

UCR SUMMARY EXCEL WORKBOOK

The FBI UCR Program is providing this UCR Summary Excel Workbook to law enforcement agencies who are otherwise unable to data via electronic means.

This workbook is not intended to serve as a replacement for any agency's record management system. It should be used in place of OMB-approved UCR crime-reporting forms and submitted to the UCR Program on a monthly basis.

Once the workbook is filled out for a given month, please email it to your UCR Program liaison. Should you need to submit a later month, make the appropriate change in your existing file and **re-submit the entire workbook**.

Usage Information

The UCR Summary Excel Workbook is a standard Microsoft Excel spreadsheet, consisting of several individual worksheets (tabs).

The first tab in the spreadsheet, titled Agency Information, should be filled out prior to the UCR form tabs but can be returned to later. The fields are broken down into two categories: Required and Optional. The three required fields (ORI, Month of Report, and Year of Report) are mandatory - the FBI cannot compile your data without these fields. The required fields will automatically be populated throughout the workbook. The optional fields do not affect data processing, but like the required fields, they will automatically be populated throughout the workbook.

Also on the Agency Information tab is the UCR Workbook Options Box. This box is meant to be a replacement for the "nothing to report" box present on the Return A form. For each form in the UCR Summary Excel Workbook, the UCR Workbook Options Box contains three options:

1. *Original Report / Zero Report*

a. Select this option if this is the first time you are submitting data for the month or if you wish to report 0 incidents for the month.

b. Example: For January 2014, you are submitting Return A, Return A Supplement, LEOKA, ASR, Arson, and SHR. You had no LEOKA, Arson, and SHR data. You would select "Original Values/Zero Report" for every form, and simply leave the LEOKA, Arson, and SHR forms blank. All other forms reporting Police Employees, Hate Crime, Human Trafficking, or Cargo Theft so you would select "No Change/No Report".




| UCR Workbook Options | | | |
|--|------------------------------------|-----------------------|----------------------------------|
| Please select the type of submission for each form listed below. | | | |
| Report | Original Report / Zero Report ? | Adjustment ? | No Change / No Report ? |
| Return A | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Return A Supplement | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| LEOKA | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| ASR | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Arson | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| SHR | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Police Employees (Annual Report) | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Hate Crime | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

| | | | |
|---|---|---|----------------------------------|
| Human Trafficking | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Cargo Theft | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| <input type="button" value="Settings"/> | <input type="button" value="Generate Summary File(s)"/> | <input type="button" value="Start New Workbook"/> | |

2. *Adjustment*




a. Select this option if you are resubmitting data for any form in a given month.

b. Example: You notice that some of the January 2014 numbers were off, requiring updates of Return A and ASR for that month. "Adjustment" for Return A and ASR and set everything else to "No Change/No Report" since the other reports have been previous

| UCR Workbook Options | | | |
|--|---|--|--|
| Please select the type of submission for each form listed below. | | | |
| Report | Original Report / Zero Report  | Adjustment  | No Change / No Report  |
| Return A | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Return A Supplement | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| LEOKA | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| ASR | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> |
| Arson | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| SHR | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Police Employees (Annual Report) | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Hate Crime | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Human Trafficking | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Cargo Theft | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

3. *No Change / No Report*

- a. This option is used to let the FBI know that, even though you are resubmitting the workbook for the month, certain forms differ from the original submission. Alternately, you can use this option to let us know that you do not wish to submit a particular form.
- b. Example: With the adjustment example from above, you would select "No Change/No Report" for every form except for the adjusted.
- c. Example: Your agency does not submit Hate Crime or Cargo Theft data to the FBI, so every month you check "Original Values" for every form except Hate Crime or Cargo Theft, and select "No Change/No Report" for the Hate Crime or Cargo Theft forms.

| UCR Workbook Options | | | |
|--|---|--|--|
| Please select the type of submission for each form listed below. | | | |
| Report | Original Report / Zero Report  | Adjustment  | No Change / No Report  |
| Return A | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Return A Supplement | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| LEOKA | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| ASR | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Arson | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| SHR | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Police Employees | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> |

| | | | |
|----------------------------------|----------------------------------|-----------------------|----------------------------------|
| UCR Employees (Annual Report) | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Hate Crime | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |
| Human Trafficking | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Cargo Theft | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |

Note that the option buttons for ASR apply to BOTH forms (both Adult and Juvenile) as neither form may be submitted without the other. This goes for SHR – though there are two tabs in the UCR Summary Excel Workbook (representing the two sides of the OMB-approved form). The two worksheets represent a single form.

The remaining tabs in the UCR Summary Excel Workbook represent the standard OMB-approved UCR paper forms and have been designed to be as familiar as possible. These forms should be filled out exactly as you would fill out the paper forms, and they may be filled out in any order.

On every tab in the workbook, certain fields are highlighted light yellow. These fields are the only fields where data can be entered. In most cases, all cases, should all contain data. The exception is the Optional fields on the Agency Information Tab.

All fields that are not highlighted light yellow are locked; that is, unable to be clicked in or to have data entered into them. To reduce errors and increase accuracy, all totals on every form are computed via formulas and may not be manually entered.

All yellow cells on every form must be whole numbers with no decimals or special characters (\$, !, @, etc.) In most cases these numbers are between 0 and 99999, though in some cases (arson values, stolen property, population) larger numbers are allowed as well as negative numbers.

Any cells which are highlighted in a light red/pink color indicates an invalid value and therefore should be corrected before saving. In some instances, you will be required to make the change before saving is allowed to occur while in other instances the highlighting will result in a warning that data values do not match.

Please note that the majority of the fields on the SHR forms will open up an option box when clicked. We ask that you please choose the most appropriate available options and do not enter any other data in those fields.

In order to preserve the visual integrity of the OMB-approved forms, some cells are merged together. Note that if you are using the workbook between cells on a form, these merged cells may require you to hit Tab several times before the cursor will move past the merge.

Additional Considerations

If you need to update numbers on any given form, you must re-send the entire workbook as it was originally presented, with the updated numbers. Do not empty out the other forms. Use the Options Box on the Agency Information tab to indicate which forms have changed (click the Adjustment button for that form or forms) and which have not (click the "No Change/No Report" button for those forms). We suggest that you save a copy of each month's completed workbook for your records, in the event that you need to re-submit.

The UCR form worksheets were modeled after the paper UCR forms such that when the worksheets are printed, they are nearly identical to the official paper versions. No information has been added to or removed from the forms with the exception of the yellow highlighting to increase the visibility of editable fields.

The UCR Summary Excel Workbook makes heavy use of Excel Macros. You may be required to allow these macros to run each time you open the Summary Excel Workbook. It is also possible to set Excel to always accept macros, but doing so could lead to accidental infection in the future and should be discussed with your technical staff.

PLEASE ENABLE MACROS

You must enable macros to use this workbook.

For Excel versions 2003 and older, just click the Enable Macros button on the Security Warning pop-up window.

For Excel 2007, Click the Options button on the Security Warning bar above. Next select the "Enable content" button on the Security Alert pop-up window. Then click "OK".

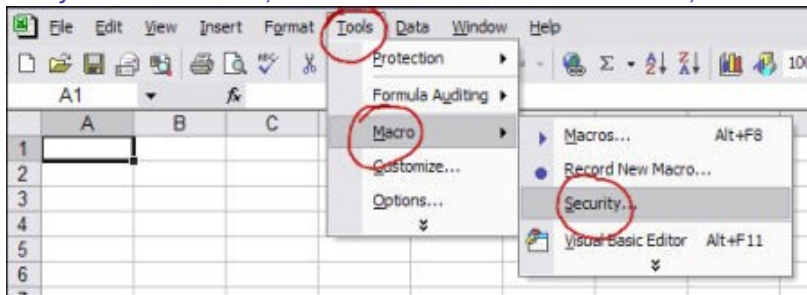
For Excel 2010, Click the Enable Content button on the Security Warning bar above.

Enabling Macros in Excel Spreadsheets

*** If there is no macro enable option provided you will need to change your macro setting in the Excel Trust Center. ***
Note: This macro setting change will only be required once.

Enabling Macros in Excel 2003 and Older

1. In your Excel menubar, click **TOOLS** → **MACRO** → **SECURITY**, as shown below.



This will open up a message box like the one shown below.



2. Select your macro Security Level: either "Medium" (recommended) or "Low" (not recommended).

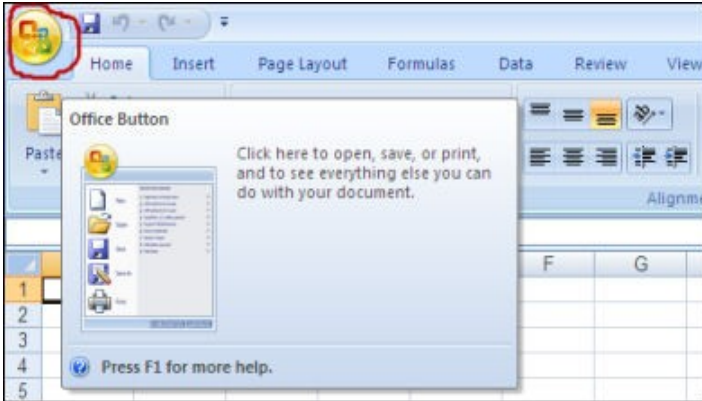
Check the radio button beside "Medium", and Excel will prompt you for permission each time a macro tries to run.

3. Close Excel completely with or without saving. Note: If this does not work the first time, try repeating the steps with a save of the workbook.

4. Now reopen the UCR Summary Excel Workbook which will now have an enable macros option. Until you change the macro settings you will always be provided an option to enable macros when you open an Excel file that contains macros.

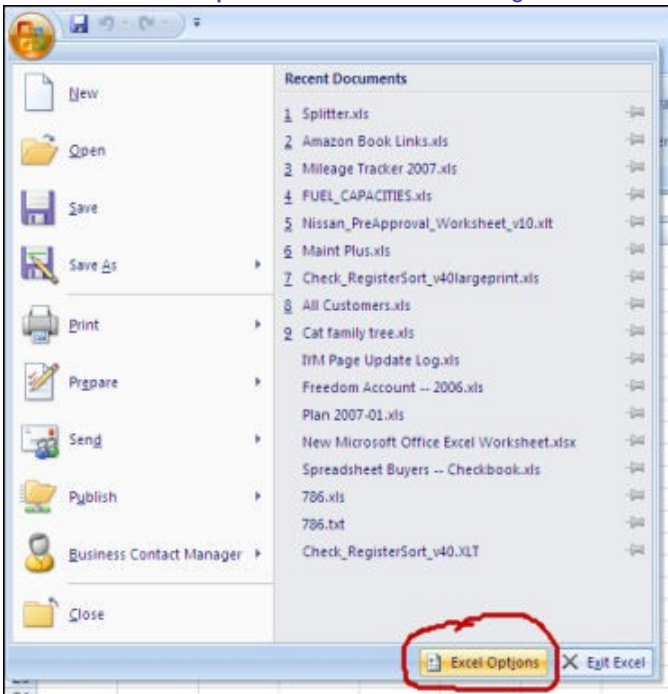
Enabling Macros in Excel 2007

1. In Excel, click the Office button in the upper left corner of the screen.



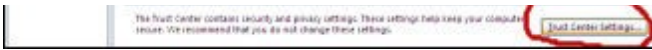
The "Office Button" is the colorful Office logo button in the top left corner. Click it to open the menu shown in the next step.

2. Click the "Excel Options" button in the lower right.

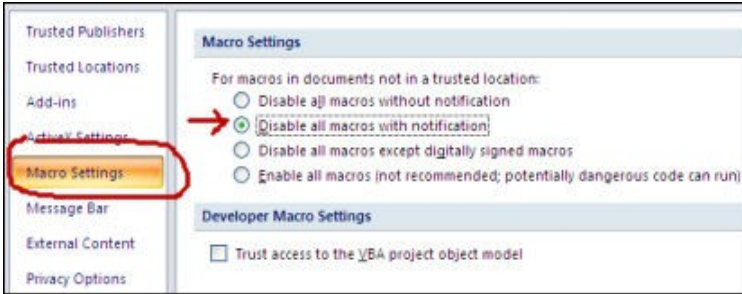


3. Click the "Trust Center" button on the left. Then, at the bottom right, select "Trust Center Settings" as shown below.





4. In the next window, select "Macro Settings," then select the radio button for "Disable all macros with notification."



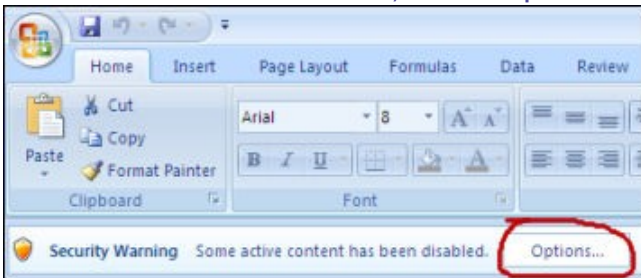
5. To close the Trust Center window, click the lower right "OK" button. Next close the Excel Options window by clicking the OK button.

6. Finally close Excel without saving. If you do save the document make sure you save as an Excel 97-2003 workbook with an "xls" file extension.

7. Now reopen the UCR Summary Excel Workbook which will now have an enable macros option. Until you change the Trust Center settings you will always be provided an option to enable macros in Excel.

Now there should be a SECURITY WARNING notification beneath the Office ribbon, as shown in the next step.

8. In the SECURITY WARNING banner, click the "Options" button.



9. Select the radio box beside "Enable this content," then click "OK."



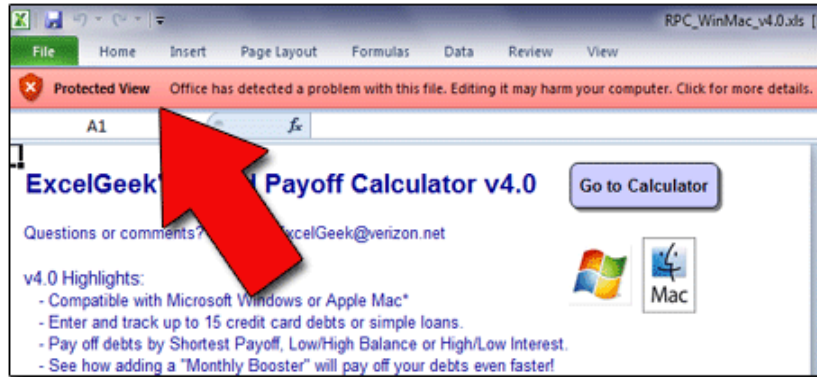


After you click "OK" and the window closes, your macros should function normally. Because you selected "Disable all macros with notification" in Step 4 above, you will need to follow Steps 8 and 9 each time you open a spreadsheet that contains macros.

Enabling Macros in Excel 2010

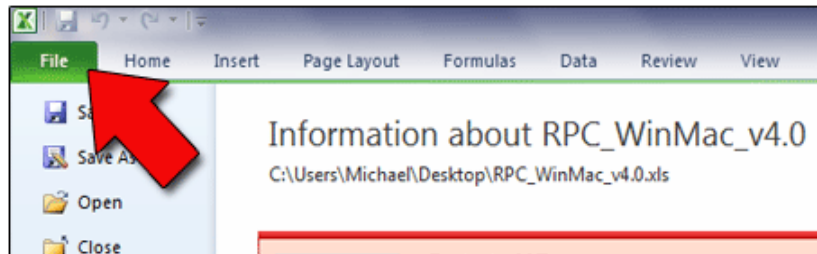
With Excel 2010, Microsoft has added an additional layer of protection — over and above that found in Excel 2007, which centered on simply finding the "hidden" menus where macros can be enabled.

