

M #/Incident # _____

Victim:

Last Name: _____

First Name: _____

Middle Name: _____

Residential Address: _____

District _____

Homeless: 0. No 1. Yes 9. Unknown

DOB: ____/____/____

Person's Sex: 1. Male 2. Female 9. Unknown

Race: White Black Asian Pacific Islander
 American Indian Other Unspecified

Ethnicity: 0. Not Hispanic or Latino 1. Hispanic or Latino
9. Unknown

Marital Status: 1. Married 2. Never Married 3. Widowed
4. Divorced 5. Married, but separated 9. Unknown

Education: 0. 8th grade or less 1. 9th-12th grade; no diploma
2. High School graduate or GED completed 3. Some college
but no degree 4. Associate degree (e.g. AA, AS) 5. Bachelor's
degree (e.g. BA, BS) 6. Master's degree (e.g. MA, MS) 7.
Doctorate (e.g. PhD, EdD, MD) 9. Unknown

Criminal History:

____ Number of Prior drug arrests
____ Number of Prior drug convictions
____ Number of Prior violent crime arrests
____ Number of Prior violent crime convictions
____ Number of Prior weapon arrests
____ Number of Prior weapon convictions

In the past 12 months (check all that apply):

Victim had contact with police
Household had contact with police
Victim had contact with Juvenile justice system
Victim had contact with mental health services

Victim was:	No	Yes
Identified as a drug dealer	<input type="checkbox"/>	<input type="checkbox"/>
Witness to another crime	<input type="checkbox"/>	<input type="checkbox"/>
In possession of illegal drugs	<input type="checkbox"/>	<input type="checkbox"/>
Identified as a drug buyer	<input type="checkbox"/>	<input type="checkbox"/>
Buying drugs at time of incident	<input type="checkbox"/>	<input type="checkbox"/>
Selling drugs at time of incident	<input type="checkbox"/>	<input type="checkbox"/>
On Supervision w/ DOC	<input type="checkbox"/>	<input type="checkbox"/>

Victim :	No	Yes
In a gang	<input type="checkbox"/>	<input type="checkbox"/>
In a crew	<input type="checkbox"/>	<input type="checkbox"/>
If yes, what is the name _____		

Suspect (s):

Last Name: _____

First Name: _____

Middle Name: _____

Residential Address: _____

District: _____

Homeless: 0. No 1. Yes 9. Unknown

DOB: ____/____/____

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Race: White Black Asian Pacific Islander
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Criminal History:

____ Number of Prior drug arrests
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____ Number of Prior violent crime convictions
____ Number of Prior weapon arrests
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In the past 12 months (check all that apply):

Suspect had contact with police
Household had contact with police
Suspect had contact with Juvenile justice system
Suspect had contact with mental health services

Suspect was:	No	Yes
Identified as a drug dealer	<input type="checkbox"/>	<input type="checkbox"/>
Witness to another crime	<input type="checkbox"/>	<input type="checkbox"/>
In possession of illegal drugs	<input type="checkbox"/>	<input type="checkbox"/>
Identified as a drug buyer	<input type="checkbox"/>	<input type="checkbox"/>
Buying drugs at time of incident	<input type="checkbox"/>	<input type="checkbox"/>
Selling drugs at time of incident	<input type="checkbox"/>	<input type="checkbox"/>
On Supervision w/ DOC	<input type="checkbox"/>	<input type="checkbox"/>

Suspect:	No	Yes
In a gang	<input type="checkbox"/>	<input type="checkbox"/>
In a crew	<input type="checkbox"/>	<input type="checkbox"/>
If yes, what is the name _____		

Page may need to be duplicated for multiple victims/suspects

Homicide/Shooting Location

Incident Date & Time ___/___/____, ___:___ (military time)

Day of the week: _____

Incident Address: _____

License Premise

- Corner Store
- Tavern
- PA33 Completed Yes No
- # of prior PA33 _____

Nuisance Property

Status of Nuisance _____

Check all that apply:

- Argument over money/property** **Jealousy (lovers' triangle)** **Domestic violence related** **Burglary**
- Argument, abuse, conflict** **Hate crime** **Gambling** **Sexual Assault** **Victim was a bystander** **Arson**
- Victim was intervener assisting crime victim** **Witness intimidation/elimination** **Citizen self defense**
- Robbery** **Drug involvement** **Gang involvement**

If robbery related, what type:

- Street
- Home invasion
- Business
- Car Jacking

If drug involvement, was it related to

- Conflict over drug territory
- Robbery of a drug dealer that occurred during the selling of drugs?
- Robbery of a drug buyer that occurred during the purchase of drugs?
- Punishment for violation of normative rules governing the distribution/sale of drugs?
- Conflict over drug theft that occurred at an earlier time?
- Conflict over the quality, type or amount of drugs purchased?
- Effort to obtain money to purchase drugs?
- Failure to pay drug debt?

Type of drugs involved: _____

Neighborhood Issues

Gang Territory

Which Gangs _____

Drug Houses

How many _____
Locations _____

Nuisance Properties

How many _____
Locations _____

Block Watch

How many _____
Locations _____

Neighborhood Groups

Name _____
Location _____

Associates of Victim

Name _____

DOB _____

Address _____

Phone _____

Name _____

DOB _____

Address _____

Phone _____

Name _____

DOB _____

Address _____

Phone _____

Associates of Suspect

Name _____

DOB _____

Address _____

Phone _____

Name _____

DOB _____

Address _____

Phone _____

Name _____

DOB _____

Address _____

Phone _____

Eye Witnesses

Name _____

DOB _____

Address _____

Phone _____

Name _____

DOB _____

Address _____

Phone _____

Name _____

DOB _____

Address _____

Phone _____