

GENERAL OFFENSE CASE REPORT CHICAGO POLICE

1. OFFENSE/INCIDENT-PRIMARY CLASSIFICATION

2. SECONDARY CLASSIFICATION

3. R.D. NO.

4. ADDRESS OF OCCURRENCE NO. DIR. STREET

5. FIRE RELATED ☐ 1 YES ☐ 2 NO

6. DATE OF OCCURRENCE - TIME DAY NO. YR.

7. BEAT OF OCCUR. 8. BEAT/UNIT ASSGN.

9. TYPE OF LOCATION OR PREMISE WHERE OFFENSE OCCURRED (GIVE NAME OF LOCATION IF APPLICABLE)

10. LOCATION CODE

11. DATE R.O. ARRIVED - TIME

12. ASSIGNED BY ☐ 1 C.O.S. ☐ 2 ON VIEW ☐ 3 SUPERVISOR

All information, descriptions and statements in this entire report are approximations or summarizations unless indicated otherwise.

20. NO. VICTIMS

21. NAME (LAST-FIRST-M.I.)

22. HOME ADDRESS (NO., DIR., STREET, APT. NO.)

23. SEX-RACE-AGE CODE

24. HOME PHONE

25. BUSINESS PHONE

26. TIME AVAIL.

27. OCCUPATION

28. IN-JURED YES NO

29. VICTIM REL. CODE

ADDITIONAL VICTIMS

PARENT/GUARDIAN, IF JUVENILE

30. NO. VIT. 31. ☐ 1 DISCOVERED ☐ 2 WITNESSED ☐ 3 REPORTED OFFENSE

32.

33.

34.

35.

1. BLACK 2. WHITE 3. BLACK 4. WHITE 5. HISPANIC 6. ASIAN/PACIFIC ISLANDER 7. OTHER RELATIONSHIP CODES 8. BLANK

9. HUSBAND 10. WIFE 11. SISTER 12. BROTHER 13. MOTHER 14. FATHER 15. SON 16. DAUGHTER 17. OTHER 18. OTHER RELATIVE 19. OTHER RELATIVE 20. OTHER RELATIVE 21. OTHER RELATIVE 22. OTHER RELATIVE 23. OTHER RELATIVE 24. OTHER RELATIVE 25. OTHER RELATIVE

WITNESS

DNA ☐ UNK ☐

40. NO. OFF. 41. OFFENDER'S NAME (OR DESCRIBE CLOTHING, ETC.)

42. HOME ADDRESS

43. SEX-RACE-AGE CODE

44. C.B./I.R. NO.

45. OFFENDER REL. CODE

OFFENDER

DNA ☐ UNK ☐

50. 51. OBJECT/WEAPON ☐ 1 USED ☐ 2 DISPLAYED ☐ 3 UNK

52. FIREARM FEATURES

53. POINT/ENTRY

54. POINT/EXIT

55. BURGLAR ALARM

56. SAFE BURGLARY METHOD

57. IF RESIDENCE, WHERE WERE OCCUPANTS

58. UNUSUAL CHARACTERISTICS OF OFFENSE

59. GANG RELATED - AFFILIATION

60. VICTIM ☐ OFFENDER ☐

CIRCUMSTANCES

DNA ☐ UNK ☐

01. HAND GUN 02. SHOTGUN 03. RIFLE 04. KNIFE 05. VEHICLE 06. BLUNT INSTRUMENT 07. THROWN OBJECT

08. EXPLOSIVE 09. LIQUID/GAS 10. BOTTLE/GLASS 11. RAZOR 12. PRY TOOL 13. HAND, FEET 14. OTHER 15. DNA

01. CHROME/NICKEL 02. BLUE STEEL 03. SHORT BARREL 04. LONG BARREL 05. SAWED OFF 06. SIDE DOOR 07. OTHER 08. UNKNOWN 09. DNA

01. FRONT DOOR 02. REAR DOOR 03. WINDOW 04. ROOF 05. FLOOR 06. SIDE DOOR 07. OTHER 08. UNKNOWN 09. DNA

01. PUNCH 02. TORCH 03. EXPLOSIVE 04. DRILL 05. REMOVED

01. WORK 02. VISITING 03. VACATION 04. WEDDING 05. FUNERAL/WAKE

PROPERTY

70. 71. DESCRIBE PROPERTY IN NARRATIVE

72. VEHICLE/TRAILER 1 YEAR MAKE BODY STYLE COLOR V.I.N.

73. PROPERTY INVENTORY NO. 74. VEH. INVENTORY NO. FOUND

75. 1 MONEY 12 JEWELRY 13 FURS 14 CLOTHING 15 OTHER 16 NONE

17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100.