When opening a macro-enabled spreadsheet, by default, Excel 2010 will disable macros and show its new "Protected View" ribbon at the top of your screen:

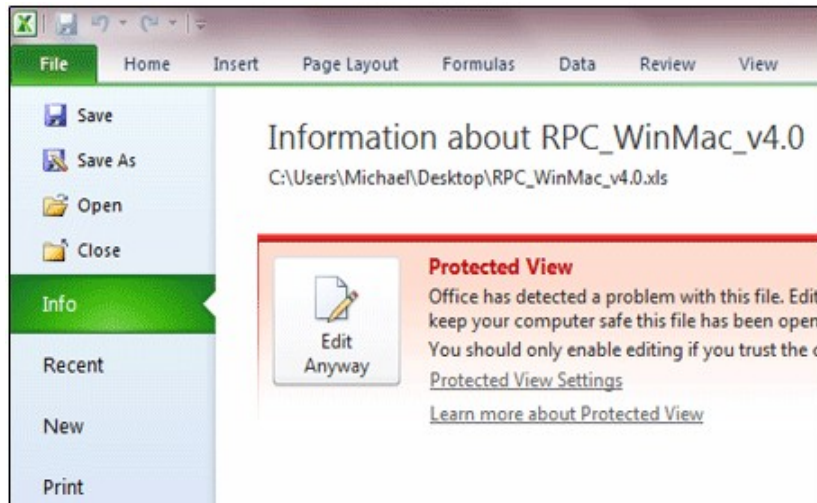


This "Protected View" feature means that enabling macros has now become a two-part process. We need to "turn on," or enable, macros in Excel 2010. So, follow these steps:

1. Open Excel. Click the FILE tab above the Office ribbon. (It's the first tab on the left.)

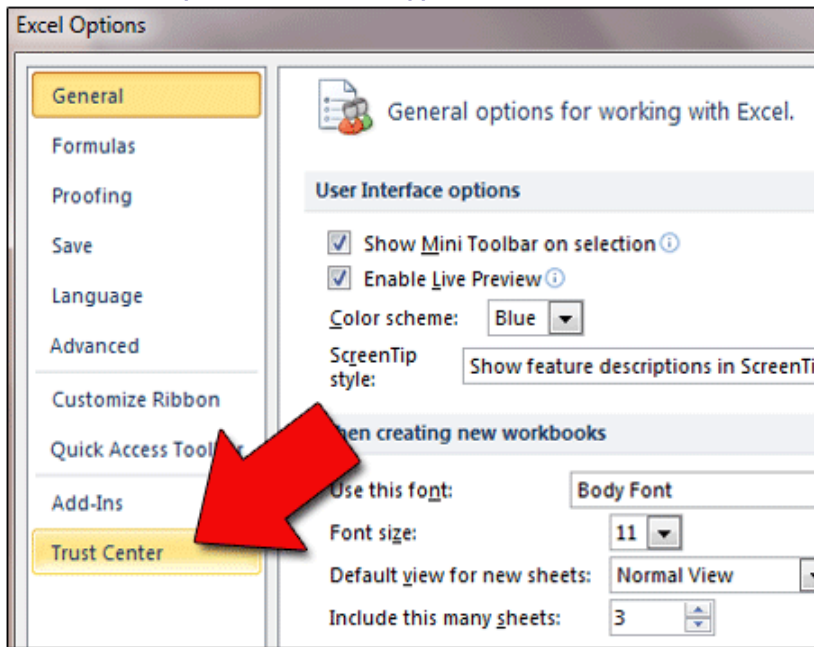


2. In the left-side menu, click OPTIONS.





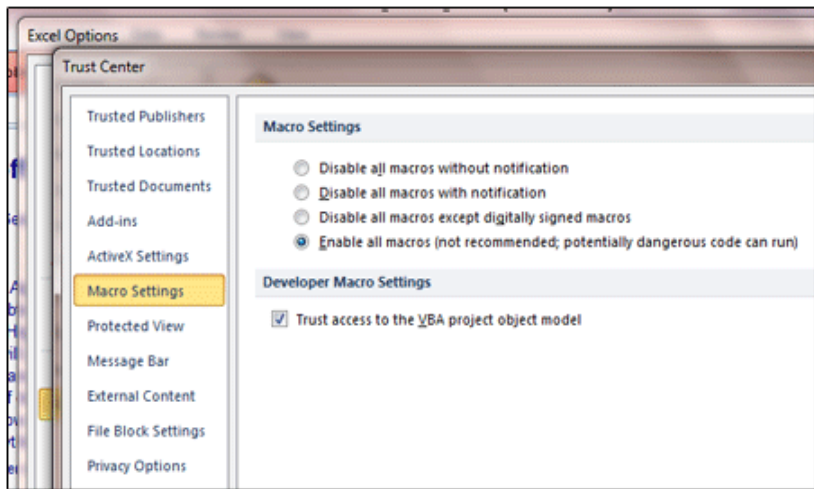
3. In the "Excel Options" window that appears, scan the left menu and click TRUST CENTER.



4. On the right side of the screen, click the TRUST CENTER SETTINGS button.

5. Now you'll see the TRUST CENTER window. In the left menu, select MACRO SETTINGS.

6. You will now see four "Macro Settings" options. Choose "Enable all macros...."



7. Click the OK button at the bottom right of the "Trust Center" window.

8. Click the OK button at the bottom right of the "Excel Options" window.

9. Close Excel, and then reopen it. Macros should now be enabled.

You've now enabled macros in Excel 2010. However, if "Protected View" is enabled, which it WILL be by default, then macros will still NOT run.

Rather than disabling "Protected View," a feature that Microsoft added, I would suggest that you create a "Trusted Locations" folder and save your **trusted**, macro-enabled spreadsheets in it, and run them from there. Doing so will allow Excel macros to run, but only in spreadsheets that you've stored in the folder (or folders) you designate as "Trusted Locations."

To create and designate a "Trusted Locations" folder:

1. On your hard drive or thumb drive, create a folder into which you'll save all your trusted, macro-enabled spreadsheets.

My "safe" folder, as an example, is called "Excel Documents" and is located at "C:\DATA\Excel Documents\" but you can name yours whatever suits you.

2. Open Excel 2010. Click the FILE tab. Click OPTIONS in the left-side menu.

3. In the "Excel Options" window that appears, click the TRUST CENTER button on the left.

4. Click the TRUST CENTER SETTINGS button on the right.

5. On the left, select TRUSTED LOCATIONS.

6. Near the bottom, click the ADD NEW LOCATION button.

7. A small window appears. Click the BROWSE button.

8. Navigate to the folder you created above. Select the folder, and click OK.

9. You should be back to the "Microsoft Office Trusted Location" window. Checkmark the "Subfolders of this location are also trusted" option. Then click the OK button.

10. You should be back to the "Trust Center" window. Click OK.

11. You should be back to the "Excel Options" window. Click OK.

12. Close Excel. Place a trusted, macro-enabled spreadsheet in your "Trusted Locations" folder. When you open it, all macros should be functional.

At this point, as an example, if you were to download a macro-enabled spreadsheet from the internet, and save it to your desktop, its macros would not run when you opened the file.

However, if you saved that same spreadsheet into a folder you designated as a "Trusted Location," the macros would then execute.

| Required Fields | |
|--|--|
| Agency Identifier (7 or 9 digit ORI) | |
| Month of Report | |
| Year of Report (YYYY) | |
| Optional Fields | |
| Agency | |
| City | |
| County | |
| State | |
| Population | |
| Prepared By * | |
| Title of Preparer | |
| Telephone Number * | |
| Email Address * | |
| Chief, Sheriff, Superintendent, Commanding Officer, or Supervisor | |
| Date Prepared | |

*Note: Please provide your contact information

Application Version 1.7

UCR Workbook Options

Please select the type of submission for each form listed below.

| Report | Original Report/ Zero Report | Adjustment | No Change/ No Report |
|-------------------------------------|---------------------------------|-----------------------|-------------------------|
| Return A | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Return A Supplement | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| LEOKA | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| ASR | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Arson | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| SHR | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Police Employees (Annual Report) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Hate Crime | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Human Trafficking | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Cargo Theft | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Reporting older data initiatives (2012 data initiatives)

Select the "Original Report/Zero Report" radio button if submitting a report for the first time when a report has zero values. A report with zero values is not the same as a "No Report."

Select the "Adjustment" radio button if changes were made to a previously submitted report.

Select the "No Change/No Report" radio button if no changes were made to a previously submitted report or if not submitting any values for a report. A "No Report" is not the same as a "Zero Report."

In 2013, UCR began collecting additional information: an expanded definition of rape, collection of Pacific Islander race separate from Asian, Hate Crime, Cargo Theft, and Human Trafficking. Check the box if you do not collect any of the new information.

AGE, SEX, RACE, ETHNI

| AGENCY CASE NUMBER | ARRESTEE | AGE | SEX | RACE | ETHNICITY |
|-----------------------|----------|-----|-----|------|-----------|
|-----------------------|----------|-----|-----|------|-----------|

RETURN A - MONTHLY RETURN OF OFFENSES KNOWN TO THE POLICE

1-720 (Rev. 2-22-13)
OMB No. 1110-0001
Expires 07-31-16

This report is authorized by law Title 28, Section 534, U.S. Code. Your cooperation in completing this form will assist the FBI, in compiling timely, comprehensive, and accurate data. Please submit this form monthly, by the seventh day after the close of the month, and any questions to the FBI, Criminal Justice Information Services Division, Attention: Uniform Crime Reports/Module E-3, 1000 Custer Hollow Road, Clarksburg, West Virginia 26306; telephone 304-625-4830, facsimile 304-625-3566. Under the Paperwork Reduction Act, you are not required to complete this form unless it contains a valid OMB control number. The form takes approximately 10 minutes to complete. Instructions for preparing the form appear on the reverse side.

| CLASSIFICATION OF OFFENSES | DATA ENTRY | 2 OFFENSES REPORTED OR KNOWN TO POLICE (INCLUDE "UNFOUNDED" AND ATTEMPTS) | 3 UNFOUNDED, I.E., FALSE OR BASELESS COMPLAINTS | 4 NUMBER OF ACTUAL OFFENSES (COLUMN 2 MINUS COLUMN 3) (INCLUDE ATTEMPTS) | 5 TOTAL OFFENSES CLEARED BY ARREST OR EXCEPTIONAL MEANS (INCLUDES COL. 6) | 6 NUMBER OF CLEARANCES INVOLVING ONLY PERSONS UNDER 18 YEARS OF AGE |
|--|------------|--|--|--|--|---|
| 1. CRIMINAL HOMICIDE | | | | | | |
| a. MURDER AND NONNEGLIGENT HOMICIDE (Score attempts as aggravated assault) If homicide reported, submit Supplementary Homicide Report | 11 | | | 0 | | |
| b. MANSLAUGHTER BY NEGLIGENCE | 12 | | | 0 | | |
| 2. RAPE TOTAL | 20 | 0 | 0 | 0 | 0 | 0 |
| a. Rape | 21 | | | 0 | | |
| b. Attempts to commit Rape | 22 | | | 0 | | |
| Historical Rape (See Instruction #15 below) | | | | | | |
| 3. ROBBERY TOTAL | 30 | 0 | 0 | 0 | 0 | 0 |
| a. Firearm | 31 | | | 0 | | |
| b. Knife or Cutting Instrument | 32 | | | 0 | | |
| c. Other Dangerous Weapon | 33 | | | 0 | | |
| d. Strong-Arm (Hands, Fists, Feet, Etc.) | 34 | | | 0 | | |
| 4. ASSAULT TOTAL | 40 | 0 | 0 | 0 | 0 | 0 |
| a. Firearm | 41 | | | 0 | | |
| b. Knife or Cutting Instrument | 42 | | | 0 | | |
| c. Other Dangerous Weapon | 43 | | | 0 | | |
| d. Hands, Fists, Feet, Etc. - Aggravated injury | 44 | | | 0 | | |
| e. Other Assaults - Simple, Not Aggravated | 45 | | | 0 | | |
| 5. BURGLARY TOTAL | 50 | 0 | 0 | 0 | 0 | 0 |
| a. Forcible Entry | 51 | | | 0 | | |
| b. Unlawful Entry - No Force | 52 | | | 0 | | |
| c. Attempted Forcible Entry | 53 | | | 0 | | |
| 6. LARCENY - THEFT TOTAL (Except Motor Vehicle Theft) | 60 | | | 0 | | |
| 7. MOTOR VEHICLE THEFT TOTAL | 70 | 0 | 0 | 0 | 0 | 0 |
| a. Autos | 71 | | | 0 | | |
| b. Trucks and Buses | 72 | | | 0 | | |
| c. Other Vehicles | 73 | | | 0 | | |
| GRAND TOTAL | 77 | 0 | 0 | 0 | 0 | 0 |

CHECKING ANY OF THE APPROPRIATE BLOCKS BELOW WILL ELIMINATE YOUR NEED TO SUBMIT REPORTS WHEN THE VALUES ARE ZERO. THIS WILL ALSO AID THE NATIONAL PROGRAM IN ITS QUALITY CONTROL EFFORTS.

| | |
|--|---|
| <input checked="" type="checkbox"/> MURDERS, JUSTIFIABLE HOMICIDES, OR MANSLAUGHTERS BY NEGLIGENCE OCCURRED IN THIS JURISDICTION DURING THE MONTH. | <input checked="" type="checkbox"/> UNDER 18 YEARS OF AGE REPORT SINCE NO ARRESTS OF PERSONS WITHIN THIS AGE GROUP. |
| <input checked="" type="checkbox"/> NO SUPPLEMENT TO RETURN A REPORT SINCE NO CRIME OFFENSES OR RECOVERY OF PROPERTY REPORTED DURING THE MONTH. | <input checked="" type="checkbox"/> NO AGE, SEX, AND RACE OF PERSONS ARRESTED 18 YEARS OF AGE AND OVER REPORT SINCE NO ARREST OF PERSONS WITHIN THIS AGE GROUP. |
| <input checked="" type="checkbox"/> NO LAW ENFORCEMENT OFFICERS KILLED OR ASSAULTED REPORT SINCE NONE OF THE OFFICERS WERE ASSAULTED OR KILLED DURING THE MONTH. | <input checked="" type="checkbox"/> NO MONTHLY RETURN OF ARSON OFFENSES KNOWN TO LAW ENFORCEMENT REPORT SINCE NO ARSONS OCCURRED. |

DO NOT USE THIS SPACE

| | |
|----------|----------|
| | INITIALS |
| RECORDED | |
| EDITED | |
| ENTERED | |
| ADJUSTED | |
| CORRES | |

Month and Year of Report _____ Agency Identifier _____ Population _____

Prepared by _____ Title _____

Telephone Number _____ Date _____

INSTRUCTIONS FOR PREPARING RETURN A

(Detailed instructions are given in the *Uniform Crime Reporting Handbook*)

