



Items marked with an asterisk (\*) are required fields and must be completed to generate an Offense/Incident Report. Completed reports must be signed and submitted to the Police Department by one of the following methods:

- In Person or by mail - 101 N. Chestnut, Cameron, MO 64429
- By fax - (816) 632-2309

**VICTIM INFORMATION**

*First Name:		*Last Name:	
*Home/Cell Phone:		Email Address:	
Business Name (if applicable):		*Date of Birth:	
*Mailing Address (street):		City/State/Zip:	
		Social Security No.	

Victim's Gender:	Male	Female			
Victim's Race:	White	Black	Asian	Hispanic	
	Pacific Islander	American Indian	Other		

Reporting Party Name: (If different from victim)		Reporting Party Address:	
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**DESCRIPTION OF CRIME**

Offense:	<b>Theft</b>
*Location where occurred (detailed)	
*Date of Theft	
*Time of Theft	
Forced Entry Made?	Yes      No      Tools Used:
Method Used to Gain Entry	
Point of Entry	
*Describe What Happened	

**PROPERTY STOLEN**

<b>Item #1</b>		ID#, Model, Manufacturer	
Quantity		Color	
Serial #		Value (\$)	
<b>Item #2</b>		ID#, Model, Manufacturer	
Quantity		Color	
Serial #		Value (\$)	
<b>Item #3</b>		ID#, Model, Manufacturer	
Quantity		Color	
Serial #		Value (\$)	



Additional Items:  
(Attach additional  
sheets if necessary)

"I affirm that the above information is true and correct."  
(It is a misdemeanor to file a false police report.)

\_\_\_\_\_  
Signature

I Certify that I have read and understand the following:

Reporting of any crime that is false or malicious is punishable by law. All violators will be prosecuted to the fullest extent of the law. All violators will be prosecuted for filing a false police report to authorities. I further certify that the crime occurred within the Cameron City limits. (Please do not submit county or other municipality incidents with this form.)