1 F D FORCIBLE										
2 F G FORCIBLE					2	<u> </u>				
	÷.		COMPLAINT	WITNESS						
□ VICTIM NA	AME:	FIRST,	RES	SIDENCE PHONE		DOB				
ΑC	DDRESS		BUS	INESS PHONE		SSN#				
			X HAIR _							
NA □ COMPLAINANT	AME: LAST,	FIRST,	MIDDLE RES	SIDENCE PHONE		DOB				
DWITHEOD	DDRESS		BUS	SINESS PHONE		SSN# _				
	#	SE	XHAIR _	EYES	HEIGH	-iTΥ	WEIGHT			
NA	AME:	FIRST,	MIDDLE RES	SIDENCE PHONE		DOB				
COOM LAMANT			MIDDLE BUS							
- 01110E11			BUS							

22 OFFENSE(S) AGAINST V (UCR CODE(S))	ICTIM		VICTIM#1 NAME (LAST, FIRST , MIDDLE)							(H) PHONE								☐ STATEMENT		
		ADDF	, ZIP)																	
23 (*) TYPE OF VICTIM		EMPL	EMPLOYMENT						WORKPHONE D						ITH		50 AGE SS#			
24 OFFENSE(S) AGAINST VI	ICTIM	VICTI	M #2 NAME							(H)	PH	ONE					STATEMENT			
(UCR CODE(S)) (LAST, FIRST, MIDDLE)										(,							COTATEMENT			
ADDRESS (STREET, CITY, STATE, ZIP)												-								
23 (*) TYPE OF VICTIM		EMPL	EMPLOYMENT					WORKPHONE							DATE OF BIRTH 50 AGE SS#					
1	26 HISPA				27 RESIDEN	T	T	1	2	\Box	WAS THE VI		1	2	28		1	2		
24 SEX 25 (*) RACE	NON-I	HISPANIC NON-I		NON-RES	RESIDENT					AN OFFICER	YES		<u> </u>		THE VICTIM COLLEGE	YES	YES			
29 (*) INJURY TYPE (SUBMIT			TED ASS	AULT / HC	<u>U</u> NKNOW		l IF Y	/ES OI	N #28.	LIS	T NAME OF C	NO	E/UNIVE	RSITY/	ST	UDENT	NO	NO		
	2	AGGRAVATED ASSAULT / HOMICIDE NEGLIGENT JUSTIFIABLE HOMICIDE & ADDITIONAL JUSTIFIABLE HOMICIDE IF APPLICABLE					31 IF YES ON #28, LIST NAME OF COLLEGE/UNIVERSITY/ SCHOOL STUDENT FACULTY/STAF								raff	_ _				
	Г	30-A(*	30-A(*) AGGRAVATED ASSAULT / HOMICIDE CIRCUMSTANCES													_	SECURITY		<u> </u>	
1			#1				<u> </u>									_	OTHER			
2			#2				ADDITIONAL JUSTIFIABLE HOMICIDE (CHECK ONE IF ITEM 30C IS CHECKED)													
IS THE VICTIM ALSO THE CO	MPLAINA 2	ANT 30-B(*) NEGLIGE		SLAUGH	TER														
YES		_ .	(SUBMIT	•	#0		1 2													
NO			#1 #2 4 JUSTIFIABLE HOMICIDE					_	<u> </u>			MINAL	JLICE	OFFIC	JEH AN	ו טו	THAT OFFICE	ER KILL	-ED	
32 DID THE OFFENSE OCCU CAMPUS	IR ON		4 JUSTIFIABLE HOMICIDE (SUBMIT ONE)					☐ ☐ B ATTACKED FELLOW OFFICER AND THAT OF								THAT OFFIC	FR KII	LED		
YES	2		30 C CRIMINAL KILLED BY PRIVATE CITIZEN					CRIMINAL												
NO		_						C ATTACKED CIVILIAN												
33 DOMESTIC VIOLENCE 30 D CRIMINAL KILLED BY						D D ATTEMPTED FLIGHT FROM A CRIME														
1	2	30 D		☐ ☐ E KILLED IN THE COMMISSION OF A CRIME ☐ ☐ F RESISTED ARREST																
YES			шо.						☐ ☐ G UNABLE TO DETERMINE / NOT ENOUGH INFORMATION											
										a c	INA	IBLE TO D	EIEF	IMINE.	NOT	=NC	JUGH INFOR	RMATIO	DN	
35 TIME OF ASSAULT 36 (*) TYPE OF VEHICLE 37(*) OFFICER ON ASSIGNMENT 38 TYPE OF LEOKA																				
37() OFFICER ON ASSIGNMENT 38 TYPE OF LEOKA																				
SUSPECT INFORMA							TIO	N	7	# C	F	OFFE	NE	ER	S					
OFFENDER#	ARREST	#			А	ARRESTED YES 41 TYPE							SUBJI	ECT WAS	ARI	MED WITH (ALSO	ENTER	"A" IF		
40 NAME (LAST) (F						(N	(IDDLE))						AUTOMATIC WEAPON)						
ADDRESS (INCLUDE CITY, STATE AND ZIP CODE)																				
,							EL#													
WK							TEL#													
SEX	RACE	-	DOB					ETHNICITY						RESIDENT STATUS						
HAIR EYES AGE							WEIGHT FT IN													
SCARS AND OTHER IDENTITIES							CLOTHING													
SS#	OLN#								PHOTO#					OTHER						
OFFENDER#		ARREST	ARREST# ARR						!							BJECT WAS ARMED WITH (ALSO ENTER "A" IF TOMATIC WEAPON)				
40 NAME (LAST) (FIRST) ((M	IDDLE)							AKA	MATIC W	EAP	ON)				
ADDRESS (INCLUDE CITY, STATE AND ZIP CODE)																				
						Т	EL#													
WK						_ TEL#														
SEX	RACE		DOB				ETHNICITY					F	RESIDENT STATUS							
HAIR EYES AGE						WEIGH						<u> </u>	EIGHT	FT		IN				
SCARS AND OTHER IDENTITIE							CLOTHING													
SS#	OLN#		ST				PHOTO# OTHER													