1. All Offenses listed on the *Return A* which occur during the month should be scored whether they become known to the police as the result of:
 - a. Citizens' complaints.
 - b. Reports of police officers.
 - c. "On view" (pick-up) arrests.
 - d. Citizens' complaints to sheriff, prosecutor, county police, private detectives, constables, etc.
 - e. Any other means.
2. The offenses listed in Column 1 are the Part I offenses of the Uniform Crime Reporting Program plus the offenses of simple assault and manslaughter by negligence. Follow the instructions for classifying and scoring as presented in the *Uniform Crime Reporting Handbook*. Offenses committed by juveniles should be classified in the same manner as those committed by adults even though the juveniles may be handled by juvenile authorities.
3. Adjustments should be made on this month's return for offenses omitted or scored inaccurately on returns of preceding months or those now determined to be unfounded. Offenses that occurred in a previous month but only became known to you this month should be scored this month.
4. Consider all spaces for each classification of offenses in Columns 2, 3, 4, 5, and 6. The breakdowns for forcible rape, robbery, assault, burglary, and motor vehicle theft, when added should equal the total for each of these offenses. Do not enter zeroes where no count exists.
5. Attempts of rape, robbery, assault, burglary, larceny-theft, and motor vehicle theft are to be scored on this form.
6. **Column 2:** Enter opposite the proper offense classification the total number of such offenses reported or known through any means. "Unfounded" complaints are included. Attempts are included except in homicide classifications.
7. **Column 3:** Enter the number of complaints which were proven to be "unfounded" by police investigation. An "unfounded" offense is one in which a complaint was received, but upon investigation, proves either to be baseless or not to have actually occurred. Remember that recovery of property or clearance of an offense does not unfound a complaint.
8. **Column 4:** Number of actual offenses. This number is obtained by subtracting the number in Column 3 from that in Column 2.
9. **Column 5:** Enter the total number of offenses **cleared** during the month. This total includes the clearances which you record in Column 6. An offense is cleared when one or more persons are charged and turned over for prosecution for that offense. Clearance totals also include exceptional clearances which are explained in the *Uniform Crime Reporting Handbook*.
10. **Column 6:** Enter here the number of offenses which are cleared through the arrest, releasing to parents, or other handling of persons under the age of 18. In those situations where an offense is cleared through the involvement of both an adult and a person under 18 years of age, count the clearance only in Column 5.
11. The grand totals for Columns 2, 3, 4, 5, and 6 are the totals of each of the seven classifications.
12. Tally books can be used to maintain a running count of offenses through the month. Totals for the *Return A* can then be taken directly from the Tally book. These Tally books can be obtained by corresponding with the FBI, Criminal Justice Information Services Division, Attention: Uniform Crime Reports/Module E-3, 1000 Custer Hollow Road, Clarksburg, West Virginia 26306; telephone 304-625-4830, facsimile 304-625-3566.
13. This *Return A* report should be forwarded to the FBI Uniform Crime Reports even though no offenses of this type listed were committed during the month. However, it is not necessary to submit supplemental reports in such cases. Simply check the appropriate box within the block near the bottom of the *Return A* report.
14. Any inquiry regarding the completion of this form, the classification and scoring of offenses, or prior to submitting crime data by computer printout, contact the Uniform Crime Reporting Program at the above-mentioned address.
15. Reporting according to the historical definition of rape is optional. This count should be included in the total reported in line 2a or line 2b.

RETURN A - MONTHLY RETURN OF OFFENSES KNOWN TO THE POLICE

This report is authorized by law Title 28, Section 534, U.S. Code. Your cooperation in completing this form will assist the FBI, in compiling timely, comprehensive, and accurate data. Please submit this form monthly, by the seventh day after the close of the month, and any questions to the FBI, Criminal Justice Information Services Division, Attention: Uniform Crime Reports/Module E-3, 1000 Custer Hollow Road, Clarksburg, West Virginia 26306; telephone 304-625-4830, facsimile 304-625-3566. Under the Paperwork Reduction Act, you are not required to complete this form unless it contains a valid OMB control number. The form takes approximately 10 minutes to complete. Instructions for preparing the form appear on the reverse side.

1-720 (Rev. 3-08-06)
OMB No. 1110-0001
Expires 01-30-10

| CLASSIFICATION OF OFFENSES | DATA ENTRY | 2 OFFENSES REPORTED OR KNOWN TO POLICE (INCLUDE "UNFOUNDED" AND ATTEMPTS) | 3 UNFOUNDED, I.E., FALSE OR BASELESS COMPLAINTS | 4 NUMBER OF ACTUAL OFFENSES (COLUMN 2 MINUS COLUMN 3) (INCLUDE ATTEMPTS) | 5 TOTAL OFFENSES CLEARED BY ARREST OR EXCEPTIONAL MEANS (INCLUDES COL. 6) | 6 NUMBER OF CLEARANCES INVOLVING ONLY PERSONS UNDER 18 YEARS OF AGE |
|--|------------|--|--|--|--|---|
| 1. CRIMINAL HOMICIDE | | | | | | |
| a. MURDER AND NONNEGLIGENT HOMICIDE (Score attempts as aggravated assault) If homicide reported, submit Supplementary Homicide Report | 11 | | | 0 | | |
| b. MANSLAUGHTER BY NEGLIGENCE | 12 | | | 0 | | |
| 2. RAPE TOTAL | 20 | 0 | 0 | 0 | 0 | 0 |
| a. Rape | 21 | | | 0 | | |
| b. Attempts to commit Rape | 22 | | | 0 | | |
| 3. ROBBERY TOTAL | 30 | 0 | 0 | 0 | 0 | 0 |
| a. Firearm | 31 | | | 0 | | |
| b. Knife or Cutting Instrument | 32 | | | 0 | | |
| c. Other Dangerous Weapon | 33 | | | 0 | | |
| d. Strong-Arm (Hands, Fists, Feet, Etc.) | 34 | | | 0 | | |
| 4. ASSAULT TOTAL | 40 | 0 | 0 | 0 | 0 | 0 |
| a. Firearm | 41 | | | 0 | | |
| b. Knife or Cutting Instrument | 42 | | | 0 | | |
| c. Other Dangerous Weapon | 43 | | | 0 | | |
| d. Hands, Fists, Feet, Etc. - Aggravated injury | 44 | | | 0 | | |
| e. Other Assaults - Simple, Not Aggravated | 45 | | | 0 | | |
| 5. BURGLARY TOTAL | 50 | 0 | 0 | 0 | 0 | 0 |
| a. Forcible Entry | 51 | | | 0 | | |
| b. Unlawful Entry - No Force | 52 | | | 0 | | |
| c. Attempted Forcible Entry | 53 | | | 0 | | |
| 6. LARCENY - THEFT TOTAL (Except Motor Vehicle Theft) | 60 | | | 0 | | |
| 7. MOTOR VEHICLE THEFT TOTAL | 70 | 0 | 0 | 0 | 0 | 0 |
| a. Autos | 71 | | | 0 | | |
| b. Trucks and Buses | 72 | | | 0 | | |
| c. Other Vehicles | 73 | | | 0 | | |
| GRAND TOTAL | 77 | 0 | 0 | 0 | 0 | 0 |

CHECKING ANY OF THE APPROPRIATE BLOCKS BELOW WILL ELIMINATE YOUR NEED TO SUBMIT REPORTS WHEN THE VALUES ARE ZERO. THIS WILL ALSO AID THE NATIONAL PROGRAM IN ITS QUALITY CONTROL EFFORTS.

| | |
|--|---|
| <input checked="" type="checkbox"/> MURDERS, JUSTIFIABLE HOMICIDES, OR MANSLAUGHTERS BY NEGLIGENCE OCCURRED IN THIS JURISDICTION DURING THE MONTH. | <input checked="" type="checkbox"/> UNDER 18 YEARS OF AGE REPORT SINCE NO ARRESTS OF PERSONS WITHIN THIS AGE GROUP. |
| <input checked="" type="checkbox"/> NO SUPPLEMENT TO RETURN A REPORT SINCE NO CRIME OFFENSES OR RECOVERY OF PROPERTY REPORTED DURING THE MONTH. | <input checked="" type="checkbox"/> NO AGE, SEX, AND RACE OF PERSONS ARRESTED 18 YEARS OF AGE AND OVER REPORT SINCE NO ARREST OF PERSONS WITHIN THIS AGE GROUP. |
| <input checked="" type="checkbox"/> NO LAW ENFORCEMENT OFFICERS KILLED OR ASSAULTED REPORT SINCE NONE OF THE OFFICERS WERE ASSAULTED OR KILLED DURING THE MONTH. | <input checked="" type="checkbox"/> NO MONTHLY RETURN OF ARSON OFFENSES KNOWN TO LAW ENFORCEMENT REPORT SINCE NO ARSONS OCCURRED. |

| DO NOT USE THIS SPACE | |
|-----------------------|----------|
| | INITIALS |
| RECORDED | |
| EDITED | |
| ENTERED | |
| ADJUSTED | |
| CORRES | |

| | | |
|--------------------------|---|------------|
| Month and Year of Report | Agency Identifier | Population |
| Prepared by | Title | |
| Telephone Number | Date | |
| Agency and State | Chief, Sheriff, Superintendent, or Commanding Officer | |

INSTRUCTIONS FOR PREPARING RETURN A

(Detailed instructions are given in the *Uniform Crime Reporting Handbook*)

1. All Offenses listed on the *Return A* which occur during the month should be scored whether they become known to the police as the result of:

- a. Citizens' complaints.
- b. Reports of police officers.
- c. "On view" (pick-up) arrests.
- d. Citizens' complaints to sheriff, prosecutor, county police, private detectives, constables, etc.
- e. Any other means.

2. The offenses listed in Column 1 are the Part I offenses of the Uniform Crime Reporting Program plus the offenses of simple assault and manslaughter by negligence. Follow the instructions for classifying and scoring as presented in the *Uniform Crime Reporting Handbook*. Offenses committed by juveniles should be classified in the same manner as those committed by adults even though the juveniles may be handled by juvenile authorities.

3. Adjustments should be made on this month's return for offenses omitted or scored inaccurately on returns of preceding months or those now determined to be unfounded. Offenses that occurred in a previous month but only became known to you this month should be scored this month.

4. Consider all spaces for each classification of offenses in Columns 2, 3, 4, 5, and 6. The breakdowns for forcible rape, robbery, assault, burglary, and motor vehicle theft, when added should equal the total for each of these offenses. Do not enter zeroes where no count exists.

5. Attempts of rape, robbery, assault, burglary, larceny-theft, and motor vehicle theft are to be scored on this form.

6. **Column 2:** Enter opposite the proper offense classification the total number of such offenses reported or known through any means. "Unfounded" complaints are included. Attempts are included except in homicide classifications.

7. **Column 3:** Enter the number of complaints which were proven to be "unfounded" by police investigation. An "unfounded" offense is one in which a complaint was received, but upon investigation, proves either to be baseless or not to have actually occurred. Remember that recovery of property or clearance of an offense does not unfound a complaint.

8. **Column 4:** Number of actual offenses. This number is obtained by subtracting the number in Column 3 from that in Column 2.

9. **Column 5:** Enter the total number of offenses **cleared** during the month. This total includes the clearances which you record in Column 6. An offense is cleared when one or more persons are charged and turned over for prosecution for that offense. Clearance totals also include exceptional clearances which are explained in the *Uniform Crime Reporting Handbook*.

10. **Column 6:** Enter here the number of offenses which are cleared through the arrest, releasing to parents, or other handling of persons under the age of 18. In those situations where an offense is cleared through the involvement of both an adult and a person under 18 years of age, count the clearance only in Column 5.

11. The grand totals for Columns 2, 3, 4, 5, and 6 are the totals of each of the seven classifications.

12. Tally books can be used to maintain a running count of offenses through the month. Totals for the *Return A* can then be taken directly from the Tally book. These Tally books can be obtained by corresponding with the FBI, Criminal Justice Information Services Division, Attention: Uniform Crime Reports/Module E-3, 1000 Custer Hollow Road, Clarksburg, West Virginia 26306; telephone 304-625-4830, facsimile 304-625-3566.

13. This *Return A* report should be forwarded to the FBI Uniform Crime Reports even though no offenses of this type listed were committed during the month. However, it is not necessary to submit supplemental reports in such cases. Simply check the appropriate box within the block near the bottom of the *Return A* report.

14. Any inquiry regarding the completion of this form, the classification and scoring of offenses, or prior to submitting crime data by computer printout, contact the Uniform Crime Reporting Program at the above-mentioned address.

15. Reporting according to the historical definition of rape is optional. This count should be included in the total reported in line 2a or line 2b.

SUPPLEMENT TO RETURN A

1-706 (Rev. 2-22-13)

OMB No. 1110-0001

Expires 07-31-16

MONTHLY RETURN OF OFFENSES KNOWN TO THE POLICE

This report is authorized by law Title 28, Section 534, U.S. Code. Your cooperation in completing this form with the *Return A* will assist the FBI in compiling timely, comprehensive, and accurate data. Please submit this form monthly, by the seventh day after the close of the month, and any questions to the FBI, Criminal Justice Information Services Division, Attention: Uniform Crime Reports/Module E-3, 1000 Custer Hollow Road, Clarksburg, West Virginia 26306; telephone 304-625-4830, facsimile 304-625-3566. Under the Paperwork Reduction Act, you are not required to complete the form unless it contains a valid OMB control number. The form takes approximately 11 minutes to complete.

This form deals with the nature of crime and the monetary value of property stolen and recovered. The total offenses recorded on this form, page 2, should be the same as the number of actual offenses listed in Column 4 of the *Return A* for each crime class. Include attempted crimes on this form, but do not include unfounded offenses. If you cannot complete the report in all areas, please record as much information as is available. Tally sheets will be sent upon request.

| PROPERTY BY TYPE AND VALUE | | | |
|--|------------|--|------------------|
| Type of Property (1) | Data Entry | Monetary Value of Property Stolen in Your Jurisdiction | |
| | | Stolen (2) | Recovered (3) |
| (A) Currency, Notes, Etc. | 01 | | |
| (B) Jewelry and Precious Metals | 02 | | |
| (C) Clothing and Furs | 03 | | |
| (D) Locally Stolen Motor Vehicles | 04 | | |
| (E) Office Equipment | 05 | | |
| (F) Televisions, Radios, Stereos, Etc. | 06 | | |
| (G) Firearms | 07 | | |
| (H) Household Goods | 08 | | |
| (I) Consumable Goods | 09 | | |
| (J) Livestock | 10 | | |
| (K) Miscellaneous | 11 | | |
| TOTAL | 00 | \$0 | \$0 |

The total of this column should agree with the Grand Total (DATA ENTRY 77) shown on page 2.

Include in this column all property recovered even though stolen in prior months. The above is an accounting for only that property stolen in your jurisdiction. This will include property recovered for you by other jurisdictions, but not property you recover for them.