NARRATIVE (Do not duplicate or repeat information - for explanation or additional information only)

80. NARRATIVE (Do not duplicate or repeat information - for explanation or additional information only)

81. SOBRIETY OF VICTIM ☐ 1 SOBER ☐ 2 HBD

82. FLASH MESSAGE SENT? ☐ 1 YES ☐ 2 NO

POLICE PERSONNEL

90. 91. EXTRA COPIES REQUIRED ☐ NORMAL ☐ CONT'D. OTHER SIDE

92. OFFICER NOTIFYING FOLLOWUP INVESTIG. UNIT

93. FIRST OFFICER AT SCENE

94. OFFICER NOTIFYING ☐ 1ST D/S ☐ E.T. ☐ M.E.

95. REPORTING OFFICER'S NAME (PRINT) STAR NO. OFFICER'S SIGNATURE

96. REPORTING OFFICER'S NAME (PRINT) STAR NO. OFFICER'S SIGNATURE

97. SUPERVISOR APPROVING (PRINT NAME) STAR NO. APPROVAL SIGNATURE

98. DATE APPROVED - TIME

I HAVE REVIEWED THIS REPORT AND BY MY SIGNATURE INDICATE THAT IT IS ACCEPTABLE. I

DATE (DAY-MO-YR.)

FOR USE BY BUREAU OF INVESTIGATIVE SERVICES ONLY

| | | | | | | | | | |
|--|--|---|--|--|---|--|--|---|---|
| I-JCR OFFENSE CODE -
<input type="checkbox"/> 1 CORRECT
<input type="checkbox"/> 2 REVISED
OFFICER REASSIGNED -
STAR NO. | REV. CODE
DATE | I-JCR METHOD CODE
<input type="checkbox"/> 1 FIELD
<input type="checkbox"/> 2 ADMIN.
<input type="checkbox"/> 3 SUMMARY
<input type="checkbox"/> 4 CLEARED OPEN
<input type="checkbox"/> 5 EXC. CIRD. CLOSED
<input type="checkbox"/> 6 EXC. CLEARED OPEN
<input type="checkbox"/> 7 CLOSED-NON-CRIMINAL | METHOD ASSIGNED
<input type="checkbox"/> 1 FIELD
<input type="checkbox"/> 2 ADMIN.
<input type="checkbox"/> 3 SUMMARY
<input type="checkbox"/> 4 CLEARED OPEN
<input type="checkbox"/> 5 EXC. CIRD. CLOSED
<input type="checkbox"/> 6 EXC. CLEARED OPEN
<input type="checkbox"/> 7 CLOSED-NON-CRIMINAL | UNIT NO. | OFFICER ASSIGNED
STAR NO. | DATE ASSIGNED | SUPV. STAR NO. | INVESTIGATIVE FILE
<input type="checkbox"/> 1 YES
<input type="checkbox"/> 2 NO | REASSIGNED
<input type="checkbox"/> 1 YES
<input type="checkbox"/> 2 NO |
| VICTIM IDENTIFIERS
<input type="checkbox"/> 1 CORRECT
<input type="checkbox"/> 2 REVISED | M/CTIM NO. | STATUS
<input type="checkbox"/> 3 CLEARED CLOSED
<input type="checkbox"/> 4 CLEARED OPEN
<input type="checkbox"/> 5 EXC. CIRD. CLOSED
<input type="checkbox"/> 6 EXC. CLEARED OPEN
<input type="checkbox"/> 7 CLOSED-NON-CRIMINAL | IF CASE IS CLEARED, HOW CLEARED (USE THIS BOX FOR SINGLE CLEAR UP OR FIRST CLEAR UP OF MULTIPLE CLEAR UP LIST)
<input type="checkbox"/> 1 ARREST & PROSECUTION
<input type="checkbox"/> 2 DIRECTED TO FAMILY COURT
<input type="checkbox"/> 3 COMPL. REFUSED TO PROSECUTE
<input type="checkbox"/> 4 COMMUNITY ADJUSTMENT
<input type="checkbox"/> 5 OTHER EXCEPTIONAL
<input type="checkbox"/> 6 JUV. | REVISED ADDRESS | REVISED PHONE NO.
<input type="checkbox"/> HOME
<input type="checkbox"/> BUSINESS | | | | |
| VALUE OF PROPERTY TAKEN/RECOVERED
<input type="checkbox"/> 1 MONEY
<input type="checkbox"/> 2 JEWELRY
<input type="checkbox"/> 3 FURS
<input type="checkbox"/> 4 CLOTHING
<input type="checkbox"/> 5 OFFICE EQUIPMT.
<input type="checkbox"/> 6 TV. RADIO, STEREO
<input type="checkbox"/> 7 HOUSEHOLD GOODS
<input type="checkbox"/> 8 CONSUM. GOODS
<input type="checkbox"/> 9 FIREARMS
<input type="checkbox"/> 10 INARC/DANG. DRUGS
<input type="checkbox"/> 11 OTHER | <input type="checkbox"/> 1 CORRECT
<input type="checkbox"/> 2 REVISED | <input type="checkbox"/> 1 CORRECT
<input type="checkbox"/> 2 REVISED | <input type="checkbox"/> 1 CORRECT
<input type="checkbox"/> 2 REVISED | <input type="checkbox"/> 1 CORRECT
<input type="checkbox"/> 2 REVISED | <input type="checkbox"/> 1 CORRECT
<input type="checkbox"/> 2 REVISED | <input type="checkbox"/> 1 CORRECT
<input type="checkbox"/> 2 REVISED | <input type="checkbox"/> 1 CORRECT
<input type="checkbox"/> 2 REVISED | <input type="checkbox"/> 1 CORRECT
<input type="checkbox"/> 2 REVISED | <input type="checkbox"/> 1 CORRECT
<input type="checkbox"/> 2 REVISED |
| FILL IN THE FULL AMOUNT OF ONLY THOSE VALUES WHICH EITHER DIFFER FROM OR WERE NOT REPORTED ON THE REVERSE, THE NARRATIVE OR A SUPPLEMENTARY REPORT. | | | | | | | | | |
| LIST ALL CORRECTIONS & NEW OR ADDITIONAL NOS. OBTAINED | | | | | | | | | |