•• IS THER			TIC INFORMATI TIVE ORDER ON FILE		NO				
		VICTIM ST							
PROPERTY DAMAGE EVIDE					TTMENT OTHER				
(Damage description)			\$ (Damage Value)		(Property Owne	r'e name)			
. ,		N- DN/A	, ,			·			
Has suspect struck victim befo			If yes, when?						
Statements or threats made?	☐ Yes ☐	No 🗖 N/A	If yes, by whom?						
VICTIM R SUSPECT:	ELATIONSHIP		HISTORY						
	Dating		☐ History of Domestic '		☐ Death of V				
	Married		☐ Medical Treatment of		-	Charges Brought by Victim			
	Divorced Shared Siblings		Referral to a Shelter		-	rought by Officer			
	Co-Habitant		☐ Also Violence to Chil☐ Referral to DHS		☐ Sexual Ab	use to Uniid			
VICTIM MUST CIRCLE ANSW									
			I was struck			No			
			ıck			No			
			e person who struck me . o strike me			No No			
		-	o strike me			No No			
	•					No No			
	-		m unable to mark this po			No			
l affirm this information is true									
Victims Signature						•			
A copy of the Victim of DOMESTIC Further, I (ACCEPT / DECLINE) th of transportation to a shelter or at	e officer's offer of tra								
Victims Signature				Date					
Warrant Obtained	Yes	_ No	Obtained by:						
Arrest Made:	Yes	_ No	Explain:						
			NARRATIVE						
			VALUIATIVE	·					
		·							

• •					CHECK LIST AND BODY DIAGRAM					
Identify all sites of injuries and complaints of pain					The state of the s					
	Victim	(₹ 13		Any and all weapons used in domestic violence assaults which are confiscated T.C.A. 36-3-620					
_	VICIIII	و المستقبل	(1 % ·)		List confiscated weapons brief description:					
	Suspect	(,,)								
		11-41	إن أربرا							
		// · \\	M 14							
		$ (\vee) $	V Y W		Arrest made by officer. Bond Release Notification filed.					
				0	Private Prosecutor					
			\	Co	ust Dranavation					
) =	Co	urt Preparation					
		\	\		Written and signed statement taken from suspect.					
		73 <u>6</u>			Written and signed statement taken from victim. Written and signed statement taken from witnesses.					
_			\sim		Photographs taken of victim.					
	Victim	العَيْدُ الْمُ			Photographs taken of property damage.					
	Suspect			As	sistance requested from Victim/Witness Coordinator					
		11 11	1\1\1		Photographs of victim 24-48 hours after assault.					
		(1) . 11)	1111		E-911 tape of initial call.					
		19~11	11 Y W	5	Witness subpoenas Victim subpoenas					
			A P		List subpoenas needed (name and address)					
		\ \d. \d								
		()			Number of prior calls to this address.					
) ¥ (/ [/		Victim needs referral to a shelter.					
		لا الدائم	રશ્ક							
	SOL	VABILITY	FACTOR	o DEI	PORTING OFFICER SHALL COMPLETE					
			ACION	- NI-	PORTING OFFICER SHALL COMPLETE ••					
	ARREST MA			WITNESS TO	O CRIME SIGNIFICANT M. O (ADDRESS IN NARRATIVE)					
		NT(S) ATTACHED		SUSPECT N	— 3331 E31 DE331 IDED					
_		T PHYSICAL EVIDE			AN BE LOCATED USUSPECT VEHICLE DESCRIBED					
		AN BE IDENTIFIED NE PROCESSED	_		BE SOLVED WITH REASONABLE FOLLOW-UP?					
-	MINIE SCEI	NE PROCESSED	u	PATROL INV	ESTIGATION CONTINUING?					
				A	DMONITION					
KNO	WHOL FOR WING THAT	THE OFFENSE OF	REPORT TO A LA R INCIDENT DID N	REPORT IS T W ENFORCE IOT OCCUR.	TRUE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT IT SHALL BE EMENT OFFICER AN OFFENSE OR INCIDENT WITHIN THE OFFICER'S CONCERN, OR KNOWING THE PERSON REPORTING HAS NO INFORMATION RELATING TO I RELATING TO THE OFFENSE OF INCIDENT IS FALSE. (T.C.A. 39-16-502)					
VIOL	ATION OF T		LL BE A CLASS A	MISDEMEA	NOR, WHICH CARRIES A JAIL SENTENCE OF NOT GREATER THAN 11 MONTHS					
					APPROVING SUPERVISORID#					