Prepared by _____ Title _____

Telephone Number _____ Date _____

Chief, Sheriff, Superintendent, or Commanding Officer

Month and Year of Report _____ Agency Identifier _____

Population _____

Agency and State _____

| DO NOT USE THIS SPACE | |
|------------------------------|----------|
| | INITIALS |
| RECORDED | |
| EDITED | |
| ENTERED | |

| | |
|----------|--|
| ADJUSTED | |
| CORRES. | |

PROPERTY STOLEN BY CLASSIFICATION

| <u>CLASSIFICATION</u> | DATA ENTRY | Number of Actual Offenses (Column 4 Return A) | Monetary Value of Property Stolen |
|---|------------|---|-----------------------------------|
| 1. MURDER AND NONNEGLIGENT MANSLAUGHTER | 12 | | |
| 2. RAPE | 20 | | |
| 3. ROBBERY | | | |
| (a) HIGHWAY (streets, alleys, etc.) | 31 | | |
| (b) COMMERCIAL HOUSE (except c, d, and f) | 32 | | |
| (c) GAS OR SERVICE STATION | 33 | | |
| (d) CONVENIENCE STORE | 34 | | |
| (e) RESIDENCE (anywhere on premises) | 35 | | |
| (f) BANK | 36 | | |
| (g) MISCELLANEOUS | 37 | | |
| TOTAL ROBBERY | 30 | 0 | \$0 |
| 5. BURGLARY - BREAKING OR ENTERING | | | |
| (a) RESIDENCE (dwelling) | | | |
| (1) NIGHT (6 p.m. - 6 a.m.) | 51 | | |
| (2) DAY (6 a.m. - 6 p.m.) | 52 | | |
| (3) UNKNOWN | 53 | | |
| (b) NON-RESIDENCE (store, office, etc.) | | | |
| (1) NIGHT (6 p.m. - 6 a.m.) | 54 | | |
| (2) DAY (6 a.m. - 6 p.m.) | 55 | | |
| (3) UNKNOWN | 56 | | |
| TOTAL BURGLARY | 50 | 0 | \$0 |
| 6. LARCENY - THEFT (Except Motor Vehicle Theft) | | | |
| (a) \$200 AND OVER | 61 | | |
| (b) \$50 TO \$199 | 62 | | |
| (c) UNDER \$50 | 63 | | |
| TOTAL LARCENY (Same as Item 6x) | 60 | 0 | \$0 |
| 7. MOTOR VEHICLE THEFT (Include Alleged Joy Ride) | 70 | | |
| GRAND TOTAL - ALL ITEMS | 77 | | \$0 |
| <small>ADDITIONAL ANALYSIS OF LARCENY AND MOTOR VEHICLE THEFT</small> | | | |
| 6x. NATURE OF LARCENIES UNDER ITEM 6 | | | |
| (a) POCKET-PICKING | 81 | | |
| (b) PURSE-SNATCHING | 82 | | |
| (c) SHOPLIFTING | 83 | | |
| (d) FROM MOTOR VEHICLES (except e) | 84 | | |
| (e) MOTOR VEHICLE PARTS AND ACCESSORIES | 85 | | |
| (f) BICYCLES | 86 | | |
| (g) FROM BUILDING (except c and h) | 87 | | |
| (h) FROM ANY COIN-OPERATED MACHINES (parking meters,etc.) | 88 | | |
| (i) ALL OTHER | 89 | | |
| TOTAL LARCENIES (Same as Item 6) | 80 | 0 | \$0 |
| 7x. MOTOR VEHICLES RECOVERED | | | |

| | | |
|---|----|----------|
| (a) STOLEN LOCALLY AND RECOVERED LOCALLY | 91 | |
| (b) STOLEN LOCALLY AND RECOVERED BY OTHER JURISDICTIONS | 92 | |
| (c) TOTAL LOCALLY STOLEN MOTOR VEHICLES RECOVERED (a & b) | 90 | 0 |

LAW ENFORCEMENT OFFICERS KILLED OR ASSAULTED

This report is authorized by law Title 28, Section 534, U.S. Code. Even though you are not required to respond, your cooperation in using this form to report the number of your officers who were killed or assaulted in the line of duty during the month will assist the FBI in compiling timely, comprehensive, and accurate data. Please submit this report, by the seventh day after the close of the month, and any questions to the FBI, Criminal Justice Information Services Division, Attention: Uniform Crime Reports/Module E-3, 1000 Custer Hollow Road, Clarksburg, West Virginia 26306; telephone 304-625-4830; facsimile 304-625-3566. Under the Paperwork Reduction Act, you are not required to complete this form unless it contains a valid OMB control number. The form takes approximately 7 minutes to complete. Instructions for preparing the form are on the reverse side. Additional information on officers who were assaulted and injured with a firearm or a knife or other cutting instrument will be requested on a separate questionnaire, *Analysis of Law Enforcement Officers Killed and Assaulted*.

| | |
|--|--|
| OFFICERS KILLED | |
| Number of your law enforcement officers killed in the line of duty this month. | By felonious act |
| | By accident or negligence |

OFFICERS ASSAULTED (Do not include officers killed) - See other side for instructions.

| Type of activity | Total assaults by weapon A | Type of weapon | | | | Two-officer vehicle F | Type of assignment | | | | | | Officer assaults cleared M |
|---|--------------------------------------|---------------------|---|------------------------------------|--------------------------------------|---------------------------------|---------------------|----------------------|------------------------------|----------------------|-------------------|----------------------|--------------------------------------|
| | | Firearm B | Knife or other cutting instrument C | Other dangerous weapon D | Hands, fists, feet, etc. E | | One-officer vehicle | | Detective or special assign. | | Other | | |
| | | | | | | | Alone G | Assisted H | Alone I | Assisted J | Alone K | Assisted L | |
| 1. Responding to disturbance calls (family quarrels, person with firearm, etc.) | 0 | | | | | | | | | | | | |
| 2. Burglaries in progress or pursuing burglary suspects | 0 | | | | | | | | | | | | |
| 3. Robberies in progress or pursuing robbery suspects | 0 | | | | | | | | | | | | |
| 4. Attempting other arrests | 0 | | | | | | | | | | | | |
| 5. Civil disorder (riot, mass disobedience, etc.) | 0 | | | | | | | | | | | | |
| 6. Handling, transporting, custody of prisoners | 0 | | | | | | | | | | | | |
| 7. Investigating suspicious persons or circumstances | 0 | | | | | | | | | | | | |
| 8. Ambush - no warning | 0 | | | | | | | | | | | | |
| 9. Handling persons with mental illness | 0 | | | | | | | | | | | | |
| 10. Traffic pursuits and stops | 0 | | | | | | | | | | | | |
| 11. All other | 0 | | | | | | | | | | | | |
| 12. TOTAL (1-11) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 13. Number with personal injury* | 0 | | | | | DO NOT WRITE HERE | | | | | | Initials | |
| 14. Number without personal injury | 0 | | | | | | | | | | | | |
| 15. Time of assaults | AM | | | | | | | | | | | | |
| | PM | | | | | | | | | | | | |

| | |
|--------------------------|----------|
| DO NOT WRITE HERE | |
| | Initials |
| Recorded | |
| Edited | |
| Entered | |
| Verified | |
| Adjusted | |

| | | | | | | | |
|----------------------|-------|------|------|------|------|-------|-------|
| | 12:01 | 2:00 | 4:00 | 6:00 | 8:00 | 10:00 | 12:00 |
| 15. Time of assaults | AM | | | | | | |
| | PM | | | | | | |

| | | | |
|----------------|-------------------|--|-------|
| Month and Year | Agency Identifier | Prepared by / E-mail address | Title |
| Agency | State | Chief, Sheriff, Superintendent, Commanding Officer | |

***If the officer was injured with a firearm (13B) or a knife or other cutting instrument (13C), please complete the block on the reverse side and include your agency's incident or case number(s). This information is only for your agency's use to assist in referencing the incident once the above-mentioned questionnaire is forwarded to you for completion.**

FBI/DOJ

INSTRUCTIONS FOR PREPARING REPORT

When an officer is assaulted in the line of duty, the reporting agency should enter the type of weapon (columns B through E) and type of assignment (columns F through L) next to the appropriate type of assignment (lines 1 through 11). The reporting agency should also indicate injury (line 13) or no injury (line 14) and total number of assaults by the time of day on line 15. Reporting agencies are reminded that the Hierarchy Rule applies to those incidents involving aggravated assaults on law enforcement officers while responding to or taking necessary action at the scene of a crime. For example, if an officer is assaulted at the scene of a robbery, only the robbery is scored on the Return A, but the assault is recorded on this form. However, if the officer is assaulted during a burglary incident, only the assault is scored both on the Return A and on this form.

The reporting agency should use column M next to the appropriate activity to indicate that an assault on a law enforcement officer was cleared by arrest.

At the end of the month, the reporting agency should add across each line, B through E, and enter total in column A. (The total F through L should equal the total of B through E as entered in A.) Finally, the reporting agency should enter a total for each column (B through M) on line 12.

Columns B - E:

Columns B through E pertain to type of weapon. The reporting agency should enter one weapon for each assault. If more than one type of weapon is used to commit a single assault, the weapon which is first encountered in moving from column B to column E should be the weapon selected.

Columns F - L:

Column F (Two-officer vehicle) and columns G and H (One-officer vehicle) pertain to uniformed officers, columns I and J (Detective or special assignment) to non-uniformed officers. Columns K and L (Other) pertain to officers assaulted functioning in a capacity not represented by columns F through J such as foot patrol, off duty, etc.

Column M:

Enter the number of officer assaults cleared. Column M should not be used to count the number of persons arrested for such offenses. Include exceptional clearances in this column.

Lines 1 - 11:

Enter the type of law enforcement activity in which the officer was engaged at the time of assault.

Line 12:

Enter the total of lines 1 through 11.

Line 13:

Enter the number of assaults from line 12 that resulted in personal injury to the officer.

Line 14:

Enter the number of assaults from line 12 in which there was no injury to the officer.

Line 15:

Enter the total number of assaults on officers occurring within the appropriate two-hour intervals.

YOUR AGENCY'S INCIDENT OR CASE NUMBER(S)

(Complete this block only if the assaulted officer was injured with a firearm or a knife or other cutting instrument.)

| | | | | |
|--|--|--|--|--|
| | | | | |
| | | | | |

AGE, SEX, RACE, AND ETHNICITY OF PERSONS ARRESTED

Under 18 Years of Age

1-708a (Rev. 12-19-11)

OMB No. 1110-0005

Expires 06-30-17

This report is authorized by law Title 28, Section 534, United States Code. While you are not required to respond, your cooperation in using this form to report the age, sex, race, and ethnicity of all persons under 18 years of age arrested by your department during the month will assist the FBI in compiling comprehensive accurate data on a timely basis. Instructions appear on the reverse of this form. Any questions regarding this report may be addressed to the Federal Bureau of Investigation, Criminal Justice Information Services Division, Attention: Uniform Crime Reports, Module E-3, 1000 Custer Hollow Road, Clarksburg, West Virginia, 26306; telephone (304) 625-4830, facsimile (304) 625-3566.

City County

State Month and Year of Report

Prepared By / Telephone number / E-mail address Title

Chief, Sheriff, Commissioner, or Superintendent

Date Prepared

POLICE DISPOSITION OF JUVENILES-NOT TO INCLUDE NEGLECT OR TRAFFIC CASES
(Follow your State age definition for juveniles)

| | |
|--|---|
| Total | 0 |
| 1. Handled within Department and released. (Warning, released to parents, etc.) | |
| 2. Referred to juvenile court or probation department. | |
| 3. Referred to welfare agency. | |
| 4. Referred to other police agency. | |
| 5. Referred to criminal or adult court. | |

| | |
|----------|--|
| Recorded | |
| Edited | |
| Entered | |
| Adjusted | |
| Corres. | |

AGE, SEX, RACE, AND ETHNICITY OF PERSONS ARRESTED, under 18 years of age

(Include those released without having been formally charged)

| CLASSIFICATION OF OFFENSES | SEX | AGE | | | | | | Total Under 18 | RACE | | | | | ETHNICITY | | |
|--|--------|----------|-------|-------|----|----|----|----------------|-------|-------|-----------------------------------|-------|---|--------------------|------------------------|---|
| | | Under 10 | 10-12 | 13-14 | 15 | 16 | 17 | | White | Black | American Indian or Alaskan Native | Asian | Native Hawaiian or Other Pacific Islander | Hispanic or Latino | Not Hispanic or Latino | |
| Murder and Nonnegligent Manslaughter | 01a | Male | | | | | | 0 | | | | | | | | |
| | Female | | | | | | | 0 | | | | | | | | |
| Manslaughter by Negligence | 01b | Male | | | | | | 0 | | | | | | | | |
| | Female | | | | | | | 0 | | | | | | | | |
| Rape | 02 | Male | | | | | | 0 | | | | | | | | |
| | Female | | | | | | | 0 | | | | | | | | |
| Robbery | 03 | Male | | | | | | 0 | | | | | | | | |
| | Female | | | | | | | 0 | | | | | | | | |
| Aggravated Assault (Return A - 4a-d) | 04 | Male | | | | | | 0 | | | | | | | | |
| | Female | | | | | | | 0 | | | | | | | | |
| Burglary - Breaking or Entering | 05 | Male | | | | | | 0 | | | | | | | | |
| | Female | | | | | | | 0 | | | | | | | | |
| Larceny - Theft (Except Motor Vehicle Theft) | 06 | Male | | | | | | 0 | | | | | | | | |
| | Female | | | | | | | 0 | | | | | | | | |
| Motor Vehicle Theft | 07 | Male | | | | | | 0 | | | | | | | | |
| | Female | | | | | | | 0 | | | | | | | | |
| Other Assaults (Return A - 4e) | 08 | Male | | | | | | 0 | | | | | | | | |
| | Female | | | | | | | 0 | | | | | | | | |
| Arson | 09 | Male | | | | | | 0 | | | | | | | | |
| | Female | | | | | | | 0 | | | | | | | | |
| Forgery and Counterfeiting | 10 | Male | | | | | | 0 | | | | | | | | |
| | Female | | | | | | | 0 | | | | | | | | |
| Fraud | 11 | Male | | | | | | 0 | | | | | | | | |
| | Female | | | | | | | 0 | | | | | | | | |
| Embezzlement | 12 | Male | | | | | | 0 | | | | | | | | |
| | Female | | | | | | | 0 | | | | | | | | |
| Stolen Property; Buying, Receiving, Possessing | 13 | Male | | | | | | 0 | | | | | | | | |
| | Female | | | | | | | 0 | | | | | | | | |
| Vandalism | 14 | Male | | | | | | 0 | | | | | | | | |
| | Female | | | | | | | 0 | | | | | | | | |
| Weapons; Carrying, Possessing, etc. | 15 | Male | | | | | | 0 | | | | | | | | |
| | Female | | | | | | | 0 | | | | | | | | |
| Prostitution and Commercialized Vice | Total | 16 | Male | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | Female | | 0 | 0 | 0 | 0 | 0 | 0 | | | | | | | | |
| Prostitution | a | Male | | | | | | 0 | | | | | | | | |
| | Female | | | | | | | 0 | | | | | | | | |
| Assisting or Promoting Prostitution | b | Male | | | | | | 0 | | | | | | | | |
| | Female | | | | | | | 0 | | | | | | | | |
| Purchasing Prostitution | c | Male | | | | | | 0 | | | | | | | | |
| | Female | | | | | | | 0 | | | | | | | | |
| Sex Offenses (Except Forcible Rape and Prostitution) | 17 | Male | | | | | | 0 | | | | | | | | |
| | Female | | | | | | | 0 | | | | | | | | |
| Drug Abuse Violations | 18 | Male | 0 | 0 | 0 | 0 | 0 | 0 | | | | | | | | |
| | Female | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| (1) Sale/Manufacturing | | Male | 0 | 0 | 0 | 0 | 0 | 0 | | | | | | | | |

| | | | | | | | | | | | | | | | | |
|--|----------|--------|--------|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Opium or Cocaine and Their Derivatives (Morphine, Heroin, Codeine) | a | Male | | | | | | | 0 | | | | | | | |
| | | Female | | | | | | | 0 | | | | | | | |
| Marijuana | b | Male | | | | | | | 0 | | | | | | | |
| | | Female | | | | | | | 0 | | | | | | | |
| Synthetic Narcotics - Manufactured Narcotics Which Can Cause True Drug Addiction (Demerol, Methadones) | c | Male | | | | | | | 0 | | | | | | | |
| | | Female | | | | | | | 0 | | | | | | | |
| Other - Dangerous Nonnarcotic Drugs (Barbiturates, Benzedrine) | d | Male | | | | | | | 0 | | | | | | | |
| | | Female | | | | | | | 0 | | | | | | | |
| (2) Possession | Subtotal | 185 | Male | 0 | 0 | 0 | 0 | 0 | 0 | | | | | | | |
| | | | Female | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Opium or Cocaine and Their Derivatives (Morphine, Heroin, Codeine) | e | Male | | | | | | | 0 | | | | | | | |
| | | Female | | | | | | | 0 | | | | | | | |
| Marijuana | f | Male | | | | | | | 0 | | | | | | | |
| | | Female | | | | | | | 0 | | | | | | | |
| Synthetic Narcotics - Manufactured Narcotics Which Can Cause True Drug Addiction (Demerol, Methadones) | g | Male | | | | | | | 0 | | | | | | | |
| | | Female | | | | | | | 0 | | | | | | | |
| Other - Dangerous Nonnarcotic Drugs (Barbiturates, Benzedrine) | h | Male | | | | | | | 0 | | | | | | | |
| | | Female | | | | | | | 0 | | | | | | | |
| Gambling | Total | 19 | Male | 0 | 0 | 0 | 0 | 0 | 0 | | | | | | | |
| | | | Female | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Bookmaking (Horse and Sport Book) | a | Male | | | | | | | 0 | | | | | | | |
| | | Female | | | | | | | 0 | | | | | | | |
| Numbers and Lottery | b | Male | | | | | | | 0 | | | | | | | |
| | | Female | | | | | | | 0 | | | | | | | |
| All Other Gambling | c | Male | | | | | | | 0 | | | | | | | |
| | | Female | | | | | | | 0 | | | | | | | |
| Offenses Against The Family and Children | 20 | Male | | | | | | | 0 | | | | | | | |
| | | Female | | | | | | | 0 | | | | | | | |
| Driving Under The Influence | 21 | Male | | | | | | | 0 | | | | | | | |
| | | Female | | | | | | | 0 | | | | | | | |
| Liquor Laws | 22 | Male | | | | | | | 0 | | | | | | | |
| | | Female | | | | | | | 0 | | | | | | | |
| Drunkenness | 23 | Male | | | | | | | 0 | | | | | | | |
| | | Female | | | | | | | 0 | | | | | | | |
| Disorderly Conduct | 24 | Male | | | | | | | 0 | | | | | | | |
| | | Female | | | | | | | 0 | | | | | | | |
| Vagrancy | 25 | Male | | | | | | | 0 | | | | | | | |
| | | Female | | | | | | | 0 | | | | | | | |
| All Other Offenses (Except Traffic) | 26 | Male | | | | | | | 0 | | | | | | | |
| | | Female | | | | | | | 0 | | | | | | | |
| Suspicion | 27 | Male | | | | | | | 0 | | | | | | | |
| | | Female | | | | | | | 0 | | | | | | | |
| Curfew and Loitering Law Violations | 28 | Male | | | | | | | 0 | | | | | | | |
| | | Female | | | | | | | 0 | | | | | | | |
| Runaways | 29 | Male | | | | | | | 0 | | | | | | | |
| | | Female | | | | | | | 0 | | | | | | | |
| Human Trafficking/Commercial Sex Acts | 30 | Male | | | | | | | 0 | | | | | | | |
| | | Female | | | | | | | 0 | | | | | | | |
| Human Trafficking/Involuntary Servitude | 31 | Male | | | | | | | 0 | | | | | | | |
| | | Female | | | | | | | 0 | | | | | | | |
| Total | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

INSTRUCTIONS

1. Show in the report all persons under 18 years of age taken into custody during the month for committing an offense of the indicated types within the local jurisdiction. (Include those released without having been formally charged.) For purposes of Uniform Crime Reporting, a juvenile should be counted as "arrested" when the circumstances are such that if he or she were an adult, an arrest would be tallied. Police "contacts" with juveniles where no offense has been committed should not be scored as arrests. Instances where a juvenile is taken into custody for his/her own protection, such as "neglect," and no crime committed, should not be listed as arrests. Enter on the front of this form your disposition of all juveniles arrested.
2. Arrests of persons 18 years of age and over are tallied on the Age, Sex, Race, and Ethnicity of Persons Arrested, 18 Years of Age and Over reporting form.
3. The offenses are taken from the uniform classification of offenses and cover all the Part I and Part II offenses except traffic. In compiling the data, follow definitions of offenses in the *Uniform Crime Reporting Handbook*.
4. Enter opposite each offense the number of persons taken into custody listing them according to age and sex of the persons arrested and according to race and ethnicity without regard to sex. Juveniles should be listed opposite the classification of the offense for which they were taken into custody. For example, juveniles arrested for committing larceny should be listed opposite the larceny-theft classification on this report, even though they are charged with "juvenile delinquency."
5. The race totals should equal the age totals for each offense class.
6. Total all columns.

AGE, SEX, RACE, AND ETHNICITY OF PERSONS ARRESTED

18 Years of Age and Over

1-708 (Rev. 12-19-11)

OMB No. 1110-0005

Expires 06-30-17

This report is authorized by law Title 28, Section 534, United States Code. While you are not required to respond, your cooperation in using this form to report the age, sex, race, and ethnicity of all persons 18 years of age and over arrested by your department during the month will assist the FBI in compiling comprehensive accurate data on a timely basis. Instructions appear of the reverse of this form. Any questions regarding this report may be addressed to the Federal Bureau of Investigation, Criminal Justice Information Services Division, Attention: Uniform Crime Reports/Module E-3, 1000 Custer Hollow Road, Clarksburg, West Virginia 26306; telephone 304-625-4830, facsimile 304-625-3566.

City _____

County _____

State _____

Month and Year of Report _____

Prepared By / Telephone number / E-mail address _____ Title _____

Chief, Sheriff, Commissioner, or Superintendent _____

Date Prepared _____

| | |
|----------|--|
| Recorded | |
| Edited | |
| Entered | |
| Adjusted | |
| Corres. | |

INSTRUCTIONS

1. Show in the report all persons 18 years of age and over taken into custody during the month for committing an offense of the indicated types within the local jurisdiction. (Include those released without having been formally charged.)
2. Arrests of persons under 18 years of age are tallied on the Age, Sex, Race, and Ethnicity of Persons Arrested, Under 18 Years of Age reporting form.
3. The offenses are taken from the uniform classification of offenses and cover all the Part I and Part II offenses except traffic. In compiling the data, follow definitions of offenses in the *Uniform Crime Reporting Handbook*.
4. Enter opposite each offense the number of persons taken into custody listing them according to age and sex of the persons arrested and according to race and ethnicity without regard to sex.
5. The race totals should equal the age totals for each offense class.
6. Total all columns.

AGE, SEX, AND RACE OF PERSONS ARRESTED

Under 18 Years of Age

1-708a (Rev. 12-19-11)
 OMB No. 1110-0005
 Expires 06-30-17

This report is authorized by law Title 28, Section 534, United States Code. While you are not required to respond, your cooperation in using this form to report the age, sex, and race of all persons under 18 years of age arrested by your department during the month will assist the FBI in compiling comprehensive accurate data on a timely basis. Instructions appear on the reverse of this form. Any questions regarding this report may be addressed to the Federal Bureau of Investigation, Criminal Justice Information Services Division, Attention: Uniform Crime Reports, Module E-3, 1000 Custer Hollow Road, Clarksburg, West Virginia, 26306; telephone (304) 625-4830, facsimile (304) 625-3566.

City _____ County _____

State _____ Month and Year of Report _____

Prepared By _____ Title _____

Chief, Sheriff, Commissioner, or Superintendent _____

Date Prepared _____

POLICE DISPOSITION OF JUVENILES-NOT TO INCLUDE NEGLECT OR TRAFFIC CASES
 (Follow your State age definition for juveniles)

| | |
|--|---|
| Total | 0 |
| 1. Handled within Department and released. (Warning, released to parents, etc.) | |
| 2. Referred to juvenile court or probation department. | |
| 3. Referred to welfare agency. | |
| 4. Referred to other police agency. | |
| 5. Referred to criminal or adult court. | |

**DO NOT WRITE
 IN THESE SPACES**

_____ ORI _____ Month _____ Year _____

TYPE cc-16

- /b-Update
- 1-Delete Month
- 2-Adjustment

NARCOTICS/GAMBLING cc-17

- /b-18/19 Complete
- 1-Totals only
- 2-Totals 18 only
- 3-Totals 19 only

JUVENILE/ADULT cc-19

- /b-Data for both
- 1-Zero adult information
- 2-Zero juvenile information
- 3-Zero juvenile and adult

JUVENILE DISPOSITION cc-20

- /b-Update
- 1-Do not use
- 2-Delete

| | |
|----------|--|
| Recorded | |
| Edited | |
| Entered | |
| Adjusted | |

RACE/EO cc-18

3-All data for ASR

4-No race

3-Adjust

| | |
|---------|--|
| Corres. | |
|---------|--|

| | | | | | | | | | | | | | |
|--|-----|--------|---|---|---|---|---|---|---|---|---|---|---|
| Opium or Cocaine and Their Derivatives (Morphine, Heroin, Codeine) | a | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Marijuana | b | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Synthetic Narcotics - Manufactured Narcotics Which Can Cause True Drug Addiction (Demerol, Methadones) | c | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Other - Dangerous Nonnarcotic Drugs (Barbiturates, Benzadrine) | d | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| (2) Possession Subtotal | 185 | Male | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | Female | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Opium or Cocaine and Their Derivatives (Morphine, Heroin, Codeine) | e | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Marijuana | f | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Synthetic Narcotics - Manufactured Narcotics Which Can Cause True Drug Addiction (Demerol, Methadones) | g | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Other - Dangerous Nonnarcotic Drugs (Barbiturates, Benzadrine) | h | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Gambling Total | 19 | Male | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | Female | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Bookmaking (Horse and Sport Book) | a | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Numbers and Lottery | b | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| All Other Gambling | c | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Offenses Against The Family and Children | 20 | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Driving Under The Influence | 21 | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Liquor Laws | 22 | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Drunkenness | 23 | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Disorderly Conduct | 24 | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Vagrancy | 25 | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| All Other Offenses (Except Traffic) | 26 | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Suspicion | 27 | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Curfew and Loitering Law Violations | 28 | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Runaways | 29 | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Total | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

INSTRUCTIONS

1. Show in the report all persons under 18 years of age taken into custody during the month for committing an offense of the indicated types within the local jurisdiction. (Include those released without having been formally charged.) For purposes of Uniform Crime Reporting, a juvenile should be counted as "arrested" when the circumstances are such that if he or she were an adult, an arrest would be tallied. Police "contacts" with juveniles where no offense has been committed should not be scored as arrests. Instances where a juvenile is taken into custody for his own protection, such as "neglect," and no crime committed, should not be listed as arrests. Enter on the front of this form your disposition of all juveniles arrested.
2. Arrests of persons 18 years of age and over are tallied on the white Age, Sex, and Race reporting form.
3. The offenses are taken from the uniform classification of offenses and cover all the Part I and Part II offenses except traffic. In compiling the data, follow definitions of offenses in Uniform Crime Reporting Handbook.
4. Enter opposite each offense the number of persons taken into custody listing them according to age and sex of the persons arrested and according to race without regard to sex. Juveniles should be listed opposite the classification of the offense for which they were taken into custody. For example, juveniles arrested for committing larceny should be listed opposite the larceny-theft classification on this report, even though they are charged with "juvenile delinquency."
5. The race totals should equal the age totals for each offense class.
6. Total all columns.

AGE, SEX, AND RACE OF PERSONS ARRESTED

18 Years of Age and Over

1-708 (Rev. 12-19-11)

OMB No. 1110-0005

Expires 06-30-17

This report is authorized by law Title 28, Section 534, United States Code. While you are not required to respond, your cooperation in using this form to report the age, sex, and race of all persons 18 years of age and over arrested by your department during the month will assist the FBI in compiling comprehensive accurate data on a timely basis. Instructions appear of the reverse of this form. Any questions regarding this report may be addressed to the Federal Bureau of Investigation, Criminal Justice Information Services Division, Attention: Uniform Crime Reports/Module E-3, 1000 Custer Hollow Road, Clarksburg, West Virginia 26306; telephone 304-625-4830, facsimile 304-625-3566.

City _____

County _____

State _____

Month and Year of Report _____

Prepared By _____ Title _____

Chief, Sheriff, Commissioner, or Superintendent _____

Date Prepared _____

**DO NOT WRITE
IN THESE SPACES**

ORI

MONTH

YEAR

TYPE cc-16

- /b-Update
- 1-Delete Month
- 2-Adjustment

NARCOTICS/GAMBLING cc-17

- /b-18/19 Complete
- 1-Totals only
- 2-Totals 18 only
- 3-Totals 19 only

RACE/EO cc-18

- /b-All data for ASREO
- 2-No Race
- 3-No ethnic origin
- 4-Data for age and sex only

JUVENILE/ADULT cc-19

- /b-Data for both
- 1-Zero adult information
- 2-Zero juvenile information
- 3-Zero juvenile and adult

JUVENILE DISPOSITION cc-20

- /b-Update
- 1-Do not use
- 2-Delete
- 3-Adjust

| | |
|----------|--|
| Recorded | |
| Edited | |
| Entered | |
| Adjusted | |
| Corres. | |



AGE, SEX, AND RACE OF PERSONS ARRESTED, 18 years of age and over

(Include those released without having been formally charged)

| CLASSIFICATION OF OFFENSES | SEX | AGE | | | | | | | | | | | | | | | TOTAL | RACE | | | | |
|---|--------|-----|----|----|----|----|----|----|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------------|-------|-------|-----------------------------------|---------------------------|
| | | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25-29 | 30-34 | 35-39 | 40-44 | 45-49 | 50-54 | 55-59 | 60-64 | | 65 and over | White | Black | American Indian or Alaskan Native | Asian or Pacific Islander |
| Murder and Nonnegligent Manslaughter 01a | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Manslaughter by Negligence 01b | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Forcible Rape 02 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Robbery 03 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Aggravated Assault (Return A - 4a-d) 04 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Burglary - Breaking or Entering 05 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Larceny - Theft (Except Motor Vehicle Theft) 06 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Motor Vehicle Theft 07 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Other Assaults (Return A - 4e) 08 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Arson 09 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Forgery and Counterfeiting 10 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Fraud 11 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Embezzlement 12 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Stolen Property; Buying, Receiving, Possessing 13 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Vandalism 14 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Weapons; Carrying, Possessing, etc. 15 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Prostitution and Commercialized Vice 16 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Sex Offenses (Except Forcible Rape and Prostitution) 17 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Drug Abuse Violations | Male | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | | | |
| Grand Total 18 | Female | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| (1) Sale/Manufacturing | Male | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | | | |
| Subtotal 180 | Female | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

| | | | | | | | | | | | | | | | | | | | | | | |
|--|--------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|---|--|--|--|
| Opium or Cocaine and Their Derivatives (Morphine, Heroin, Codeine) | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | | 0 | | | |

| | | | | | | | | | | | | | | | | | | | | | | | |
|--|-----|--------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Marijuana | b | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| Synthetic Narcotics - Manufactured Narcotics Which Can Cause True Drug Addiction (Demerol, Methadones) | c | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| Other - Dangerous Nonnarcotic Drugs (Barbiturates, Benzedrine) | d | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| (2) Possession | 185 | Male | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | | | |
| Subtotal | | Female | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Opium or Cocaine and Their Derivatives (Morphine, Heroin, Codeine) | e | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| Marijuana | f | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| Synthetic Narcotics - Manufactured Narcotics Which Can Cause True Drug Addiction (Demerol, Methadones) | g | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| Other - Dangerous Nonnarcotic Drugs (Barbiturates, Benzedrine) | h | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| Gambling | 19 | Male | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | | | |
| | | Female | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Bookmaking (Horse and Sport Book) | a | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| Numbers and Lottery | b | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| All Other Gambling | c | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| Offenses Against the Family and Children | 20 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| Driving Under the Influence | 21 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| Liquor Laws | 22 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| Drunkenness | 23 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| Disorderly Conduct | 24 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| Vagrancy | 25 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| All Other Offenses (Except Traffic) | 26 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |

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|-----------|--------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| Suspicion | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| | Total | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

INSTRUCTIONS

1. Show in the report all persons 18 years of age and over taken into custody during the month for committing an offense of the indicated types within the local jurisdiction. (Include those released without having been formally charged.)
2. Arrests of persons under 18 years of age are tallied on the pink Age, Sex, and Race reporting form.
3. The offenses are taken from the uniform classification of offenses and cover all the Part I and Part II offenses except traffic. In compiling the data, follow definitions of offenses in Uniform Crime Reporting Handbook.
4. Enter opposite each offense the number of persons taken into custody listing them according to age and sex of the persons arrested and according to race without regard to sex.
5. The race totals should equal the age totals for each offense class.
6. Total all columns.

