South Bend Police Security Incident Report

Case Number
Supervisor Use Only: Name/PN:
Refer to Prosecutors Office

						utors Office	
Date Reported Time F	Reported		Date Occurred (Month	, Day, Year)	Time Occ	urred (24hr.)	
Incident Location/Address							
Offense #1 (Primary) (Check one as application	able)		Offense #2				
☐ Theft (Shoplift)	/		☐ Theft (Shoplift)				
Other			☐ Other				
☐ Criminal Trespass			☐ Criminal Trespass				
		Suspe	ct #1				
Suspect Name (Last, First, Middle)		Sex	Race	HT	WT	Hair	Eyes
		☐ Male	☐ White ☐ Black				
		☐ Female		-			
			Unknown	DOB:	1	/	
Mailing Address (Include apartment numbers)		City/State	Zip C	ode	Phone	☐Home ☐Wo	rk
Occupation	Employer/S	School		Military Bi			
				□Army	□Navy []AirForce ☐M	larine
				CO:			
Type of Identifications Provided:			□ Other /	Clarify in nor	rativa)		
No I.D. Verbal Only		Ctata:		Clarify in nar			
Drivers License #		State:	State II	D Card #			
Social Security #							
☐ No I.D. Identified by Police-Officers Name							
Resident? Yes				Statement?			
Clarify suspect release disposition and po					Suspect L	_Adult Susp	ect
Released to Parent/Guardian (Name):							
Released to Police (Officer's Name):							
☐Released by Security ☐Police Response	nded Polic	e Assisted C					
Released by Security Police Response	onded □Polic	e Assisted C Suspe					
	onded Polic	Suspe Sex	ect #2 Race	НТ	WT	Hair	Eyes
Released by Security Police Response	onded □Polic	Suspe Sex Male	Race White Black	НТ	WT	Hair	Eyes
Released by Security Police Response	onded Polic	Suspe Sex	Race Black Asian Indian		WT	Hair	Eyes
Released by Security Police Response		Suspe	Race White Black Asian Indian Unknown	DOB:	/	1	
Released by Security Police Response		Suspe Sex Male	Race Black Asian Indian	DOB:	/	Hair /	
Released by Security Police Response		Suspe	Race White Black Asian Indian Unknown	DOB:	/	1	
Released by Security Police Responsible Suspect Name (Last, First, Middle) Mailing Address (Include apartment numbers)		Suspe	Race White Black Asian Indian Unknown	DOB:	/ Phone	1	
Released by Security Police Response		Suspe	Race White Black Asian Indian Unknown	DOB:	/ Phone	/ □Home □Wo	rk
Released by Security Police Responsible Suspect Name (Last, First, Middle) Mailing Address (Include apartment numbers)		Suspe	Race White Black Asian Indian Unknown	DOB:	/ Phone	1	rk
Released by Security Police Responsible Suspect Name (Last, First, Middle) Mailing Address (Include apartment numbers) Occupation		Suspe	Race White Black Asian Indian Unknown	DOB:	/ Phone	/ □Home □Wo	rk
□Released by Security □Police Responsible Suspect Name (Last, First, Middle) Mailing Address (Include apartment numbers) Occupation Type of Identifications Provided:		Suspe	Race White Black Asian Indian Unknown	DOB: Code Military Bi	Phone ranch Navy	/ □Home □Wo	rk
□Released by Security □Police Responsible Suspect Name (Last, First, Middle) Mailing Address (Include apartment numbers) Occupation Type of Identifications Provided: □ No I.D. Verbal Only	Employer/S	Suspe	Race White Black Asian Indian Unknown Zip C	DOB: Code Military Bi Army CO: Clarify in name	Phone Panch Navy rative)	/ □Home □Wo □AirForce □M	rk larine
□ Released by Security □ Police Responsible Suspect Name (Last, First, Middle) Mailing Address (Include apartment numbers) Occupation Type of Identifications Provided: □ No I.D. Verbal Only □ Drivers License #	Employer/S	Suspe	Race White Black Asian Indian Unknown Zip C	DOB: Code Military Bi	Phone Panch Navy rative)	/ □Home □Wo □AirForce □M	rk larine
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Complainant/Witness Primary Complainant/Witness Name (Last, First, Middle) Date of Birth Job Title/Security Co. Sex Race ☐ Male ☐ White ☐ Black ☐ Female Asian | Indian Unknown Zip Code Subpoena Address (Include apartment numbers) City/State **Contact Phone** Resident? ☐ Yes ☐ No Statement? ☐ Yes ☐ No Witness Date of Birth Job Title/Security Co. Witness Name (Last, First, Middle) Sex Race ☐ Male ☐ White ☐ Black ☐ Female ☐ Asian ☐ Indian Unknown Subpoena Address (Include apartment numbers) City/State Zip Code **Contact Phone** Resident? ☐Yes ☐No Statement? ☐Yes ☐No **Other Witness** ☐Detention Witness Only ☐CCTV Operator/Witness ☐Assisted with Stop Only ☐Sales Associate/Cashier ☐Initial Witness/Alerted Security Date of Birth Witness Name (Last, First, Middle) Sex Race ☐ Male ☐ White ☐ Black ☐ Asian ☐ Indian ☐ Female ☐ Unknown City/State Contact Phone Subpoena Address (Include apartment numbers) Zip Code Resident? Tyes No Statement? ☐Yes ☐No Physical Evidence Summary: (Mandatory) ☐ Evidence Detailed Individually in Property Report ☐ No Video Record Exists ☐ All Listed Merchandise Recovered ☐ Detention Room video Only **Evidence/Property Brand Name** QTY Individual Value **Article Type** @ Serial # Size Model # Internal # Color Recovered from Suspect (Name) Disposition: ☐ Photographed ☐ Recovered ☐ Returned to Stock (RTS) ☐ Not Recovered **Location Recovered From** Recovered by (Name) ☐ Retained as Evidence □ Damaged ☐ Destroyed/Disposed Of **Evidence/Property** Individual Value **Brand Name** QTY **Article Type @** Serial # Internal # Color Size Model # Recovered from Suspect (Name) Disposition: ☐ Photographed Recovered ☐ Returned to Stock (RTS) ☐ Not Recovered Location Recovered From Recovered by (Name) ☐ Retained as Evidence □ Damaged ☐ Destroyed/Disposed Of **Evidence/Property** QTY Individual Value **Brand Name Article Type** Size Internal # Color Serial # Model # Recovered from Suspect (Name) Disposition: ☐ Photographed □ Recovered ☐ Returned to Stock (RTS) ■ Not Recovered **Location Recovered From** Recovered by (Name) □ Damaged ☐ Retained as Evidence ☐ Destroyed/Disposed Of Additional Items Must be Recorded on the Property Continuation Form Total Value of All Items: \$