REMARKS (PERTINENT INFORMATION NOT ON ORIGINAL REPORT)

PREPARED BY - SIGNATURE

STAR NO. | DATE (DAY-MO-YR.)

APPROVED BY - SIGNATURE

STAR NO. | DATE (DAY-MO-YR.)

4. ADDRESS OF OCCURRENCE
NO. DIR. STREET
5. TYPE OF LOCATION OR PREMISE WHERE OFFENSE OCCURRED (GIVE NAME OF LOCATION IF APPLICABLE)
6. DATE OF OCCURRENCE - TIME
DAY MO. YR.
7. BEAT OF OCCUR
8. BEAT/UNIT ASSGN.

IMPORTANT: KEEP THIS NOTICE FOR YOUR PERSONAL RECORDS

CASE NAME - PEOPLE OF THE STATE OF ILLINOIS/CITY OF CHICAGO VS. _____
If an arrest has taken place, the following is your court information: Date: _____ Time: _____ Court Branch: _____ Court Loc.: _____
If you need more help call the Victim/Witness Assistance Program of the Cook County State's Attorney's Office at (773) 869 - 7200.

VICTIM INFORMATION NOTICE/ CHICAGO POLICE DEPARTMENT THIS IS NOT AN OFFICIAL POLICE REPORT - IT IS FOR INFORMATION PURPOSES ONLY

Your case will be on file with the Chicago Police Department under the above listed R.D. Number. Refer to this number whenever you are communicating with the Chicago Police Department concerning this incident. Your case will be assigned for follow-up investigation based upon specific facts obtained during the initial investigation. The presence of these facts can predict whether a comprehensive follow-up investigation would likely result in the arrest and prosecution of the suspect(s) or the recovery of property. Your case will be reviewed and retained to determine if criminals active in the area can be identified. A detective will not routinely contact you unless additional information is required or your further assistance is needed.

