

Retail Theft Store Report

Madison Police Case # _____

Date _____ **Time** _____

Store Name _____

Address _____

Phone Number _____

Person Completing Report:

Name _____

DOB _____

Signature _____

Arrested Person:

Name _____

D.O.B _____ **Sex** _____ **Race** _____ **Weight** _____ **Height** _____

Hair Color _____ **Eye Color** _____

Address _____

Phone Number _____

Time first observed: _____

Where was merchandise concealed? _____

Area or department of store where merchandise was taken: _____

Was consent given to the suspect to take merchandise without paying? _____

Is the store willing to pursue a criminal complaint against the suspect? _____