Security Incident Report (continuation)

Case Number

Evidence/Property Brand Name QTY Individual Value **Article Type @** Serial # Internal # Color Size Model # Recovered from Suspect (Name) Disposition: ☐ Photographed Recovered ☐ Returned to Stock (RTS) ☐ Not Recovered Location Recovered From Recovered by (Name) ☐ Retained as Evidence □ Damaged ☐ Destroyed/Disposed Of **Brand Name** QTY Individual Value **Article Type** Serial # Internal # Color Size Model # Recovered from Suspect (Name) Disposition: ☐ Photographed ☐ Recovered ☐ Returned to Stock (RTS) ☐ Not Recovered **Location Recovered From** Recovered by (Name) ☐ Retained as Evidence □ Damaged ☐ Destroyed/Disposed Of QTY Individual Value **Brand Name Article Type** \$ @ Model # Serial # Internal # Color Size Recovered from Suspect (Name) Disposition: Photographed Recovered ☐ Returned to Stock (RTS) ☐ Not Recovered **Location Recovered From** Recovered by (Name) ☐ Retained as Evidence □ Damaged ☐ Destroyed/Disposed Of **Brand Name** QTY Individual Value **Article Type** @ Color Internal # Size Model # Serial # Recovered from Suspect (Name) Disposition: ☐ Photographed Recovered ☐ Returned to Stock (RTS) ☐ Not Recovered **Location Recovered From** Recovered by (Name) ☐ Retained as Evidence □ Damaged ☐ Destroyed/Disposed Of **Brand Name** QTY Individual Value **Article Type** @ \$ Model # Serial # Internal # Color Size Recovered from Suspect (Name) Disposition: ☐ Photographed Recovered ☐ Returned to Stock (RTS) ■ Not Recovered Location Recovered From Recovered by (Name) ☐ Retained as Evidence □ Damaged ☐ Destroyed/Disposed Of **Article Type Brand Name** QTY Individual Value @ Internal # Size Serial # Color Model # Recovered from Suspect (Name) Disposition: ☐ Photographed Recovered ☐ Returned to Stock (RTS) ☐ Not Recovered **Location Recovered From** Recovered by (Name) □ Damaged ☐ Retained as Evidence ☐ Destroyed/Disposed Of

Security Incident Report (Property Form)

Case Number

Security Incident Report (Narrative)		Case Number
Report Narrative-Detail Incident & Describe Investigations		
		
certify (or declare) under penalty of perjury under restand I may be charged with violation of 35-44.1-2-3 False Reporting if knowingly filing a false repo	the laws of the State of Indian	a that the foregoing is true and corre
lerstand I may be charged with violation of 35-44.1-2-3 False Reporting if knowingly filing a false reporting of Saint Joseph, in the State of Indiana.	ort. Signed: On theday o	ofat City of South
gned) Mandatory! Must be pre	esent, signed/dated following each	n page of report narrative or statement.

TRESPASS NOTICE

10:						
YOU ARE HEREBY NOTIFIED THAT BECAUSE OF YOUR MISCONDUCT, YOUR PATRONAGE IS NO LONGER WELCOME AT						
LOCATED IN ST. JOSEPH COU						
SHOULD YOU ENTER THE PRE	EMISES OF					
AFTER SERVICE OF THIS NOT	ICE, YOU WILL BE PROSECUTED FOR A FINE OF UP TO \$5,000.00 AND					
•	E YEAR AS PROVIDED IN I.C. 35-43-2.					
DATE:	MANAGER / AGENT:					
SERVED ON (SIGNED / REFUSED):						
DATE	SERVED BY:					
	<u> </u>					
WITNESSED BY:						