

Use of this form is limited to reports of minor theft (under \$1000) and criminal mischief (under \$1000) without a known suspect or evidence and you were not injured.

Reading Police Department Citizen Crime Report

OCA/Case #: _____ - _____ (Official use only) CT _____ UCR CODE: _____
RECORDS USE ONLY

Today's Date: ____/____/____ Current Time: _____ AM PM

PLEASE PRINT Your Information:

Last Name: _____ First name: _____ Middle Initial: _____
 Street Address: _____ Apt: _____
 City: _____ State: _____ Zip: _____ - _____
 Phone #: Home (____) ____ - ____ Work (____) ____ - ____ Mobile (____) ____ - ____ Other (____) ____ - ____
 E-mail Address: _____
 Sex: Male Female Race: _____ Ethnicity: _____ (Hispanic or Non-Hispanic)
 Victim's Age _____ Date of Birth ____/____/____ Occupation _____

Name of Business (if applicable): _____
 Street Address: _____ Apt. _____
 City: _____ State: _____ Zip: _____ - _____

Location Where Crime Occurred: Residence: Business: School: Other _____
 Address: _____
 Date Crime Occurred: ____/____/____ Time Crime Occurred: _____ AM PM
 OR
 Date/Time Period Crime Occurred: Between ____/____/____ _____ AM PM
 and ____/____/____ _____ AM PM

Status/Condition of Property: (List value of loss or damage estimate below)

DESCRIPTION: _____ Stolen Damaged
 Value: \$ _____ Make _____ Model _____ Serial Number _____
 DESCRIPTION: _____ Stolen Damaged
 Value: \$ _____ Make _____ Model _____ Serial Number _____
 DESCRIPTION: _____ Stolen Damaged
 Value: \$ _____ Make _____ Model _____ Serial Number _____

Additional property loss can be placed in the narrative portion on page #2 of this report.

WITNESSING OFFICER:		COMPUTER #:	REVIEWING SUPERVISOR:		COMPUTER #:			
CLEAN ENTRY	DATE & TIME:	BY WHOM:	MESSAGE #:	RADIO G.B.	DATE & TIME:	BY WHOM:		
RPD A-23 (REV: 12/2006)	BELOW FOR RECORDS USE ONLY							
	PROCESSED BY:	Q.C. BY:	E-10 BY:	CLASSIFICATION CHANGED: <input type="checkbox"/> NO	ENTERED BY:	PROPERTY BY:	SPECIAL DISTRIBUTION BY:	DAILY BULLETIN BY:
				YES, TO:				

