



CITIZEN CRIME REPORT

Received By:	Date Received	Time Received

Police Personnel Use Only

(FOLD HERE)

This report form permits you to quickly and easily report a crime in which you have been a victim.
 This report will be reviewed by a police officer of the Sapulpa Police Department.
 If any other information is needed the Sapulpa Police Department will contact you.

- DIRECTIONS -

1. PLEASE PRINT OR TYPE. DO NOT USE PENCIL.
2. ANSWER ALL QUESTIONS.
3. WHEN FINISHED, FOLD ON LINES, STAMP, MAIL, OR BRING TO ADDRESS BELOW.

PLACE
STAMP
HERE

**SAPULPA POLICE DEPARTMENT
 20 NORTH WALNUT
 SAPULPA, OK 74066**

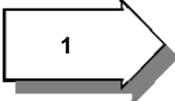
ATTN: Detective Division

INCIDENT NUMBER

DIRECTIONS

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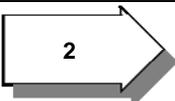
- It is **UNLAWFUL** to **FALSELY** Report a **CRIME**. **YOUR** Completion of this Report indicates **YOU** will assist in the Prosecution of this **CRIME**.
- If the **VICTIM** of this **CRIME** is a **Company** or **Business**, Please complete **Section 1**.
- If **YOU** are the **REPORTING PARTY** and **VICTIM** of this **CRIME**, Please place **YOUR** information in the first group of boxes in **Section 2** and mark the box indicating **YOU** are the **VICTIM** too.
- If there are other **Individuals** involved in this **CRIME**, Please provide their information and mark the appropriate box(s) with their information.



IS THE VICTIM OF THIS CRIME A BUSINESS OR COMPANY: YES NO

IF YOU ANSWERED (YES), PLEASE PLACE YOUR BUSINESS OR COMPANY INFORMATION IN THE FOLLOWING FIELDS:

BUSINESS NAME
BUSINESS ADDRESS
BUSINESS PHONE



LIST YOUR REPORTING PARTY INFORMATION: I am also a **VICTIM** in this **CRIME**

LAST NAME			FIRST NAME			MIDDLE NAME			
DATE OF BIRTH		BIRTH CITY		BIRTH STATE		MARITAL STATUS			
Social Security Number		Driver License Number		Driver License State		Other			
RACE	SEX	HAIR COLOR	EYE COLOR	SKIN COLOR	BUILD	HISPANIC	HEIGHT	WEIGHT	INDIAN TRIBE
						y or n			
Home Address					City		State	Zip Code	
Home Phone Number		Cellular Phone Number		Pager Number		Other			
() -		() -		() -					
Employment Address					City		State	Zip Code	
Work Phone Number		Extension							
() -									

INDIVIDUAL **VICTIM** **WITNESS** **SUSPECT**

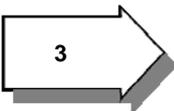
LAST NAME			FIRST NAME			MIDDLE NAME			
DATE OF BIRTH		BIRTH CITY		BIRTH STATE		MARITAL STATUS			
Social Security Number		Driver License Number		Driver License State		Other			
RACE	SEX	HAIR COLOR	EYE COLOR	SKIN COLOR	BUILD	HISPANIC	HEIGHT	WEIGHT	INDIAN TRIBE
						y or n			
Home Address					City		State	Zip Code	
Home Phone Number		Cellular Phone Number		Pager Number		Other			
() -		() -		() -					
Employment Address					City		State	Zip Code	
Work Phone Number		Extension							
() -									

INDIVIDUAL VICTIM WITNESS SUSPECT

LAST NAME			FIRST NAME			MIDDLE NAME			
DATE OF BIRTH		BIRTH CITY		BIRTH STATE		MARITAL STATUS			
Social Security Number		Driver License Number		Driver License State		Other			
RACE	SEX	HAIR COLOR	EYE COLOR	SKIN COLOR	BUILD	HISPANIC y or no	HEIGHT	WEIGHT	INDIAN TRIBE
Home Address				City		State		Zip Code	
Home Phone Number		Cellular Phone Number		Pager Number		Other			
() -		() -		() -					
Employment Address				City		State		Zip Code	
Work Phone Number		Extension							
() -									

SUSPECT VICTIM VANDALIZED

REGISTERED OWNER			REGISTERED OWNER ADDRESS			CITY		STATE	
TAG NUMBER	TAG YR.	VEHICLE YR.	STATE	VEHICLE STYLE		MAKE		MODEL	
COLOR		VEHICLE IDENTIFICATION NUMBER			DISTINGUISHING MARKS				
ESTIMATED VALUE									



WHEN AND WHERE DID THIS CRIME OCCUR ?

A. IF YOU KNOW APPROXIMATELY WHAT TIME THE CRIME HAPPENED :

:	:	AM	- OR -
:	:	PM	

B. IF YOU DON'T KNOW EXACTLY WHEN THE CRIME HAPPENED:
 (FOR EXAMPLE : You go to sleep at 11:00 PM on Friday night. You wake up Saturday morning at 8:00 AM and find out you are the victim of a crime. The crime happened BETWEEN Friday at 11:00 PM AND Saturday at 8:00 AM)

C. THIS CRIME HAPPENED:
 BETWEEN

 AM AND

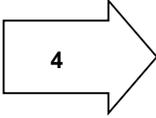
 AM

 PM AND

 PM

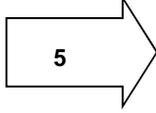
Day of Week (on or about)	Month	Year
ON		

AT LOCATION / ADDRESS	APT	CITY	STATE	ZIP
		SAPULPA, OK		



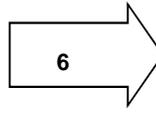
WHERE DID THIS CRIME TAKE PLACE ?

STREET ADDRESS / (LOCATION) :	APT.	CITY	STATE	ZIP



LIST THE PROPERTY THAT WAS LOST, STOLEN OR DAMAGED

ITEM	DESCRIPTION	SERIAL NUMBER	VALUE	LOST	STOLEN	DAMAGED
	EXAMPLE - SONY 19" COLOR TV	A-3236	\$375.00		x	
	EXAMPLE - 1987 PONTIAC GRAND AM	LICENSE IZN-432	\$130.00			x
1						
2						
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20						



HAVE ANY OTHER REPORTS BEEN MADE ON THIS CRIME?

NO YES - IF YES, BY WHOM

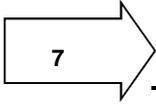
POLICE OFFICER YOURSELF OTHER _____

DID YOU OR SOMEONE ELSE SEE THE SUSPECTS COMMIT THE CRIME?

NO YES

LIST EVERYONE THAT SAW OR MAY HAVE FIRST-HAND INFORMATION ABOUT THE CRIME :

- 1 _____
- 2 _____
- 3 _____
- 4 _____
- 5 _____



DESCRIBE EXACTLY WHAT HAPPENED. INCLUDE ALL DETAILS OF THE CRIME.

EXAMPLE : I woke up at 8:00 AM and found my car broken into. They broke my left front window with a rock to get in. They stole my stereo and tapes. My neighbor saw two men in my car at 7:00 AM.

This Example tells : WHEN it happened WHERE the crime occurred WHO saw what WHY if known
WHAT was stolen or damaged WHO did what HOW they did it WHAT they used to do it

Multiple horizontal lines for writing the crime description.

Issuing Officer	Badge Number	Date Issued	Time Issued	Incident/Crime type

For Sapulpa Police Department Use Only

Reviewed By :	Date :	Data Entry By:	Date :	Assigned To :	Date :