UNIFORM CRIME REPORTS OFFENSE FORM

AGENCY NAME _____ AGENCY ORI _____ REPORTING PERIOD _____

	CLASSIFICATION OF OFFENSES	TOTAL NUMBER OF OFFENSES	TOTAL CLEARANCES				TOTAL VALUE PROPERTY STOLEN	WEAPON				DOMESTIC VIOLENCE	Offenses	RELATIONSHIP OF VICTIM TO OFFENDER							Arrests
			Arrest	Exception	Adult	Juvenile		Firearm	Knife/ Cutting Inst.	Other Dangerous	Hands, Fists, Feet			Spouse	Parent	Child	Sibling	Other Family	Cohabit.	Other	
MURDER	Criminal Homicide																				
MURDER	*Manslaughter*																				
SEX	Forcible Rape, Committed																				
SEX	Forcible Rape, Attempted																				
SEX	Forcible Sodomy																				
SEX	Forcible Fondling																				
ROBBERY	Highway																				
ROBBERY	Commercial Other																				
ROBBERY	Gas/Service Station																				
ROBBERY	Convenience																				
ROBBERY	Residence																				
ROBBERY	Bank																				
ROBBERY	Miscellaneous																				
ASSAULT	Aggravated																				
ASSAULT	Aggravated Stalking																				
	TOTAL VIOLENT *(Excluding Manslaughter)*																				
SIMPLE	Simple																				
SIMPLE	Threat/Intimidation																				
SIMPLE	Simple Stalking																				
							TOTAL DOMESTIC VIOLENCE														

Prepared By _____

Telephone _____

Date _____

FOR FDLE USE ONLY

UNIFORM CRIME REPORTS OFFENSE FORM

CLASSIFICATION OF OFFENSES		TOTAL NUMBER OF OFFENSES	TOTAL CLEARANCES				TOTAL VALUE PROPERTY STOLEN
			Arrests	Exception	Adult	Juvenile	
BURGLARY	Forcible Entry						
	Unlawful Entry						
	Attempted						
	Residence						
	Night						
	Day						
	Unknown						
	Non-Residence						
	Night						
	Day						
	Unknown						
LARCENY	Pocket Picking						
	Purse Snatching						
	Shoplifting						
	From Motor Vehicle						
	Motor Vehicle Parts						
	Bicycles						
	From Building						
	From Coin Oper. Dev.						
	All Other						
	$200 & Over						
	$50 - $200						
	Under $50						
MOTOR VEH. THEFT	Auto						
	Trucks & Buses						
	Motorcycles						
	Other Vehicles						
TOTAL NON-VIOLENT							
TOTAL OFFENSES							

ARSON						
LOCATION	TOTAL INHABITED	TOTAL ABANDONED	ATTEMPTED	TOTAL DOLLAR LOSS	CLEARANCES	
					Adult	Juv
Single Occup. Residence						
Other Residence						
Storage						
Industrial/Manufacturing						
Commercial						
Community/Public						
All Other Structures						
Motor Vehicles						
Other Mobile						
Other						
TOTAL						

PROPERTY INFORMATION/VALUES		
TYPE PROPERTY	STOLEN VALUE	RECOVERED VALUE
Currency, Note, Etc.		
Jewelry, Precious Metals		
Clothing & Furs		
Motor Vehicles		
Auto		
Trucks & Buses		
Motorcycles		
Other Vehicles		
Office Equipment		
TV's, Radios, Stereos		
Firearms		
Household Goods		
Consumable Goods		
Livestock		
Miscellaneous		
TOTAL PROPERTY		

Vehicle Recovery	
	Number
Stolen Locally and Recovered Locally	
Stolen Locally and Recovered by Other Jurisdiction	
Stolen in Other Jurisdiction and Recovered Locally	

UNIFORM CRIME REPORTS ARREST FORM

OFFENSE	TOTAL ARRESTED	JUVENILES			ADULTS			RACE			
==========	======	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	WHITE	BLACK	INDIAN	ORIENTAL
HOMICIDE											
MURDER											
MANSLAUGHTER											
FORC. SEX OFFENSE											
FORC. RAPE											
FORC. SODOMY											
FORC. FONDLING											
ROBBERY											
AGGRAVATED ASSAULT											
AGGRAVATED STALKING											
BURGLARY											
LARCENY/THEFT											
POCKET PICKING											
PURSE SNATCHING											
SHOPLIFTING											
FROM MOTOR VEH.											
THEFT OF MV PARTS/AC											
THEFT OF BICYCLE											
FROM BLDG.											
FROM COIN MACHINE											
ALL OTHER											
MOTOR VEHICLE THEFT											
KIDNAP/ABDUCTION											
ARSON											
SIMPLE ASSAULT											
SIMPLE STALKING											
DRUGS/NARC OFF.											
DRUG/NARC.											
DRUG/EQUIP											

