

McLENNAN COUNTY ARREST REPORT

TLETS: Clear 10-99 QH RAP IAQ Add On Initials _____

REPORTING AGENCY		ARREST NO.	CASE NO.	OFFICER'S NAME / BADGE NO.		JAIL RECEIVING OFFICER		DATE	TIME	
MSO NO.		SUBJECT'S NAME (LAST, FIRST, MIDDLE)			ALIAS(ES) – MAIDEN NAME – NICK NAME					
SUBJECT'S ADDRESS				CITY	STATE	ZIP CODE	PHONE		MARITAL STATUS	
AGE	DATE OF BIRTH	PLACE OF BIRTH	STATE	COUNTRY	SEX	RACE	HEIGHT	WEIGHT	HAIR	EYES
SOCIAL SECURITY NO.		DRIVER'S LICENSE NO.	CLASS	STATE	FBI NO.		SID NO.			
SCARS / MARKS / TATTOOS										

FEATURE INFORMATION (SELECT APPROPRIATE DESCRIPTION)

HAIR LENGTH	HAIR TYPE	HAIR STYLE	COMPLEXION
FACIAL HAIR	TEETH	SPEECH	

EMPLOYER INFORMATION

EMPLOYER	EMPLOYER'S ADDRESS	PHONE	OCCUPATION
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VEHICLE INFORMATION

VEH. YEAR	VEH. MAKE	VEH. MODEL	VEH. LIC. NO.	STATE	YEAR	DISTINGUISHING FEATURES
COMM. VEH. YES <input type="checkbox"/> NO <input type="checkbox"/>		TRANS. HAZ. MAT. YES <input type="checkbox"/> NO <input type="checkbox"/>		VEHICLE IMPOUND LOCATION		

MISCELLANEOUS INFORMATION

<p>WEAPON INFORMATION</p> <p>TYPE _____</p> <p>FEATURE _____</p> <p>CALIBER _____</p> <p>WEAPON DISPOSITION _____</p>	<p>HANDED</p> <p><input type="checkbox"/> RIGHT</p> <p><input type="checkbox"/> LEFT</p>	<p>CLOTHING INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>TYPE</th> <th>DESCRIPTION</th> </tr> </thead> <tbody> <tr><td>HAT</td><td>_____</td></tr> <tr><td>COAT</td><td>_____</td></tr> <tr><td>PANTS</td><td>_____</td></tr> <tr><td>SHIRT</td><td>_____</td></tr> <tr><td>SHOES</td><td>_____</td></tr> <tr><td>MARKED</td><td>_____</td></tr> <tr><td>GLOVE</td><td>_____</td></tr> <tr><td>JEWELRY</td><td>_____</td></tr> </tbody> </table>	TYPE	DESCRIPTION	HAT	_____	COAT	_____	PANTS	_____	SHIRT	_____	SHOES	_____	MARKED	_____	GLOVE	_____	JEWELRY	_____
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<p>INJURY INFORMATION</p> <p>INJURY / ILLNESS _____</p> <p>WAS SUBJECT TREATED? _____</p> <p>TREATED BY _____</p> <p>WHERE TREATED _____</p>	<p>GLASSES</p> <p><input type="checkbox"/> YES</p> <p><input type="checkbox"/> NO</p>																			

EMERGENCY INFORMATION

EMERGENCY NOTIFICATION	RELATIONSHIP	AGE	ADDRESS	PHONE
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OFFENSE INFORMATION

DATE, TIME, LOCATION OF ARREST				DATE, TIME OF OFFENSE			
	CHARGE – ENTER LEVEL, DEGREE & STATUTE IF NEW CHARGE	OFNS CODE	OFNS DATE	CASE NO.	WARRANT NO.	BOND/FINE	JUDGE
1	Level & Degree Statute						
2	Level & Degree Statute						
3	Level & Degree Statute						
4	Level & Degree Statute						
5	Level & Degree Statute						

NARRATIVE		RT. INDEX FINGER
OFFICER SIGNATURE X		
CLASS C COURT DISPOSITION		
NATURE OF RELEASE	DATE OF RELEASE	INMATE SIGNATURE X

SHADED AREA FOR JAIL USE ONLY

ARE CHARGES CONTINUED ON SUPPLEMENTAL FORM? (If yes, fill out Supplemental Form 6) Yes No