TO REPORT ADDITIONAL INFORMATION

If you have knowledge of specific facts which might assist in the investigation of your case, please contact the unit marked below:

- | | | |
|--|---|---|
| FOR PROPERTY CRIMES | FOR VIOLENT CRIMES | FOR YOUTH INVEST. |
| AREA 1 <input type="checkbox"/> (312) 747-8382 | <input type="checkbox"/> (312) 747-8380 | <input type="checkbox"/> (312) 747-8385 |
| AREA 2 <input type="checkbox"/> (312) 747-8273 | <input type="checkbox"/> (312) 747-8271 | <input type="checkbox"/> (312) 747-8276 |
| AREA 3 <input type="checkbox"/> (312) 744-8263 | <input type="checkbox"/> (312) 744-8261 | <input type="checkbox"/> (312) 744-8266 |
| AREA 4 <input type="checkbox"/> (312) 746-8253 | <input type="checkbox"/> (312) 746-8251 | <input type="checkbox"/> (312) 746-9259 |
| AREA 5 <input type="checkbox"/> (312) 746-8362 | <input type="checkbox"/> (312) 746-8282 | <input type="checkbox"/> (312) 746-8365 |
| BOMB & ARSON (all Areas) | <input type="checkbox"/> (312) 746-7619 | |

COPY OF THE REPORT: The above listed R.D. Number may suffice for insurance purposes. However, there may be instances when a copy of the case report is desired. A copy of the case report which verifies that an incident of injury, loss or damage has been reported to the Chicago Police Department may be obtained after 14 working days from the date the incident was reported. To obtain a copy of the report, send a check or money order payable to the **DEPARTMENT OF REVENUE - CITY OF CHICAGO** in the amount of \$.50 and a self-addressed stamped return envelope to: Chicago Police Department Headquarters, Records Inquiry Section, 1st Floor, 3510 South Michigan Avenue, Chicago, Illinois 60653. Include the following information with your request: 1) Victim's name and address (or person reporting crime), 2) Type of incident, 3) Address of occurrence, and 4) R.D. Number.

MAKE THE RIGHT CALL: To report a crime in progress or other emergency that requires immediate police response, call 911. To report non-emergency situations, call the Police Department at 311 within City limits, or if outside the City limits, call (312) 746-5000.

CHICAGO ALTERNATIVE POLICING STRATEGY (CAPS) **SAFE NEIGHBORHOODS ARE EVERYBODY'S BUSINESS**
The police alone cannot solve the problems of crime in our City. It takes an active and informed community working with the police and other City agencies to really make a difference. Join your neighbors and your neighborhood police officers as we work together to reduce crime and improve the quality of life in our City. Become part of the CAPS team in your community. To find out how, call:

CAPS HOTLINE: (312) 744-CAPS [(312) 744-2277] or 311

More information about CAPS is available on the **World Wide Web** at <http://www.cityofchicago.org/CAPS>.

You live on Beat _____ Your next Beat Community Meeting will be held on (date / time) _____ at (location) _____

TELECOMMUNICATIONS DEVICE FOR THE DEAF/TELETYPE (TDD/TTY)

Hearing-impaired persons who possess such equipment may communicate with the Chicago Police Department 24 hours a day by calling (312) 746 - 9715. Hearing-impaired persons in need of assistance during normal business hours may also contact their local police district or the Preventive Programs and Neighborhood Relations Division at (312) 745-6885.

OBTAINING A WARRANT OR SUMMONS FOR CRIMINAL CHARGES

If an arrest is made, you will be informed of the date, time, and location of the court proceedings at which your appearance will be required. When you report a crime and an arrest is not made, you may go in person to the appropriate court listed below to request that criminal proceedings be initiated by way of a warrant or summons. Bring this Victim Information Notice and any other relevant information, such as the offender's name, physical description, and home address to the warrant officer assigned to the court between 8:30 am and 11:30 am Monday through Friday (excluding court holidays). The warrant officer will then assist you in the process of obtaining the warrant or summons.*

| Police District of Occurrence | Court Branch for Warrant or Summons |
|---|-------------------------------------|
| <input type="checkbox"/> 14,15,16,17,25 | Branch 23 5555 W. Grand Ave. |
| <input type="checkbox"/> 18,19,20,23,24 | Branch 29 2452 W. Belmont Ave. |
| <input type="checkbox"/> 2,7,8,9,21 | Branch 34 155 W. 51st St. |
| <input type="checkbox"/> 3,4,5,6,22 | Branch 35 727 E. 111th St. |
| <input type="checkbox"/> 1,10,11,12,13 | Branch 43 3150 W. Flournoy St. |

* For incidents relating to domestic violence, a warrant/summons will only be issued from the Domestic Violence Court located at 1340 S. Michigan, on the first floor.

