MISSING PERSON DESCRIPTION

DATE	TIME	LOCATION

NAME: LAST	FIRST	MI

DOB	SEX	RACE	HT	WT	EYES	HAIR

PHYSICAL CHAR

SHIRT	PANT	SHOE	OTHER

ITEMS ON PERSON

PHONE ☐ CASH ☐ CREDIT CARD ☐ MEDICATION ☐ ID ☐

MEDICAL CONDITIONS

MENTAL, EMOTIONAL, PHYSICAL STATE

LAST PLACE SEEN

TIME REPORTED MISSING	TIME PRESUMED MISSING

AVAILABILITY OF TRANSPORTATION

RELATIONSHIP OF REPORTING PARTY	NATIVE LANGUAGE

REASON FOR REPORT

FAMILIARITY WITH AREA

HOME ADDRESS

CITY	STATE	ZIP

NOTES

DATE	TIME	LOCATION

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