MONTHLY RETURN OF ARSON OFFENSES KNOWN TO LAW ENFORCEMENT

This form is authorized by law Title 28, Section 534, U.S. Code, and the enactment of the fiscal year 1979, Department of Justice Authorization Bill S. 3151. Your cooperation in completing this form to report all monthly incidents of arson, will assist the FBI in compiling timely, comprehensive, and accurate data. Please submit this form and any questions to the FBI, Criminal Justice Information Services Division, Attention: Uniform Crime Reports/Module E-3, 1000 Custer Hollow Road, Clarksburg, West Virginia 26306; telephone 304-625-4830, facsimile 304-625-3566. Under the Paperwork Reduction Act, you are not required to complete this form unless it contains a valid OMB control number. This form takes approximately 9 minutes to complete. Instructions appear on reverse side.

1-725 (Rev. 08-08-11)
OMB No. 1110-0008
Expires 06-30-17

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|--|--|---|--|--|---|--|------------------------------------|
| PROPERTY CLASSIFICATION | Offenses Reported or Known to Police (Include Unfounded) | Unfounded, i.e., False or Baseless Complaints | Number of Actual Offenses (Column 2 Minus Column 3) (Include Attempts) | Total Offenses Cleared by Arrest or Exceptional Means (Include Column 6) | Number of Clearances Involving Only Persons Under 18 Years of Age | Offenses Where Structures Uninhabited, Abandoned, or not Normally in Use | Estimated Value of Property Damage |
| STRUCTURAL | A. Single Occupancy Residential: Houses, Townhouses, Duplexes, etc. | | 0 | | | | |
| | B. Other Residential: Apartments, Tenements, Flats, Hotels, Motels, Inns, Dormitories, Boarding Houses, etc. | | 0 | | | | |
| | C. Storage: Barns, Garages, Warehouses, etc. | | 0 | | | | |
| | D. Industrial/Manufacturing | | 0 | | | | |
| | E. Other Commercial: Stores, Restaurants, Offices, etc. | | 0 | | | | |
| | F. Community/Public: Churches, Jails, Schools, Colleges, Hospitals, etc. | | 0 | | | | |
| | G. All Other Structure: Out Buildings, Monuments, Buildings Under Construction, etc. | | 0 | | | | |
| | TOTAL STRUCTURE | 0 | 0 | 0 | 0 | 0 | 0 |
| MOBILE | H. Motor Vehicles: Automobiles, Trucks, Buses, Motorcycles, etc.: UCR Definition | | 0 | | | | |
| | I. Other Mobile Property: Trailers, Recreational Vehicles, Airplanes, Boats, etc. | | 0 | | | | |
| | TOTAL MOBILE | 0 | 0 | 0 | 0 | 0 | \$0 |
| J. TOTAL OTHER Crops, Timber, Fences, Signs, etc. | | | 0 | | | | |
| GRAND TOTAL | 0 | 0 | 0 | 0 | 0 | 0 | \$0 |

Agency Identifier

Agency

| DO NOT WRITE HERE | |
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MONTHLY RETURN OF ARSON OFFENSES KNOWN TO LAW ENFORCEMENT

Arson Definition

The offense of arson is defined by the national Uniform Crime Reporting (UCR) Program to include any willful or malicious burning or attempts to burn, with or without intent to defraud, a dwelling house, public building, motor vehicle or aircraft, personal property of another, etc.

Instructions

In Column 2, report all arson incidents which occurred in your jurisdiction and became known to your department during the month. Use your law enforcement jurisdiction and not fire districts to determine if an arson incident should be scored on your report. Count all arsons even though the offenses may have occurred in conjunction with violent crimes reported on the Return A. Include attempts to commit arson. Also, include "unfounded" reports of arson.

In Column 3, include all reports of arson which prove to be unfounded; those reports which prove upon investigation to be baseless and no offense of arson was committed or attempted.

In Column 4, enter the number of actual offenses of arson. This number is obtained by subtracting the number in Column 3 from the number in Column 2. Include attempts to commit arson.

In Column 5, enter the total number of arson offenses which were cleared by arrest or exceptional means.

In Column 6, enter the number of arson offenses cleared by arrest or exceptional means involving **only** persons under 18 years of age. This number is included in Column 5 and excludes those situations in which one or more of the persons involved were 18 years of age or over.

In Column 7, enter the number of arson offenses listed in Column 4 which involve structures (A. - G. only) which were uninhabited, abandoned, deserted, or not normally in use.

In Column 8, enter the estimated value of property damage for all arson offenses listed in Column 4. Enter zero (\$0) if no property damage.

The UCR handbook may be used as a guide to preparing this reporting with two **exceptions**:

1. The Hierarchy Rule will not apply in this additional report. Any other Part I offenses occurring in conjunction with an arson will be reported on the Return A and the arson will be reported on this report.
2. If one of the property crimes occurs in conjunction with the arson, the value of the stolen property will be reported on the Supplement to Return A and the property loss due to fire, smoke, water, or other damage resulting from the arson will be reported in Column 8 of this report.

Each agency is requested to submit this arson form each month even if there are no arsons or attempted arsons to report. (In those instances, please submit the form indicating "None" or zero (0) arson offenses.)

This report is authorized by law Title 28, Section 534, U.S. Code. Your cooperation in using this form to list data pertaining to all homicides reported on your Return A will assist the FBI in compiling comprehensive, accurate data regarding this important classification on a timely basis. Any questions regarding this report may be addressed to the FBI, Criminal Justice Information Services Division, Attention: Uniform Crime Reports/Module E-3, 1000 Custer Hollow Road, Clarksburg, West Virginia 26306; telephone 304-625-4830, facsimile 304-625-3566. Under the Paperwork Reduction Act, you are not required to complete this form unless it contains a valid OMB control number. The form takes approximately 9 minutes to complete.

1a. Murder and Nonnegligent Manslaughter

List below for each category specific information for each murder and nonnegligent homicide and/or justifiable homicide shown in item 1a of the monthly Return A. In addition, for justifiable homicide list all justifiable killings of felons by a citizen or by a peace officer in the line of duty. A brief explanation in the circumstances column regarding unfounded homicide offenses will aid the national Uniform Crime Reporting Program in editing the reports.

| Incident | Situation* | Victim** | | | | Offender** | | | | Data Code | | | Weapon Used (Handgun, Rifle, Shotgun, Club, Poison, etc.) | Relationship of Victim to Offender (Husband, Wife, Son, Father, Acquaintance, Neighbor, Stranger, etc.) | Circumstances (Victim shot by robber, robbery victim shot robber, killed by patron during barroom brawl, etc.) |
|----------|------------|----------|-----|------|-----------|------------|-----|------|-----------|---------------------------------|--|--|---|---|---|
| | | Age | Sex | Race | Ethnicity | Age | Sex | Race | Ethnicity | Do Not Write In These Spaces | | | | | |
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*
 ** - See reverse side for explanation

| | | | |
|----------------|-------------------|--|-------|
| Month and Year | Agency Identifier | Prepared By | Title |
| Agency | State | Sheriff, Chief, Superintendent, Commanding Officer | |

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NUMBER OF FULL-TIME LAW ENFORCEMENT EMPLOYEES AS OF OCTOBER 31

This report is authorized by law Title 28, Section 534, U.S. Code. Even though you are not required to respond, your cooperation in using this form to report all law enforcement employees on the payroll of your law enforcement agency as of October 31, will assist the FBI in compiling timely, comprehensive, and accurate data. Please submit this report and any questions to the FBI, Criminal Justice Information Services Division, Attention: Uniform Crime Reports/Module E-3, 1000 Custer Hollow Road, Clarksburg, West Virginia 26306; telephone 304-625-4830; facsimile 304-625-3566. Under the Paperwork Reduction Act, you are not required to complete this form unless it contains a valid OMB control number. The form takes approximately 8 minutes to complete.

| | Male | Female | Total |
|--|------|--------|-------|
| 1. Full-time law enforcement officers - Include all full-time sworn law enforcement officers who were on your department's payroll as of October 31 and who worked a normal full-time workweek. Include the Chief, Sheriff, Commissioner, Superintendent, or other sworn department head. Do not count special officers, merchant police, or others who are not paid from law enforcement funds. | 0 | 0 | 0 |
| 2. Full-time civilian employees - Include all full-time civilian employees who were on your department's payroll as of October 31 and who worked a normal full-time workweek. Include clerks, stenographers, mechanics, etc., who do not have police powers. Do not count school crossing guards. Do not count employees who are not paid from law enforcement funds. | 0 | 0 | 0 |
| 3. Total full-time law enforcement employees - Enter the total number of full-time law enforcement officers and civilians on your department's payroll as of October 31. This should be the total of line 1 and line 2. | 0 | 0 | 0 |

If the percent change in the total number of law enforcement employees between this year and last year is 10 percent or more, please explain briefly:

Prepared by / Telephone number / Email address _____

Date _____

Chief, Sheriff, Superintendent, Commanding Officer _____

Agency _____

City _____

State _____

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HATE CRIME INCIDENT REPORT

Initial Adjustment Delete ORI Date of Incident / /
Month Day Year

Incident No. Page **1** of **1** of Same Incident

Click on the +/- to expand/collapse these fields in order to view/hide information as necessary.

+ Offense #1 Penetration, no matter how slight, of the vagina or anus with any body part or object, or oral penetration by a sex organ of another person, without the consent of the victim.

+ Bias Motivation The taking or attempting to take anything of value from the care, custody, or control of a person or persons by force or threat of force or violence and/or by putting another person in fear.

- Offense #2 An unlawful attack by one person upon another for a racial or ethnic offense.

Offense Code The unlawful taking, carrying, leading, or riding away of property from the possession, constructive possession, or control of another person.

Number of Victims The theft or attempted theft of a motor vehicle.

Location Code A group of persons having a common ancestry, culture, or other characteristics.

Bias Motivation A person who follows the monotheistic religion of Catholic Christianity, especially that of the Roman Catholic Church.

Bias Motivation A person who follows the religion founded by Charles Taze Russell. Members witness by distributing literature and by personal evangelism of beliefs in the theocratic rule of God, the sinfulness of organized religions and governments, and an imminent millennium.

Bias Motivation A person who identifies himself or herself as a member of the Church of Jesus Christ of Latter-day Saints tracing its modern origin to Joseph Smith and accepting the Book of Mormon as scripture. Latter-day Saints consider the following writings to be their scriptures: the Bible, the Book of Mormon, the Doctrine and Covenants, and the Pearl of Great Price.

Bias Motivation A person who follows other religious articles: keski, kara (steel bracelet), and kara (short trousers), and kara (short trousers), and kara (short trousers).

Victim Type A person who follows the monotheistic religion founded by Guru Nanak in the Punjab region of South Asia. Sikhs follow the teachings of 10 gurus; study from the religion's primary sacred text (i.e., the Guru Granth Sahib), and worship in Gurdwaras. Some members of the Sikh faith may be distinguished by the dastar (Sikh turban) and five religious articles: keski, kara (steel bracelet), kara (short trousers), and kara (short trousers).

+ Offense #2 Atheist: A person who does not believe in the existence of a deity. Agnostic: A person who believes that the existence or nature of an ultimate reality, such as a deity, is unknown, and probably unknowable.

+ Offense #3 Other victim types, and unknown victim types.

+ Offense #4 Other victim types, and unknown victim types.

+ Offense #5 Other victim types, and unknown victim types.

+ Offense #6 Other victim types, and unknown victim types.

+ Offense #7 Other victim types, and unknown victim types.

+ Offense #8 Other victim types, and unknown victim types.

+ Offense #9 Other victim types, and unknown victim types.

+ Offense #10 Other victim types, and unknown victim types.

Victim Information

Number of Victims - When the victim is a person, enter the total number of **persons** who were victims in the incident.

Total number of victims 18 and over. If there are no adult victims, enter 0.

Total number of victims under 18. If there are no juvenile victims, enter 0.

Offender Information

Number of Offenders - Indicate the total number of persons who were offenders in the incident.

Indicate an Unknown if you are not sure of the offender's race.

When the Race of Offender is Unknown, indicate at least one offender's race.

Total number of unknown offenders, enter 00.

Total number of unknown offender groups, enter 00.

Total number of unknown offenders/unknown groups, total should be 00.

Race and Ethnicity of Offender or Offender Group

Select one race/ethnicity for the offender from the selectable fields below.

If there was more than one offender, provide the race and ethnicity of the group as a whole.

If the number of offenders is entered as Unknown, then the offender's race and ethnicity must also be indicated as Unknown.

Click the +/- boxes below on the left to expand/collapse these fields in order to view/hide the race & ethnicity definitions.

+ Race Definitions

Race
A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

+ Ethnicity
Ethnicity
A group of persons having origins from multiple racial categories.

A person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment.

A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

This report is authorized by the Department of Justice, Office of the Inspector General, under the Crime Statistics Act of 1990. Even though you are not required to respond to this report, your information may be used to determine the incidence and prevalence of hate crime throughout the nation. Please submit this report to the FBI, Criminal Justice Information Service, 5th day of the month following the date of the incident. For more information, contact the FBI, Criminal Justice Information Service, 5th day of the month following the date of the incident. Uniform Crime Reports/Module E-3, 1000 Custer Hollow Road, Clarksburg, West Virginia 26306; telephone 304-625-4830, facsimile 304-625-3566. Under the Paperwork Reduction Act, you are not required to complete this form unless it contains a valid Office of Management and Budget (OMB) control number. The form takes approximately 7 minutes to complete. Instructions for preparing the form appear below.

GENERAL

This report is separate from and in addition to the traditional Summary Reporting System submission. In hate crime reporting, there is no Hierarchy Rule. Offense data (not just arrest data) for Intimidation and Destruction/Damage/Vandalism of Property should be reported. On this form, all reportable bias motivated offenses should be included regardless of whether arrests have taken place. Please refer to the publication *Hate Crime Data Collection Guidelines and Training Manual* for additional information.

HATE CRIME INCIDENT REPORT

The Incident Report should be used to report a bias motivated incident or to adjust information in a previously reported incident.

Instructions for preparing the Hate Crime Incident Report

Administrative Information

Report Type: (Required.) Indicate the type of report as Initial or Adjustment.

Initial-To report a hate crime incident.

(Note: This will delete the information already on file and insert the information provided in this report.)

Delete-To expunge a previously reported hate crime incident.

