How to complete the Lacey Police Citizen Report Form

Use the Citizen Report form if ALL of the following applies:

- The incident occurred within the Lacey City Limits. (Call 360-459-4333 to verify)
- There are no suspects.

If all of the above apply follow these directions:

- Fill out the Citizen Report form in its entirety.
- Turn in the completed form to the Lacey Police front office Monday through Friday 8:00am to 5:00pm.
- You will be asked to provide a valid picture ID.
- Front office staff will assign a Lacey Police case number, make copies of the citizen report form and any documentation you have included.

TIPS

Please fill out the Citizen Report form <u>legibly.</u>
The grey boxes are for office staff use only, DO NOT fill them in.

NOTE: This is a courtesy report and no investigation will be conducted unless there is a suspect.

If you have any questions feel free to contact the **Lacey Police Department ◆ Business Office**Monday – Friday 8:00am – 5:00pm
420 College St SE ◆ Lacey, WA 98503
(360) 459-4333



Lacey Police Department

Citizen Report Form: Theft, Vandalism, Vehicle Prowl, Lost Property

| FOR OFFICIAL USE ONLY | | | | |
|-----------------------|---------------|--|--|--|
| Case # | | | | |
| | RCW/LMC | | | |
| ☐ Theft | | | | |
| ☐ Malicious Mischief | | | | |
| ☐ Vehicle Prowl | LMC 9.28.110 | | | |
| Lost Property | RCW 99.999.99 | | | |

| Complete this form if t PLEASE NOTE: This is | | | | , , | | | O . , | | |
|--|-----------------------------------|--------------|------------|---------------|-----------|-------------|------------|-----------|-----------|
| Approximate date(s) and time(s) incident occurred between: | y a courtesy report and no nivest | | | | and | | | | |
| meraem occurred between. | Month | Day | Year | Time | _ | Month | Day | Year | Time |
| Address Incident Occurred: | | | | | | | | | |
| Last Name: | | First Na | ame: | Middle Name: | | | | | |
| Address: | | | City: | | | State: _ | | _ Zip: | |
| Home: | | Cell: | | | | Work: _ | | | |
| Gender: Male | Female | | | Date | of Birth | ı : | | | |
| Optional: | | _ | | | | MN | I/DD/YYYY | | |
| Race: White Black | Asian | n/Pacific Is | slander | Americ | an India | n/Alaskar | Native | Unknov | wn |
| more information is | needed ai | 10/ 01 you | ir crime i | S IOUIIG 10 D | e reiaied | 1 10 a Kiio | WII CIIIIR | e trena. | |
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| | | | | | | | | Continue | on page 2 |
| Received By | | | | Personnel # | | | ID of RP | Confirmed | |

| Narrative continued | |
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| BY FILING THIS COMPLAINT, I UNDERSTAND THAT: | |
| 1. A person commits the crime of making a false report if he or she willfully makes any untrue, misleading or exag statement in any report to a Police or Fire Department. | ggerated |
| 2. Making a false report is a misdemeanor. | |
| I CERTIFY UNDER PENALTY OF PURJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. | ΗE |
| Please check box if you would like your information kept confidential per RCW 42.56.240 privacy la | aws. |
| Signature: Date: | |

Return this completed form to the Lacey Police Business Office to receive a case number.

Monday – Friday 8:00 am to 5:00pm

420 College St SE Lacey, WA 98503 ◆ 360-459-4333

You will be asked to provide a valid picture ID.

PLEASE NOTE: This is a courtesy report and no investigation will be conducted unless there is a suspect.

| Citizen Report Property Sheet | | | | Case Number: | | | | | | |
|--|-------------------------------|-----------------|--------------------|--------------|-----------------------------|-------------------------|-----------|--|--|--|
| Use this space to list the vehicle prowled or damaged. | | | | | | | | | | |
| Description of Damage: | | | | | Estimated Loss: | | \$ | | | |
| License Plate | e N | Make | Model | Year | Year Color | | | | | |
| | | | | | | | | | | |
| Use the below spaces to list any stolen/lost/damaged property. | | | | | | | | | | |
| | Descrip | rty | | Serial | Number | | | | | |
| Value/Damage | Quantity | Year | Make | Make Model | | | Condition | | | |
| Entered into W | ACIC/NCIC: | Yes No | Entered By: | • | Date/Time | Entered: | • | | | |
| | Dogerin | tion of Pros | | | Comi-1 | Number | | | | |
| | Descrip | otion of Proper | iy | | Serial | rumber | | | | |
| Value/Damage | Quantity | Year | Make | Model | | Color | Condition | | | |
| Entered into W | ACIC/NCIC: | Yes No | o Entered By: | | Date/Time | Entered: | | | | |
| Description of Property Serial Number | | | | | | | | | | |
| | | | | | 20141 | | | | | |
| Value/Damage | Quantity | Year | Make | Model | Model | | Condition | | | |
| Entered into W | ACIC/NCIC: |]Yes 🗌 No | Entered By: | | Date/Time | Entered: | | | | |
| Description of Property Serial Number | | | | | | | | | | |
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| Value/Damage | Quantity | Year | Make | Model | 1 | Color | Condition | | | |
| \$ | - | | | | | | | | | |
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| | ACIC/NCIC: | Yes No | o Entered By: | | Date/Time | Entered: | | | | |
| | · | | , | | Date/Time | | | | | |
| | · | Yes No | , | | Date/Time | Entered: | | | | |
| Entered into W. Value/Damage | · | | , | Model | Date/Time Serial | | Condition | | | |
| Entered into W | Descrip | otion of Prope | rty | Model | Date/Time Serial | Number Color | Condition | | | |
| Value/Damage | Descrip | Year | ty Make | Model | Date/Time Serial | Number Color | Condition | | | |
| Value/Damage | Descrip Quantity ACIC/NCIC: | Year | Make D Entered By: | Model | Date/Time Serial Date/Time | Number Color | Condition | | | |
| Value/Damage | Descrip Quantity ACIC/NCIC: | Year No | Make D Entered By: | Model | Date/Time Serial Date/Time | Number Color Entered: | Condition | | | |

Entered into WACIC/NCIC:

Yes

☐ No

Entered By:

Date/Time Entered: