

Runaway Juvenile Report

Reporting Person _____ Date _____ Time _____

Address _____ Home Phone _____ Work Phone _____

Date of Last Contact _____ OCA _____

Name _____

Date of Birth _____ Date of Emancipation _____

Sex _____ Race _____ Height _____ Weight _____

Eye Color _____ Hair Color _____ Place of Birth _____

Social Security # _____

Scars, Marks & Tattoos _____

Clothing Description _____

Eyeglasses / Jewelry _____

Vehicle Description _____

Vehicle Plate _____ State _____

Acquaintances, Headed for _____

*Advise caller they must provide transportation for the runaway if located
and they must call us to cancel the report if the runaway returns.*

NCIC ENTRY: _____

DATE: _____

NCIC CANCELLATION: _____

DATE: _____