

MAIL IN REPORT

HUMBOLDT COUNTY SHERIFF'S OFFICE
826 Fourth Street
Eureka, CA 95501-0516

SHERIFF'S OFFICE USE ONLY		Report No.
<input type="checkbox"/> Felony	<input type="checkbox"/> Infraction	
<input type="checkbox"/> Misdemeanor	<input type="checkbox"/> Incident	
Section/Code/Description		Area

RP/VICTIM REQUESTED MIR

Instructions: <ol style="list-style-type: none"> 1. Type or print in ball point pen only. 2. Be as descriptive as possible in identifying persons and property. 3. Use additional pages if necessary to complete the report. 4. Return the completed report in the envelope provided within 30 days. 5. The report is an official record to be used for investigative purposes. 							
Reporting Party (Name and address):				Location of incident (Address or describe):			
				Type of location (Home, business, etc.):			
Day of incident	Mo/day/yr	Time	am	pm	Method, device, tool, or instrument used:		
VICTIM: (Last) (First) (Middle)				Race	Sex	Birthdate	Age
Address: <input type="checkbox"/> Residence <input type="checkbox"/> Business		City		State	Zip	Phone	
OTHER: (Last) (First) (Middle)				Race	Sex	Birthdate	Age
Address: <input type="checkbox"/> Residence <input type="checkbox"/> Business		City		State	Zip	Phone	
Vehicles involved (Year, make, model, color, license number, state, any damage, etc.)							
Give a brief description of the incident:							
Fully describe what was		<input type="checkbox"/> Stolen	<input type="checkbox"/> Lost	<input type="checkbox"/> Damaged	Serial No.	\$\$\$Value	
1.							
2.							
3.							
4.							
I declare under penalty of perjury that the foregoing report is true and correct.				SHERIFF'S OFFICE USE ONLY			
				<input type="checkbox"/> Further	<input type="checkbox"/> File, No Further Investigation	<input type="checkbox"/> No Crime	
_____ Your signature				_____ Reviewed by		_____ Date	