AGENCY NAME _____ AGENCY ORI _____ REPORTING PERIOD _____

UNIFORM CRIME REPORTS ARREST FORM

OFFENSE	TOTAL ARRESTED	JUVENILES			ADULTS			RACE			
==========	======	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	WHITE	BLACK	INDIAN	ORIENTAL
BRIBERY											
EMBEZZLEMENT											
FRAUD											
FALSE PRET/SWIND											
CREDIT CARD/ATM											
IMPERSONATION											
WELFARE											
WIRE											
COUNTERFEIT/FORGERY											
EXTORTION/BLACKMAIL											
INTIMIDATION											
PROSTITUTION											
NON-FORC. SEX OFF.											
SEX OFFENSE											
OBSCENITY											
STOLEN PROPERTY											
DUI											
DESTRUCT/DAMAGE											
GAMBLING											
WEAPONS VIOLATIONS											
LIQUOR LAW VIOLATIONS											
MISCELLANEOUS											
TOTAL											

AGENCY NAME _____ AGENCY ORI _____ REPORTING PERIOD _____

UNIFORM CRIME REPORTS LAW ENFORCEMENT
OFFICER KILLED OR ASSAULTED REPORT SUPPLEMENT

AGENCY NAME _____ **AGENCY ORI** _____ **REPORTING PERIOD** _____

CODES

Incident Type
1. Officer Killed, Felonious
2. Officer Killed, Accident or Negligence
3. Officer Assaulted, No Injury
4. Officer Assaulted, Minor Injury
5. Officer Assaulted, Serious Injury

Officer Activity
01. Responding to Disturbance
02. Breaking and Entering in Process or Pursuing B&E Suspect
03. Robbery in Process or Pursuing Robbery Suspect
04. Attempting Other Arrests
05. Civil Disorder
06. Domestic Disturbance
07. Handling, Transporting, Custody of Prisoners
08. Investigating Suspicious Persons/Circumstances
09. Ambush, No Warning
10. Assailant Mentally Deranged
11. Traffic Pursuit or Stop
12. Other

Type of Assignment
1. One Person Vehicle, Alone
2. One Person Vehicle, Assisted
3. Two Person Vehicle
4. Detective or Special Assignment, Alone
5. Detective or Special Assignment, Assisted
6. Traffic, Motorcycle Officer
7. Other, Alone
8. Other, Assisted

Weapon
00. N/A
01. Handgun
02. Rifle
03. Shotgun
04. Firearm
05. Knife/Cutting Instrument
06. Blunt Object
07. Hands/Fist/Feet
08. Poison
09. Explosives
10. Fire/Incendiary
13. Drugs
88. Unknown
99. Other

Armor Prevent Injury?
Officer Aware of Weapon?
0. Not Applicable
1. Yes
2. No
8. Unknown

Body Armor?
Officer's Weapon Used?
Firearm Discharged by Officer?
Offender Injured?
Firearm Discharged by Offender?
1. Yes
2. No
8. Unknown

Extend of Offender Injuries?
0. Not Applicable
1. Minor
2. Moderate
3. Serious
4. Fatal

Sex
M- Male
F- Female
U-Unknown (Offender Only)

Race
W- White
B- Black
I- American Indian
O- Oriental
U- Unk(Offndr Only)

Cleared?
Y- Yes
N- No

Report Number	Incident Type	Officer Activity	Type Assignment	Weapon Type	Was Officer Wearing Body Armor?	Did Body Armor Prevent Serious Injury?	Did Offender Use Officer's Weapon?	Was Officer Aware Offender had a Weapon?	Was A Firearm Discharged By The Offender?	Distance In Feet (Est.)	Was A Firearm Discharged By The Officer?	Was Offender Injured?	Extent of Injuries	Time	Officer's Experience in Years	Officer's			Offender's			Cleared?
																Age	Sex	Race	Age	Sex	Race	