AUTOMATED VICTIM NOTIFICATION (AVN)

The County of Cook has a tollfree, multilingual, 24-hour Automated Victim Notification System. To obtain information about a defendant's court date or custody inside of Cook County Jail, call: 1-877-846-3445. Do not depend only on the AVN for your safety. If you feel that you may be in danger, take precautions as if the defendant has already been released.

ILLINOIS CRIME VICTIMS NOTIFICATION

Innocent victims of violent crime may be eligible to receive benefits from the Illinois Crime Victims Compensation Program for such costs as medical, funeral, loss of support and wage loss. NO RECOVERY IS PROVIDED FOR PROPERTY LOSS OR DAMAGE, NOR FOR PAIN OR SUFFERING. To apply or to determine whether one qualifies, the victim, or if deceased, a relative or dependent, must contact the Illinois Attorney General's Office. Further information and claim forms can be obtained from the Crime Victims Compensation Program, Office of the Attorney General of Illinois, 100 West Randolph Street, 13th Floor, Chicago, Illinois 60601, or by calling (312) 814-2581.

RECOVERY OF PROPERTY - STOLEN VEHICLE RECOVERED

The Chicago Police Department must be notified IMMEDIATELY, via the "911" emergency number, when property reported lost or stolen is recovered.

CREDIT CARDS - CHECKS, LOST OR STOLEN

Immediately notify the concerned credit card issuer or bank by telephone to reduce the possibility of being liable for the unauthorized use of your lost or stolen credit card or check. It is suggested that you also inform the credit card issuer or bank in writing as a follow-up measure to ensure proper notification.

GENERAL OFFENSE CASE REPORT

CHICAGO POLICE DEPARTMENT

CPD-11.380

FORM PREPARATION INSTRUCTIONS

PURPOSE: To record the preliminary investigation of all cases of bona fide offenses except for those cases which are reported on vehicle case reports, Vice Case Reports, Worthless Document Case Report, Miscellaneous Incident Exception Report and those cases which are handled by means of the miscellaneous incident procedure. Non-criminal cases are also reported elsewhere.

The numbers below refer to box numbers on the reporting form. If known, include apartment, floor and room number whenever an address is requested.

1. Offense/Incident-Primary Classification: Enter the offense using the Incident Reporting Guide as reference. Enter the Illinois Uniform Crime Reporting (I-UCR) offense code from the Incident Reporting Guide.
2. Secondary Classification: Enter the secondary classification using the Incident Reporting Guide as a reference.
3. Enter the R.D. number assigned to the report. Also record the R.D. number in the space provided on the reverse side of the report ONLY when a narrative is continued on the reverse.

BOXES 4 - 12: SCENE

4. Address of Occurrence: Enter street number, direction and street name supplied by complainant and/or investigation.
5. Fire Related: Check appropriate square if fire or explosion occurred.
6. Enter the date(s) of occurrence and the time or time span of occurrence.
7. Enter the correct beat of occurrence using the current beat map.
8. Enter the beat or unit assigned to the investigation.
9. Enter type and name of location of occurrence. Refer to Location Codes on outside cover of case report booklet (i.e., Grocery/Food Store - Jewel).
10. Enter the appropriate Location Code from outside cover of booklet.
11. Enter the date and time the reporting officer arrived at the scene.
12. Check appropriate square to indicate how assignment was received. This eliminates the necessity to begin the narrative with a statement such as, "Beat 2201 sent by C.O. 5, to 111 E. West Street on a call of a Burglary."

BOXES 20 - 29: VICTIM

20. Enter total number of victims.
 21. Print last name of victim first, then first name and middle initial if any. If the victim's identity is verified through examination of documents, check Verified square. If victim is a business, use the firm name. If there are more than three victims, list names in the beginning of narrative.
 - Parent or Guardian, if victim is a juvenile: Enter name, address, sex, race code number (listed to the right), age and phone numbers of parent/guardian if applicable.
 22. Enter address of victim, if a business, enter the company address.
 23. Enter sex, race code number and age of victim.
- NOTE:** The racial and ethnic categories for victims, witnesses and offenders are defined as follows:
1. Black: A person having origins in any of the black racial groups of Africa.
 2. White: A person having origins in any of the peoples of Europe, North Africa, or the Middle East.
 - 3-4 Black-Hispanic/White-Hispanic: A person who is black or white and, in addition, is of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin.
 5. American Indian or Alaskan Native: A person having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.
 6. Asian or Pacific Islander: A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands; this area includes, for example, China, India, Japan, Korea, the Philippine Islands, Samoa, etc.

