

## Minocqua Police Dept. Short Form Report



## **Shaded Areas for Police Use Only**

This incident report is for the victim's convenience, who feels no need to speak to an officer and may be filing this report for insurance purposes. Because of the lack of known suspects, witnesses or physical evidence, there may be no police investigation. However, this information will assist in identifying the types and locations of crimes occurring in Minocqua. A complaint number will be assigned to this report by police personnel and kept on file. Please print and fill out the form as completely as possible and return to Minocqua PD; P. O. Box 346, 418 E Chicago Ave., Minocqua, WI 54548. Your Incident cannot be documented without the return of the completed form.

Complaint# MI12 -						Date Received				Time Received						
Offense(s)				Stat/C	Ord											
Loc	. Number			Street Name						Apt						
Incident Location																
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Complainant	1 6	Address	City		1					State		Zip				
nant	Mailing address (If different than above)															
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Date o	of Bi	irth		Race		Sex		Height		Weight		Ethnicity:				
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Vehicle Involved	VIN#					Style						Color:				
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Pro																
Property																

arrative (Describe in Detail What Occurred):	
lid not give consent to anyone to damage/steal/illegally enter myomplainant's Signature: Dat	e:
eceive By:  Officer Signature:	v. <u> </u>
sposition	