



**SEATTLE  
POLICE  
DEPARTMENT**

# VICTIM FOLLOW-UP REPORT

|                 |
|-----------------|
| INCIDENT NUMBER |
|-----------------|

|                                 |                  |                      |             |
|---------------------------------|------------------|----------------------|-------------|
| TYPE OF INCIDENT                | DATE OF INCIDENT | LOCATION OF INCIDENT |             |
| VICTIM'S NAME (LAST, FIRST, MI) |                  | HOME PHONE           | OTHER PHONE |
| ADDRESS OF VICTIM               |                  |                      |             |
| VICTIM'S SIGNATURE              |                  |                      | DATE        |

X

THIS SECTION IS TO BE COMPLETED BY THE VICTIM TO PROVIDE ADDITIONAL INFORMATION THAT WAS **NOT** REPORTED ON THE INITIAL POLICE REPORT. (PRINT CLEARLY OR TYPE)

**NUMBER EACH ENTRY ACCORDINGLY** (IF MORE SPACE IS NEEDED ATTACH ADDITIONAL SHEETS, WRITE INCIDENT NUMBER AT THE TOP OF EACH ADDITIONAL SHEET)

- WITNESSES**-LIST NAMES, ADDRESSES, HOME AND BUSINESS PHONE NUMBERS.
- SUSPECTS**-LIST NAMES, ADDRESSES, PHONE NUMBERS DESCRIPTIONS, ETC.
- OTHER ADDITIONAL INFORMATION ABOUT THE ABOVE INCIDENT**
- ADDITIONAL STOLEN OR RECOVERED PROPERTY**
- ADDITIONAL DISCRIPTION OF PREVIOUSLY REPORTED PROPERTY**

|   |              |                      |              |
|---|--------------|----------------------|--------------|
| <input type="checkbox"/> STOLEN<br><input type="checkbox"/> RECOVERED | ARTICLE TYPE | BRAND NAME           | VALUE        |
| SERIAL NUMBER   |              | OWNER APPLIED NUMBER | MODEL NUMBER |
| COLOR, SIZE, DESCRIPTION, CALIBER, BARREL LENGTH, ETC.                |              |                      |              |

|   |              |                      |              |
|---|--------------|----------------------|--------------|
| <input type="checkbox"/> STOLEN<br><input type="checkbox"/> RECOVERED | ARTICLE TYPE | BRAND NAME           | VALUE        |
| SERIAL NUMBER   |              | OWNER APPLIED NUMBER | MODEL NUMBER |
| COLOR, SIZE, DESCRIPTION, CALIBER, BARREL LENGTH, ETC.                |              |                      |              |

|   |              |                      |              |
|---|--------------|----------------------|--------------|
| <input type="checkbox"/> STOLEN<br><input type="checkbox"/> RECOVERED | ARTICLE TYPE | BRAND NAME           | VALUE        |
| SERIAL NUMBER   |              | OWNER APPLIED NUMBER | MODEL NUMBER |
| COLOR, SIZE, DESCRIPTION, CALIBER, BARREL LENGTH, ETC.                |              |                      |              |

|                 |
|-----------------|
| INCIDENT NUMBER |
|-----------------|

|   |              |                      |              |
|---|--------------|----------------------|--------------|
| COLOR, SIZE, DESCRIPTION, CALIBER, BARREL LENGTH, ETC.                |              |                      |              |
| <input type="checkbox"/> STOLEN<br><input type="checkbox"/> RECOVERED | ARTICLE TYPE | BRAND NAME           | VALUE        |
| SERIAL NUMBER   |              | OWNER APPLIED NUMBER | MODEL NUMBER |
| COLOR, SIZE, DESCRIPTION, CALIBER, BARREL LENGTH, ETC.                |              |                      |              |
| <input type="checkbox"/> STOLEN<br><input type="checkbox"/> RECOVERED | ARTICLE TYPE | BRAND NAME           | VALUE        |
| SERIAL NUMBER   |              | OWNER APPLIED NUMBER | MODEL NUMBER |
| COLOR, SIZE, DESCRIPTION, CALIBER, BARREL LENGTH, ETC.                |              |                      |              |
| <input type="checkbox"/> STOLEN<br><input type="checkbox"/> RECOVERED | ARTICLE TYPE | BRAND NAME           | VALUE        |
| SERIAL NUMBER   |              | OWNER APPLIED NUMBER | MODEL NUMBER |
| COLOR, SIZE, DESCRIPTION, CALIBER, BARREL LENGTH, ETC.                |              |                      |              |
| <input type="checkbox"/> STOLEN<br><input type="checkbox"/> RECOVERED | ARTICLE TYPE | BRAND NAME           | VALUE        |
| SERIAL NUMBER   |              | OWNER APPLIED NUMBER | MODEL NUMBER |
| COLOR, SIZE, DESCRIPTION, CALIBER, BARREL LENGTH, ETC.                |              |                      |              |
| <input type="checkbox"/> STOLEN<br><input type="checkbox"/> RECOVERED | ARTICLE TYPE | BRAND NAME           | VALUE        |
| SERIAL NUMBER   |              | OWNER APPLIED NUMBER | MODEL NUMBER |
| COLOR, SIZE, DESCRIPTION, CALIBER, BARREL LENGTH, ETC.                |              |                      |              |
| <input type="checkbox"/> STOLEN<br><input type="checkbox"/> RECOVERED | ARTICLE TYPE | BRAND NAME           | VALUE        |
| SERIAL NUMBER   |              | OWNER APPLIED NUMBER | MODEL NUMBER |
| COLOR, SIZE, DESCRIPTION, CALIBER, BARREL LENGTH, ETC.                |              |                      |              |
| <input type="checkbox"/> STOLEN<br><input type="checkbox"/> RECOVERED | ARTICLE TYPE | BRAND NAME           | VALUE        |
| SERIAL NUMBER   |              | OWNER APPLIED NUMBER | MODEL NUMBER |
| COLOR, SIZE, DESCRIPTION, CALIBER, BARREL LENGTH, ETC.                |              |                      |              |
| <input type="checkbox"/> STOLEN<br><input type="checkbox"/> RECOVERED | ARTICLE TYPE | BRAND NAME           | VALUE        |
| SERIAL NUMBER   |              | OWNER APPLIED NUMBER | MODEL NUMBER |
| COLOR, SIZE, DESCRIPTION, CALIBER, BARREL LENGTH, ETC.                |              |                      |              |
| <input type="checkbox"/> STOLEN<br><input type="checkbox"/> RECOVERED | ARTICLE TYPE | BRAND NAME           | VALUE        |
| SERIAL NUMBER   |              | OWNER APPLIED NUMBER | MODEL NUMBER |
| COLOR, SIZE, DESCRIPTION, CALIBER, BARREL LENGTH, ETC.                |              |                      |              |

COMPLETE THIS FORM AND MAIL TO: **RECORDS SECTION  
SEATTLE POLICE DEPARTMENT  
610-5<sup>TH</sup> AVE  
PO BOX 34986  
SEATTLE, WA. 98124-4986**