The category which most closely reflects the individual's recognition in his community should be used for purposes of reporting on persons who are of mixed racial and/or ethnic origins. If the individual refuses to answer, it is up to the reporting officer to make a judgment.

24. Enter the victim's home telephone number.
 25. Enter the victim's business telephone number.
 26. Enter time victim/company representative is available at residence or place of employment.
 27. Enter the victim's occupation.
 28. Check the appropriate column.
 29. Enter code from Offender/Victim Relationship Code table printed immediately below on the report. If relationship is not listed, use 23 - Other and describe in narrative.
- BOXES 30 - 35: WITNESS:** If all the information requested is unknown or not applicable to the offense being reported, check appropriate square in the margin of the witness section.
30. Enter total number of witnesses.
 31. Enter name(s) of person(s) who discovered, witnessed, or reported offense and check appropriate square. If more space is required, identify as Witness and use narrative.
 32. Enter home address(es) of person(s).
 33. Enter sex, race code number and age of the witness(es).
 34. Enter home telephone number of witness.
 35. Enter business telephone number of witness.

- BOXES 40 - 45: OFFENDER:** If all the information requested is unknown or not applicable to the offense being reported, check the appropriate square in the margin of the offender section.
40. Enter total number of offenders.
 41. Enter alleged offender's name and/or alias; if unknown, give clothing description. If more space is required, identify as Offender and use narrative.
 42. Enter home address (if known) of the offender.
 43. Enter sex, race code number, age and physical description of offender.
 44. Enter C.B. number if an offender is arrested; enter I.R. number if known.
 45. Enter code from Offender/Victim Relationship Code table printed immediately above on the report. If relationship is not listed, use 23 - Other and describe in narrative.

- BOXES 50 - 59: CIRCUMSTANCES:** If all the information requested is unknown or not applicable to the offense being reported, check appropriate square in the margin of the circumstances section.
51. Object/Weapon: Check appropriate square in horizontal line (used, displayed, unknown). Then check appropriate box below. If weapon is recovered or if more space is required use narrative.
 52. 53. 54. Check appropriate square.
 55. Burglar Alarm: check appropriate square. Alarm circumvented: check appropriate square.
 56. 57. Check appropriate square.
 58. Supply modus operandi information. If more space is required use narrative.
 59. Gang related: Check square for victim and/or offender if applicable and enter gang name.

- BOXES 70 - 74:** If all information requested is unknown or not applicable to the offense being reported, check appropriate square in the margin of the property section. List any property damaged in the narrative section and indicate the nature of damage.
71. If the property being described has been taken (T) (stolen) or recovered (R), check the appropriate square in the applicable box to identify the type and

give the value of the property. When reporting recovered property which has been verified as stolen property, check both the Taken (T) and Recovered (R) squares.

- a. When the dollar value of the property stolen is the same amount as is that of the property recovered, only one dollar amount need be inserted to the right of the checked (T) and (R) squares.
- b. When the dollar value of the property stolen is different from the dollar value of the property recovered, both dollar amounts must be inserted to the right of the checked (T) and (R) squares.

72. Describe property taken/recovered as last entry in the narrative, supply serial numbers or identifiable markings if available.
- If a vehicle or trailer is stolen or a theft occurred from a vehicle, check appropriate square and give identifying information for the vehicle.
- Offender's vehicle: Check appropriate square if applicable and enter additional information if known.
- If more than one vehicle is involved, use narrative.

73. List all property inventory numbers for all evidence or recovered property.
74. Enter motor vehicle inventory number and pound number if applicable.

- BOXES 80 - 82: NARRATIVE:** If no additional information is available other than that already supplied in the numbered boxes, check the "No Additional Information" square in the margin of the narrative section, make no further entry in box 80. Do not unnecessarily repeat information already contained in the numbered boxes. Otherwise, give a concise statement of the facts of the case. If address of occurrence is different from the address where the report is being made, indicate in the narrative.
81. 82. Check appropriate square.

