

BAD DATE REPORT FORM

Agency:

of Persons Involved:

Staff/Volunteer Name:

Time of Incident: am / pm

Date of Incident:

Location Picked Up:

Date of Report:

Location of Incident:

How was date arranged:

(street, online, parlor)

Picked up by: Foot Car Truck Bicycle Other

Description of Vehicle:

Colour:

License Plate:

Outside clean:

Outside dirty:

Smell:

Size:

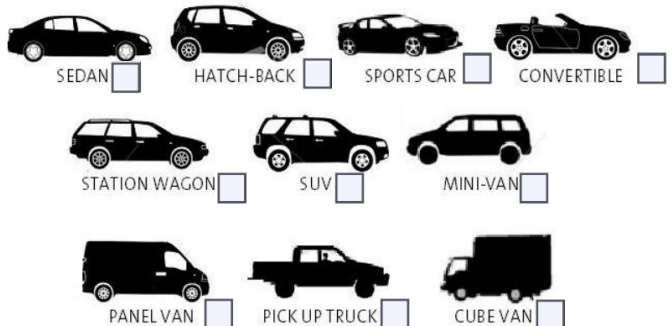
of Doors:

Inside clean:

Inside dirty:

Old/New:

Make of Vehicle?



Suspect Description:

Age:

Name:

Hair colour:

Hair Type:

Facial Hair:

Height:

Weight:

Build:

Tattoos (what and where):

Scars (what and where):

Smell (Cologne? Substances?):

Accent?:

Nationality:

What happened?

Assaulted Robbed Not Paid Punched Kicked Strangled
 Raped Slapped Kidnapped Weapon Threat Beaten

Do you want to report this to police? Yes No

Would you like this to appear as public alert? Yes No