



ORANGE COUNTY SHERIFF'S OFFICE

Keith Merritt, Sheriff
205 Border Street
Orange, TX 77631
(409)883-2612



OFFENSE REPORT INFORMATION SHEET

Today's Date: _____ Time: _____

YOUR INFORMATION:

Name: _____ Alias/ Maiden: _____
Sex: _____ Race: _____ D.O.B. _____ DL/ID#: _____ State: _____
Address: _____ City: _____ State: _____ ZIP: _____
Home Phone: _____ Cell Phone: _____ Alternate Phone: _____
Place of Employment: _____ Work Phone: _____
School (If Applicable): _____
Vehicle Information: (If Applicable) Make: _____ Model: _____ Year: _____
Color of Vehicle: _____ License Plate: _____ State: _____

SUSPECT(S): Check Here if the Suspect is Not Known _____

Name: _____ Alias/ Maiden: _____
Sex: _____ Race: _____ D.O.B. _____ DL/ID#: _____ State: _____
Address: _____ City: _____ State: _____ ZIP: _____
Home Phone: _____ Cell Phone: _____ Alternate Phone: _____
Place of Employment: _____ Work Phone: _____
School (if applicable): _____
How Do You Know The Suspect: _____
Description: _____
Vehicle Description: (If Applicable) Make: _____ Model: _____ Year: _____
Color of Vehicle: _____ License Plate: _____ State: _____

SUSPECT(S):

Name: _____ Alias/ Maiden: _____
Sex: _____ Race: _____ D.O.B. _____ DL/ID#: _____ State: _____
Address: _____ City: _____ State: _____ ZIP: _____
Home Phone: _____ Cell Phone: _____ Alternate Phone: _____
Place of Employment: _____ Work Phone: _____
School (if applicable): _____
How Do You Know the Suspect: _____
Description: _____
Vehicle Description: (If Applicable) Make: _____ Model: _____ Year: _____
Color of Vehicle: _____ License Plate: _____ State: _____

WITNESSES: (Do you have any witnesses? If So Please List)

Name: _____ Alias/ Maiden: _____
Sex: _____ Race: _____ D.O.B. _____ DL/ID#: _____ State: _____
Address: _____ City: _____ State: _____ ZIP: _____
Home Phone: _____ Cell Phone: _____ Alternate Phone: _____
Place of Employment: _____
Work Phone: _____
School (if applicable): _____

Name: _____ Alias/ Maiden: _____
Sex: _____ Race: _____ D.O.B. _____ DL/ID#: _____ State: _____
Address: _____ City: _____ State: _____ ZIP: _____
Home Phone: _____ Cell Phone: _____ Alternate Phone: _____
Place of Employment: _____ Work Phone: _____
School (if applicable): _____

OFFENSE INFORMATION:

Type of Offense You Are Reporting: _____

Date/Time of Offense: _____ Location of Offense: _____

Have you spoken to a Police Officer/ Deputy about this incident: _____

If yes, who did you speak with: _____

PROPERTY INFORMATION:

1) Description: _____ Qty: _____

Make: _____ Model: _____

Serial #: _____ Color: _____

Value: \$ _____ Location of Property (if known): _____

Property: Damaged Stolen Recovered

2) Description: _____ Qty: _____

Make: _____ Model: _____

Serial #: _____ Color: _____

Value: \$ _____ Location of Property (if known): _____

Property: Damaged Stolen Recovered

3) Description: _____ Qty: _____

Make: _____ Model: _____

Serial #: _____ Color: _____

Value: \$ _____ Location of Property (if known): _____

Property: Damaged Stolen Recovered

4) Description: _____ Qty: _____

Make: _____ Model: _____

Serial #: _____ Color: _____

Value: \$ _____ Location of Property (if known): _____

Property: Damaged Stolen Recovered

5) Description: _____ Qty: _____

Make: _____ Model: _____

Serial #: _____ Color: _____

Value: \$ _____ Location of Property (if known): _____

Property: Damaged Stolen Recovered

On the attached statement form, please give details about what happened. Please be as specific as possible listing dates and times and all of the important information you can remember.