- BOXES 90 - 97: POLICE PERSONNEL**
91. Indicate the number and recipient of extra copies required of this report. For normal distribution, check Normal square.
 92. Mark the square to the right, if the report is continued on the reverse side.
 - Enter the name of the person making the notification, the number of the unit and the name of the person notified; indicate presence at scene of personnel notified by checking Arrived square. Enter date and time of notification.

- NOTIFICATIONS ARE REQUIRED** in cases of major losses (\$5000 or more), noteworthy cases, homicide or serious injury, seizure under Ch. 38, Art. 36, IR5, or under Ch. 56g, Art. 1505 (720 ILCS 5/36-1 or 720 ILCS 570/505) cases where prominent persons or visitors to our city are involved, cases which involve police officers, robberies, home invasions, or any case where immediate follow-up might result in an arrest of the offender.
93. Enter name and star number of the first officer at the scene of the offense. If the first officer to arrive is the reporting officer, check R.O. square and make no further entry.
 94. Other notifications made. Mark square to indicate who was notified, enter name of person making notification, the number of the unit and the name of the person notified, date and time notified. Indicate presence of personnel at scene by making Arrived square. If more space is required use narrative.
 95. Enter printed name of officer completing the report, star number and signature. Enter date and time investigation was completed.
 96. Enter printed name, star number and signature of a second officer if applicable.
 97. Approving supervisor enters his printed name, star number and signature when he approved the report. Enter date and time report is approved.

- If narrative is continued on the reverse side, approving supervisor's signature and date is also required on the reverse.
- VICTIM INFORMATION NOTICE:** This notice is Part 3 of the form. Reporting officers will mark the appropriate square indicating which unit has follow-up responsibility for the reported offense and leave the notice with the victim.

NOTE: The information contained within the parentheses is to indicate the proper Offense Code number. It is NOT to be included in the Secondary Classification-Box 2 of the case report.

LOCATION CODES

| CODE | LOCATION | CODE | LOCATION | CODE | LOCATION | CODE | LOCATION |
|------|-----------------------------------|------|--------------------------------|------|--------------------------------------|------|---------------------------------|
| 096 | Abandoned Building | 168 | Currency Exchange | 277 | Parking Lot/Garage (Non-Residential) | 174 | Store - Department |
| 095 | Airport/Aircraft | 126 | Delivery Truck | 123 | Parking Lot/Grounds CHA | 193 | Store - Drug |
| 092 | Alley | 174 | Department Store | 166 | Pool Room | 221 | Store - Grocery/Food |
| 097 | Appliance Store | 193 | Drug Store | 313 | Private School Property | 261 | Store - Small Retail |
| 100 | Bank | 209 | Factory/Manufacturing Building | 314 | Public School Property | 240 | Store - Liquor/Tavern |
| 167 | Barbershop | 220 | Gas/Service Station | 317 | Railroad Property | 304 | Street |
| 104 | Boat/Watercraft | 221 | Grocery/Food Store | 290 | Residence | 240 | Tavern/Liquor Store |
| 140 | Business Office | 238 | Highway/Expressway | 210 | Residence - Garage | 309 | Taxicab |
| 121 | CHA Apartment | 233 | Hospital Building/Grounds | 289 | Residence - Porch/Hallway | 262 | Vehicle - Commercial |
| 122 | CHA Hallway/Stairwell/Elevator | 260 | Hotel/Motel | 293 | Restaurant | 126 | Vehicle - Delivery Truck |
| 123 | CHA Parking Lot/Grounds | 292 | Government Building/Property | 298 | Savings & Loan | 259 | Vehicle - Non-Commercial |
| 119 | CHA Bus | 273 | Lake/Waterway/Riverbank | 261 | Small Retail Store | 327 | Warehouse |
| 323 | CHA Platform | 245 | Library | 313 | School Property - Private | | |
| 321 | CHA Train | 250 | Medical/Dental Office | 314 | School Property - Public | 257 | Other Commercial Transportation |
| 151 | Church/Synagogue/Place of Worship | 165 | Newsstand | 305 | Sports Arena/Stadium | | |
| 192 | Cleaning Store | 268 | Nursing Home/Old People's Home | 097 | Store - Appliance | 330 | Other - Specify |
| 160 | Coin Operated Machine | 269 | Park Property | 192 | Store - Cleaning | | |