PREPARED BY: _____ TELEPHONE# _____ DATE PREPARED _____

UNIFORM CRIME REPORTS SUPPLEMENTAL HOMICIDE REPORT

Agency Name _____ AGENCY ORI _____ REPORTING PERIOD _____

CODES

Sex	Race	Situation Code	Victim Relationship
M- Male F- Female U- Unknown	W- White B- Black I- American Indian O- Oriental/ Asian U- Unknown	A- Single Victim / Single Offender B- Single Victim / Multiple Offenders C- Single Victim / Unknown Offender(s) D- Multiple Victims / Single Offender E- Multiple Victims / Multiple Offenders F- Multiple Victims/ Unknown Offender(s)	S- Spouse P- Parent C- Child B- Sibling O- Other Family H- Co-Habitant Z- Other U- Unknown

Weapon			Circumstances: Homicide		Circumstances: Negligent Manslaughter	
00 - N/A 01 - Handgun 02 - Rifle 03 - Shotgun 04 - Firearm	05 - Knife/Cutting Instr. 06 - Blunt Object 07 - Hands/Fist/Feet 08 - Poison 09 - Explosives	10 - Fire/Incendiary 13 - Drugs 88 - Unknown 99 - Other	A- Drinking Argument D- Drug Related Argument F- Other Felony Involved G- Gangland J- Juvenile Gang	L- Lover's Quarrel M- Money Argument P- While Incarcerated U- Unknown Z- Other	1- Child Playing with Weapon 2- Gun Cleaning Accident 3- Hunting Accident	4- Other Negligent Weapon Handling 5- Vehicular Negligence 6- Other Negligence

Justifiable Circumstances	Code		
1- Not Applicable 2- Felon Killed by Private Citizen 3- Felon Killed by Police Officer	1- Not Applicable 2- Felon Attacked Police Officer 3- Felon Attacked Fellow Police Officer	4- Felon Attacked Civilian 5- Felon Attempted Flight From Crime 6- Felon Killed in Commission of Crime	7- Felon Resisted Arrest 8- Unable to Determine

Report Number	Report Date	Victim			Offender			Situation Code	Victim Relationship	Weapon Type	Circumstance Code	Justifiable Circumstanc	Justified Code
		Age	Sex	Race	Age	Sex	Race						

PREPARED BY _____ TELEPHONE# _____ DATE PREPARED _____

Law Enforcement Officer
Supplemental Death Report

INCIDENT

AGENCY ORI

AGENCY NAME

DATE OF DEATH (MM DD YYYY)

TIME OF DEATH (MILITARY)

CASE NUMBER (IF APPLICABLE)

CAUSE OF DEATH

CRIMINAL ☐ ACCIDENTAL ☐ NATURAL ☐ OTHER ☐

OFFICER

NAME (LAST, FIRST, MIDDLE)

RACE

SEX

AGE

TITLE / RANK

YEARS EXPERIENCE

YEARS WITH AGENCY

CURRENT ASSIGNED UNIT

PREVIOUSLY ASSIGNED UNITS

SURVIVED BY (OPTIONAL) - PLEASE ATTACH PHOTO IF AVAILABLE

EVENT SYNOPSIS

OFFICER ON DUTY?

☐ YES ☐ NO

WAS OFFICER ANSWERING CALL?

☐ YES ☐ NO

SYNOPSIS OF CIRCUMSTANCES SURROUNDING OFFICER'S DEATH (ATTACH ADDITIONAL PAGES IF NEEDED)

ASSAILANT

NAME (LAST, FIRST, MIDDLE)

FBI#

FDLE#

NUMBER ACCOMPLICES

ASSAILANT ARRESTED

☐ YES ☐ NO

IF YES

DATE

TIME

OBTS NUMBER

ASSAILANT KILLED?

☐ YES ☐ NO

IF YES

DATE

TIME

ACCOMPLICES

NAME OF ACCOMPLICE(S)	FBI#	FDLE#	ARRESTED	KILLED
			☐ YES ☐ NO	☐ YES ☐ NO
			☐ YES ☐ NO	☐ YES ☐ NO
			☐ YES ☐ NO	☐ YES ☐ NO
			☐ YES ☐ NO	☐ YES ☐ NO

ADDITIONAL COMMENTS