ORI Number: (Required.) Enter the nine-character Originating Agency Identifier assigned to your agency.

Provide the date of the hate crime incident in the format of MMDDYYYY

Incident Number: (Required for Initial or Adjustment Reports.)

Provide an identifying incident number, preferably your case or file number.

The number can be up to 12 characters in length.

Valid characters include: A through Z, 0 through 9, hyphens, and/or blanks.

Page **of** **of same incident:** If additional Incident Reports are used, make an appropriate entry into this portion.

DEFINITIONS FOR HATE CRIME DATA COLLECTION

To ensure uniformity in reporting nationwide hate crime statistics, the following definitions have been adopted for use in hate crime reporting:

Bias Crime: A committed criminal offense that is motivated, in whole or in part, by the offender's bias(es) against a race, religion, disability, sexual orientation, ethnicity, gender, or gender identity; also known as Hate Crime.

Note: Even if the offender was mistaken in his or her perception that the victim was a member of the group he or she was acting against, the offense is still a bias crime because the offender was motivated by bias against the group.

Bias: A preformed negative opinion or attitude toward a person or group of persons based on their race, religion, disability, sexual orientation, ethnicity, gender, or gender identity.

Racial Bias: A preformed negative opinion or attitude toward a person or group of persons who possess common physical characteristics, e.g., color of skin, eyes, and/or hair, facial features, etc., genetically transmitted by descent and heredity which distinguish them as a distinct division of humankind, e.g., Asians, Blacks or African Americans, Whites.

American Indian or Alaska Native: A person having origins in any of the original peoples of North or South America (including Central America), and who maintains tribal affiliation or community attachment.

Asian: A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

Black or African American: A person having origins in any of the Black racial groups of Africa.

Multiple Races-Group: A group of persons having origins from multiple racial categories.

Native Hawaiian or Other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

White: A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Ethnicity Bias: A preformed negative opinion or attitude toward a person or group of people whose members identify with each other, through a common heritage, often consisting of a common language, common culture (often including a shared religion) and/or ideology that stresses common ancestry. The concept of ethnicity differs from the closely related term *race* in that "race" refers to grouping based mostly upon biological criteria, while "ethnicity" also encompasses additional cultural factors.

Arab: A person having origins, and/or ancestry, in any of the Arabic speaking peoples of Lebanon, Syria, Palestine, Jordan, Iraq, Saudi Arabia, Yemen, Oman, United Arab Emirates, Qatar, Bahrain, Kuwait, Egypt, Libya, Tunisia, Comoros, Algeria, Morocco, Sudan, Djibouti, Mauritania, and Samalia.

Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

Other Race/Ethnicity/Ancestry: A person of a different race/ethnicity/ancestry than is otherwise included in this combined category.

Religious Bias: A preformed negative opinion or attitude toward a person or group of persons who share the same religious beliefs regarding the origin and purpose of the universe and the existence or nonexistence of a supreme being, e.g., Catholics, Jews, Protestants, Atheists.

Note: The following list of religions represents the major religions in the United States. Neither this list of religions nor the definitions provided are all-inclusive. A general explanation is provided for each religion.

Buddhist: A person who follows the religion of eastern or central Asia that grew out of the teaching of Siddhartha Gautama, the Buddha, or Enlightened One. People of this faith believe that suffering is inherent in life and that one can be liberated from it by mental and moral self-purification by following the Four Noble Truths and the Eightfold Path in order to reach *nirvana*.

Catholic: A person who follows the monotheistic religion of Catholic Christianity, especially that of the Roman Catholic Church. Followers of this faith believe the teachings of the Bible, and place emphasis on church traditions, including the historical continuity of the church, the Pope as the head of the church, and the requirement of celibacy of those in the priesthood.

Eastern Orthodox (Russian, Greek, Other): A person who follows the monotheistic religion of the Eastern Christian Church. This faith follows the teachings of the Bible and church traditions, accords primacy of honor to the Patriarch of Constantinople as head of the church, and adheres to the decisions of the First Seven Ecumenical Councils and the Byzantine Rite.

Hindu: A person who observes the traditions and practices of the dominant religion of India, which include acceptance of the sanctity of the *Vedas* (sacred texts); the understanding of one Divine Reality manifested in multiple forms; acceptance of the laws of karma (principle of cause and effect), *dharma* (righteous modes of conduct), belief in reincarnation, and the ultimate spiritual goal of enlightenment (moksha).

Islamic (Muslim): A person who follows the monotheistic religion of Muslims, which includes belief in Allah as the sole deity and in Muhamad as his prophet. Practitioners of the Islamic faith follow the teachings of the Koran and practice the Five Pillars of Islam: praying, fasting during Ramadan, almsgiving, pilgrimage, and declaration of faith.

Jehovah's Witness: A person who follows the religion founded by Charles Taze Russell. Members witness by distributing literature and by personal evangelism of beliefs in the theocratic rule of God, the sinfulness of organized religions and governments, and an imminent millennium. The activities of Jehovah's Witnesses are governed by the Watchtower Society which makes all major decisions, interprets the Bible, and counsels Witnesses using Watchtower materials. Members of the faith are often seen giving generously of their time in proclaiming their faith and teaching in private homes.

Jewish (Judaism): A person who identifies himself or herself as a member of the religious and/or ethnic group that descended from the ancient Hebrews and is characterized by belief in one transcendent God who revealed Himself to Abraham, Moses, and the Hebrew prophets. Jewish religious practice is based on the Hebrew Scriptures (the "Torah") and rabbinic laws and customs.

Mormon: A person who follows the Church of Jesus Christ of Latter-day Saints tracing its modern origin to Joseph Smith and accepting the Book of Mormon as scripture. Latter-day Saints consider the following writings to be scripture: 1) The Holy Bible; 2) The Book of Mormon, Another Testament of Jesus Christ; 3) The Doctrine and Covenants; and 4) The Pearl of Great Price. Mormons are often associated with members of the faith who serve as full-time volunteer missionaries in the U.S. and abroad.

Multiple Religions-Group: A group of persons demonstrating a commitment or devotion to religious faith or observance based upon multiple faiths.

Other Christian: A person who follows other denominations or nondenominational religions based on the life and teachings of Jesus Christ but not described above. Examples of these religions include Metaphysical-Christ Church Unity, Spiritualist, Unity/Unitarianist, Unity Church, Universalist, and Other Metaphysical.

Other Religions: A person who follows other non-Christian religions not described above. Examples of these religions include the Baha’I Faith, Jainism, Shintoism, Taoism, Tenrikyo, Wicca, and Zoroastrianism.

Protestant: A person who follows the monotheistic religion of Christianity that is not part of Catholic or Eastern Orthodox faith. Members of this faith affirm the Reformation principles of justification by faith alone, the priesthood of all believers, and the primacy of the Bible as the only source of revealed truth. Moreover, believers deny the universal authority of the Pope and some churches are governed by federated councils on the local, national, and international levels.

Sikh: A person who follows the monotheistic religion founded by Guru Nanak in the Punjab region of South Asia. Sikhs follow the teachings of 10 gurus; study from the religion’s primary sacred text (i.e., the Guru Granth Sahib), and worship in Gurdwaras. Some members of the Sikh faith may be distinguished by the *dastarr* (Sikh turban) and five religious articles: *kesh* (unshorn hair, including a beard), *kanga* (wooden comb), *kara* (steel bracelet), *kachera* (short trousers), and *kirpan* (religious sword).

Atheist: A person who does not believe in the existence of a deity. **Agnostic:** A person who believes that the existence or nature of an ultimate reality, such as a deity, is unknown, and probably unknowable.

Sexual Orientation Bias: A preformed negative opinion or attitude toward a person or group of persons based on their actual or perceived sexual orientation.

Bisexual: (adjective) Of or relating to people who are physically, romantically, and/or emotionally attracted to both men and women.

Gay (Male): A male who is physically, romantically, and/or emotionally attracted to other men.

Note: Generally this word is used to refer to gay men, but may also be used to describe women. For FBI UCR Program purposes, if reporting an anti-gay bias, the victim should be a male.

Heterosexual: A person who is physically, romantically, and/or emotionally attracted to people of the opposite sex.

Lesbian: A female who is physically, romantically, and/or emotionally attracted to other women.

Lesbian, Gay, Bisexual, or Transgender (Mixed Group): Refers to a group of people or community organizations that serve lesbian, gay, bisexual, transgender, and allied people.

Disability Bias: A preformed negative opinion or attitude toward a person or group of persons based on their physical or mental impairments, whether such disability is temporary or permanent, congenital, or acquired by heredity, accident, injury, advanced age, or illness.

Mental Disability: A person who has any mental impairment or psychological disorder such as: organic brain syndrome, emotional or mental illness, and specific learning disabilities.

Physical Disability: A person who has a *physical impairment*; any physiological disorder or condition, cosmetic disfiguration, or anatomical loss affecting one or more of the following body systems: neurological, musculoskeletal, special sense organs, respiratory (including speech organs), cardiovascular, reproductive, digestive, genitourinary, hemic and lymphatic, skin, and endocrine.

Gender Bias: A preformed negative opinion or attitude toward a person or group of persons based on their actual or perceived gender, e.g., male or female.

Female: An individual of the sex that bears young or produces eggs.

Male: An individual that produces small usually motile gametes (as spermatozoa or spermatozoids) which fertilize the egg of a female.

Gender Identity Bias: A preformed negative opinion or attitude toward a person or group of persons based on their actual or perceived gender identity, e.g., bias against transgender or gender non-conforming individuals.

Gender Non-Conforming: A person who does not conform to the gender-based expectations of society, e.g., a woman dressed in traditionally male clothing or a man wearing makeup.

Note: A gender non-conforming person may or may not be a lesbian, gay, bisexual, or transgender person but may be perceived as such.

Transgender: (adjective) Of or relating to a person who identifies as a different gender from their gender as determined at birth.

Note: The person may also identify himself or herself as “transsexual.” A transgender person may outwardly express his or her gender identity all of the time, part of the time, or none of the time; a transgender person may decide to change his or her body to medically conform to his or her gender identity.

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Cargo Theft Incident Report

Cargo Theft is the criminal taking of any cargo including, but not limited to, goods, chattels, money, or baggage that constitutes, in whole or in part, a commercial shipment of freight moving in commerce, from any pipeline system, railroad car, motortruck, or other vehicle, or from any tank or storage facility, station house, platform, or depot, or from any vessel or wharf, or from any aircraft, air terminal, airport, aircraft terminal or air navigation facility, or from any intermodal container, intermodal chassis, trailer, container freight station, warehouse, freight distribution facility, or freight consolidation facility. For purposes of this definition, cargo shall be deemed as moving in commerce at all points between the point of origin and the final destination, regardless of any temporary stop while awaiting transshipment or otherwise.

Administrative Information

| | | | | |
|-------------------------------|--------------------------|-------------------------------|-------------------------------------|----------------------|
| ORI: | <input type="text"/> | Report Type: | <input type="checkbox"/> Initial | |
| Incident Number: | <input type="text"/> | | <input type="checkbox"/> Adjustment | |
| Incident Date: | <input type="text"/> | | <input type="checkbox"/> Deletion | |
| | (YYYYMMDD) | | <input type="checkbox"/> Other | <input type="text"/> |
| Report Date Indicator: | <input type="checkbox"/> | | | (YYYYMM) |
| Incident Hour: | <input type="text"/> | Cleared Exceptionally: | <input type="checkbox"/> | |
| | (Military Time) | | | |

| | |
|-------------------|----------------------|
| Offense(s) | <input type="text"/> |
| | <input type="text"/> |
| | <input type="text"/> |
| | <input type="text"/> |
| | <input type="text"/> |
| | <input type="text"/> |
| Location | <input type="text"/> |

| | |
|--|---|
| Weapon/Force Involved (Check up to three.) | Victim Type (Check all that apply.) |
|--|---|

- | | |
|---|--|
| <input type="checkbox"/> Firearm | <input type="checkbox"/> Individual |
| <input type="checkbox"/> A Automatic Firearm | <input type="checkbox"/> Business |
| <input type="checkbox"/> Handgun | <input type="checkbox"/> Financial Institution |
| <input type="checkbox"/> A Automatic Handgun | <input type="checkbox"/> Government |
| <input type="checkbox"/> Rifle | <input type="checkbox"/> Religious Organization |
| <input type="checkbox"/> A Automatic Rifle | <input type="checkbox"/> Society/Public |
| <input type="checkbox"/> Shotgun | <input type="checkbox"/> Law Enforcement Officer |
| <input type="checkbox"/> A Automatic Shotgun | <input type="checkbox"/> Other |
| <input type="checkbox"/> Other Firearm | <input type="checkbox"/> Unknown |
| <input type="checkbox"/> A Automatic Other | |
| <input type="checkbox"/> Knife/Cutting Instrument | |
| <input type="checkbox"/> Blunt Object | |
| <input type="checkbox"/> Motor Vehicle | |
| <input type="checkbox"/> Personal Weapons | |
| <input type="checkbox"/> Poison | |
| <input type="checkbox"/> Explosives | |
| <input type="checkbox"/> Fire/Incendiary Device | |
| <input type="checkbox"/> Drugs/Narcotics/Sleeping Pills | |
| <input type="checkbox"/> Asphyxiation | |
| <input type="checkbox"/> Other | |

Unknown

None

| Property Information | | | | |
|-----------------------------|--------------|--------------------------|----------------|-----------------|
| Stolen Property Description | Stolen Value | Property Recovered | Date Recovered | Recovered Value |
| | | <input type="checkbox"/> | | |
| | | <input type="checkbox"/> | | |
| | | <input type="checkbox"/> | | |
| | | <input type="checkbox"/> | | |
| | | <input type="checkbox"/> | | |

| Offender Information <input type="checkbox"/> '00" if Unknown) | | | | | | | | | | | |
|--|--------------------------|--------------------------|--------------------------|--------------------------|---------------------------|----------------------------------|--------------------------|---|--------------------------|--------------------------|--------------------------|
| | | | | Race | | | | | Ethnicity | | |
| Age (01-99) | Sex | | | White | Black or African American | American Indian or Alaska Native | Asian | Native Hawaiian or Other Pacific Islander | Unknown | Hispanic or Latino | Not Hispanic or Latino |
| | M | F | U | | | | | | | | |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| Arrestee Information | | | | | | | | | | | |
|----------------------|--------------------------|--------------------------|--------------------------|--------------------------|---------------------------|----------------------------------|--------------------------|---|--------------------------|--------------------------|--------------------------|
| | | | | Race | | | | | Ethnicity | | |
| Age (01-99) | Sex | | | White | Black or African American | American Indian or Alaska Native | Asian | Native Hawaiian or Other Pacific Islander | Unknown | Hispanic or Latino | Not Hispanic or Latino |
| | M | F | U | | | | | | | | |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

This report is authorized by Public Law 109-177 (HR 3199), March 9, 2006, under the USA Patriot Improvement and Reauthorization Act of 2005. Even though you are not required to respond, your cooperation in using this form to report Cargo Thefts will assist the FBI in reporting the economic impact of Cargo Theft on the U.S. economy. Please submit completed reports to: UCRstat@leo.gov. Questions may be submitted to: Federal Bureau of Investigation, Criminal Justice Information Services Division, Attention: Uniform Crime Reports/Module E-3, 1000 Custer Hollow Road, Clarksburg, West Virginia 26306; telephone 304-625-4830, facsimile 304-625-3566. Under the Paperwork Reduction Act, you are not required to complete this form unless it contains a valid OMB control number. The form takes approximately 5 minutes to complete. Instructions for preparing the form appear on the following page(s).

Instructions for preparing the *Cargo Theft Incident Report*

Note: The Hierarchy Rule does not apply when reporting a cargo theft. If a cargo theft occurs in a multiple-offense incident, the reporting law enforcement agency must first report the cargo theft-related offense and then up to an additional four offense(s).

Cargo Theft Incident Report

A separate *Cargo Theft Incident Report* is to be submitted for each cargo theft incident.

This form should be used to report an incident in which a cargo theft occurred, adjust information in a previously reported incident, delete any incident previously reported, or report zero cargo thefts for the month.

Administrative Information

ORI Number: (Required.) Enter the nine-character Originating Agency Identifier assigned to your agency.

Report Type: (Required.) Indicate the type of report as Initial, Adjustment, Delete, or Zero.

Initial—To report a cargo theft incident.

Adjustment—To update a cargo theft incident previously reported. (Note: This will delete the information already on file and insert the information provided in this report.)

Delete—To delete a cargo theft incident previously reported, which further investigation has determined was not a cargo theft.

Zero—To report there was no incident of cargo theft during the month. (Note: Must include Zero Report Date in the format of YYYYMM.)

Incident Number: (Required for Initial, Adjustment, and Delete Reports; for Zero Report, leave blank.) Provide an identifying incident number, preferably your case or file number. The number can be up to 12 characters in length. Valid characters include: A through Z, 0 through 9, hyphens, and/or blanks.

Incident Date: (Required for Initial and Adjustment Reports.) Provide the date of the cargo theft incident in the format of YYYYMMDD. If the Incident Date is unknown, enter the date of the report and check the "Report Date Indicator."

Incident Hour: (Required for Initial and Adjustment Reports.) Provide the hour when the cargo theft incident occurred or started or the beginning of the time period in which it occurred (as appropriate). Military 24-hour time should be used. If the Incident Hour is unknown, the hour should be left blank. If the incident occurred on or between midnight and 0059, 00 should be entered; if on or between 0100 and 0159, 01 should be entered; if on or between 2300 and 2359, 23 should be entered, etc. If the incident occurred at exactly midnight, it is to be considered to have occurred at the beginning of the next day, as if the crime occurred at 1 minute past midnight.

Cleared Exceptionally: Indicate if the cargo theft incident was cleared exceptionally. (Note: If the incident was cleared by arrest, Cleared Exceptionally must be blank.) To clear an incident by exceptional means, the following four criteria must be met:

1. The investigation definitely established the identity of the offender.
2. There is enough information to support an arrest, charge, and turning over to the court for prosecution.
3. The exact location of the offender is known so that the subject could be taken into custody.
4. There is a reason outside of law enforcement control that precludes arresting, charging, and prosecuting the offender, i.e., the offender is in the custody of another jurisdiction.

In a multiple-offense incident, the exceptional clearance of one offense clears the entire incident. (Note: An incident cannot be cleared exceptionally if an arrest has been made in connection with the incident. The incident has already been "cleared by arrest.")

UCR Offense: (Required for Initial and Adjustment Reports.) Enter the offenses of the five most serious (as determined by the reporting agency) involved in the incident that was determined to be cargo theft. The menu contains the offenses (listed below) that are specific to cargo theft and must be one of the first offenses entered.

Bribery
Burglary/Breaking and Entering
Embezzlement
Extortion/Blackmail
Fraud Offense: False Pretenses/Swindle/Confidence Game
Fraud Offense: Credit Card/Automatic Teller Machine Fraud
Fraud Offense: Impersonation
Fraud Offense: Wire Fraud
Larceny/Theft Offense: Theft From Building
Larceny/Theft Offense: Theft From Motor Vehicle
Larceny/Theft Offense: All Other Larceny
Motor Vehicle Theft
Robbery

The remaining (four) menus contain additional Group A offenses that can be entered after the first cargo theft-specific offense has been entered.

Location Type: (Required for Initial and Adjustment Reports.) Based on the cargo theft offense reported, enter the most appropriate location from the menu.

Type Weapon/Force Involved: Check the appropriate box(es) to indicate the type of weapon or force involved in the cargo theft incident. Up to three types of weapons/force can be reported for each incident. In addition, if the weapon was an automatic firearm, check the applicable automatic weapon box.

Victim Type: (Required for Initial and Adjustment Reports.) Check the appropriate box(es) to indicate the type of victim(s) identified within the cargo theft incident. Check all that apply.

Property Information (An agency should report property stolen in its jurisdiction. Likewise, the agency that reported the property stolen should also report the property recovered.)

Property Description: (Required for Initial and Adjustment Reports.) Check the most appropriate property description from the menu. For each incident of cargo theft, up to five property descriptions can be reported. If more than five types of property are involved, the values of the four most valuable properties are to be reported; then, the total of the remaining types of property that were coded as "Other" should be entered.

Stolen Value: Enter the value of the stolen property in whole dollar amounts. Do not enter cents. Only enter numeric characters (0 through 9). Up to five values can be entered to match the up to five property descriptions. If more than five types of property are involved, the values of the four most valuable properties are to be reported; then, the total value of the remaining properties that were coded as "Other" should be entered. If the value of the stolen property is unknown, enter "1".

Property Recovered: Check box if all or some property has been recovered.

Date Recovered: Enter the date the property was recovered in the format of YYYYMMDD. Up to five dates of recovery can be reported to match the up to five property descriptions. If there is more than one date of recovery for the same type of property, report the earliest date.

Recovered Value: Enter the value of the recovered property in whole dollar amounts. Do not enter cents. Only enter numeric characters (0 through 9). (Note: The recovered property value must not exceed the stolen property value.)

Offender Information (Required for Initial and Adjustment Reports.) (Note: If nothing is known about the offender, "00" should be reported or provide applicable Offender Information.)

Unknown Offender Indicator: Enter "00" if nothing is known about the offender. If any information about the offender(s) is known (number of, age, sex, race, or ethnicity), leave blank and complete the age, sex, race, and ethnicity columns with applicable unknown codes. For example, two offenders were seen fleeing the scene, but because they were wearing ski masks, their age, sex, race, and ethnicity could not be determined. Enter 00 for age, U for sex, race, and ethnicity for each offender.

Known Offender Information: Provide the following information about the offender. (Note: If any offender information is entered, the Unknown Offender indicator must be blank.)

Age: up to five offenders can be entered. Enter the age of each offender either as an exact number of years, a range of years, or as unknown as follows:

01 to 98 years old—Enter the exact age. If the exact age is unknown, an age range can be entered. For example, a teenager 13 to 14 years old, the age would be entered as 1314.

99 and over—Enter 99 if age is over 98.

00 unknown—Enter 00 if age is unknown.

Sex: Check the appropriate box–M for Male, F for Female, or U if the sex is unknown.

Race: Check the appropriate box– White, Black or African American, American Indian or Alaska Native, Asian, Native Hawaiian or Other Pacific Islander, or Unknown.

Ethnicity: Check the appropriate box–Hispanic or Latino or Not Hispanic or Latino. If ethnicity is unknown, leave blank.

Arrestee Information (If the Offender Information is unknown, do not enter Arrestee Information.)

Age: up to five arrestees can be entered. Enter the age of each arrestee either as an exact number of years, a range of years, or as unknown as follows:

01 to 98 years old–Enter the exact age. If the exact age is unknown, an age range can be entered. For example, a teenager 13 to 14 years old, the age would be entered as 1314.

99 and over–Enter 99 if age is over 98.

00 unknown–Enter 00 if age is unknown.

Sex: Check the appropriate box–M for Male, F for Female

.....
Asian, Native Hawaiian or Other Pacific Islander, or Unknown.

Ethnicity: Check the appropriate box–Hispanic or Latino or Not Hispanic or Latino. If ethnicity is unknown, leave blank.

How to Prepare the Monthly Return of Human Trafficking Offenses Known to Law Enforcement

The Human Trafficking Form is a Uniform Crime Reporting (UCR) form used to collect monthly data on the number of human trafficking offenses that become known to local, county, state, and tribal law enforcement agencies (LEA) in the United States.

The Hierarchy Rule does not apply when reporting human trafficking. If a human trafficking offense occurs in conjunction with a Part I offense (murder and nonnegligent manslaughter, rape, robbery, aggravated assault, burglary, larceny-theft, motor vehicle theft, and arson), the reporting LEA must report the Part I offense on the Return A or Arson Forms, and the human trafficking offense must be reported on this form.

When reporting the number of human trafficking offenses, the number of offenses per victim are counted. One human trafficking victim can be counted under commercial sex acts, involuntary servitude, or both. For example, during the weekdays a victim is labored at a kiosk in the mall and on weekends the same victim is prostituted. One offense of commercial sex acts should be counted and one offense of involuntary servitude should be counted. *Count the number of human trafficking offenses per victim.*

Column 1 - Human Trafficking Classification

Two human trafficking offense classifications are listed. The human trafficking offenses are defined as:

- Offense A **Human Trafficking, Commercial Sex Acts:** Inducing a person by force, fraud, or coercion to participate in commercial sex acts, or in which the person induced to perform such act(s) has not attained 18 years of age. ***(Commercial sex acts may be exchanged for anything of value.)***
- Offense B **Human Trafficking, Involuntary Servitude:** The obtaining of a person(s) through recruitment, harboring, transportation, or provision, and subjecting such persons by force, fraud, or coercion into involuntary servitude, peonage, debt bondage, or slavery. ***(Not to include commercial sex acts.)***

Column 2 - Offenses Reported

All actual and attempted human trafficking offenses occurring within an agency's jurisdiction for the month should be reported in this column. Also included in this column are any offenses committed in previous months but not reported until this month. *All known offenses, including those subsequently determined to be "unfounded,"* should be entered in column 2.

All commercial sex acts and involuntary servitude offenses and attempts which occur during the month should be reported whether they become known to the police as the result of: (a) Citizens' complaints, (b) Reports of police officers, (c) "On view" (pick-up) arrests, (d) Citizens' complaints to sheriff, prosecutor, county police, private detective, constable, etc., and (e) Any other means.

- Row 1 Enter all actual, attempted, and unfounded commercial sex acts offenses reported for the month. Also included in this column are any commercial sex acts offenses committed in previous months but not reported until this month. *All known commercial sex acts offenses, including those subsequently determined to be "unfounded,"* should be entered.
- Row 2 Enter all actual, attempted, and unfounded involuntary servitude offenses reported for the month. Also included in this column are any involuntary servitude offenses committed in previous months but not reported until this month. *All known involuntary servitude offenses, including those subsequently determined to be "unfounded,"* should be entered.
- Row 3 Enter the totals of row 1 and row 2.

Column 3 - Unfounded, i.e., False or Baseless Complaints

An unfounded, false, or baseless complaint is when a department receives a report of an offense from a citizen which, after preliminary investigation by officers, is determined to be false or baseless. In other words, no crime occurred. In this case, each unfounded complaint should be reported in column 3.

- Row 1 Enter the number of commercial sex acts complaints which were proved to be "unfounded" by police investigation.
- Row 2 Enter the number of involuntary servitude complaints which were proved to be "unfounded" by police investigation.
- Row 3 Enter the totals of row 1 and row 2.

Column 4 - Number of Actual Offenses (Column 2 minus Column 3) (Include Attempts)

To complete this column, the numbers in column 3 are subtracted from those in column 2 for each offense; that is, the Unfounded (column 3) count is subtracted from the Offenses Reported (column 2) count. The difference is the count to be reported as the Number of Actual Offenses (column 4) which occurred in the jurisdiction for the month.

- Row 1 Enter the number of actual and attempted commercial sex acts offenses reported for the month.
- Row 2 Enter the number of actual and attempted involuntary servitude offenses reported for the month.
- Row 3 Enter the totals of row 1 and row 2.

Column 5 - Total Offenses Cleared by Arrest or Exceptional Means

Offenses are cleared either by arrest or exceptional means. In column 5, one entry should be made for each human trafficking offense that is cleared. **DO NOT COUNT THE NUMBER OF PERSONS ARRESTED IN COLUMN 5.** Column 5 is the total number of offenses cleared. An offense is "cleared by arrest" when at least one person is arrested, charged, and turned over to the court for prosecution. The arrest of many persons may clear only one offense or several offenses may be cleared by the arrest of one person.

Offenses can be cleared by exceptional means if the investigation (1) has definitely established the identity of the offender, (2) if there was enough information to support an arrest, charge, and turning over to the court for prosecution, (3) if the exact location of the offender was known so that the subject could be taken into custody, and (4) if there was some reason outside law enforcement control that preclude arresting, charging, and prosecuting the offender. Reasons outside of law enforcement control include circumstances such as: suicide of the offender, double murder, deathbed confession, offender killed by police or citizen, confession by an offender already in custody, or offender is prosecuted or in custody of another jurisdiction. The list is not all-inclusive; there may be other circumstances in which a LEA is entitled to an exceptional clearance.

The administrative closing of a case or the "clearing" of it by departmental policy does not permit exceptionally clearing the offense for UCR unless all four criteria mentioned earlier can be answered yes.

- Row 1 Enter the number of commercial sex acts offenses cleared by arrest or exceptional means.
- Row 2 Enter the number involuntary servitude offenses cleared by arrest or exceptional means.
- Row 3 Enter the totals of row 1 and row 2.

Column 6 - Number of Clearances Involving Only Persons Under 18 Years of Age

In column 6, one entry should be made for each human trafficking offense cleared involving OFFENDERS under 18 years of age *only*. The number in this column can never be greater than the number in column 5.

If an offense is cleared by arrest or exceptional means and offenders include both adults and persons under 18 years of age, *the clearance should be scored only in column 5*. If a clearance involves only persons under age 18, the clearance is entered in both columns 5 and 6. **REMEMBER THAT PERSONS ARRESTED ARE NOT BEING COUNTED IN COLUMNS 5 AND 6. COUNT ONLY THE NUMBER OF HUMAN TRAFFICKING OFFENSES CLEARED.**

Offenses reported in previous months but not cleared can be cleared in columns 5 and 6 of this month's report.

- Row 1 Enter the number of commercial sex acts offenses cleared by arrest or exceptional means by offenders under 18 years of age.
- Row 2 Enter the number involuntary servitude offenses cleared by arrest or exceptional means by offenders under 18 years of age.
- Row 3 Enter the totals of row 1 and row 2.

This Human Trafficking Form should be forwarded to the FBI UCR Program. Each agency is requested to submit this form each month by the seventh day after the close of the month. If there were no human trafficking or attempted human trafficking offenses to report, check the box on the Human Trafficking Form.

MONTHLY RETURN OF HUMAN TRAFFICKING OFFENSES KNOWN TO LAW ENFORCEMENT

This form is authorized by PL 110-457 (HR 7311), the *William Wilberforce Trafficking Victims Protection Reauthorization Act of 2008*. Even though you are not required to respond, your cooperation in completing this form to report all monthly incidents of human trafficking will assist the FBI in compiling timely, comprehensive, and accurate data. Please submit this form to UCRstat@leo.gov and any questions to the FBI, Criminal Justice Information Services Division, Attention: Uniform Crime Reports/Module E-3, 1000 Custer Hollow Road, Clarksburg, West Virginia 26306; telephone 304-625-4830, facsimile 304-625-3566. Under the Paperwork Reduction Act, you are not required to complete this form unless it contains a valid OMB control number. This form takes approximately 5 minutes to complete.

ADMINISTRATIVE INFORMATION

ORI Number: Enter the nine-character Originating Agency Identifier assigned to your agency.

Month and Year: Enter the month and year of data being submitted.

Name of Agency: Enter the name of your agency.

Name and Title of Preparer: Enter the preparer's name and job title.

Telephone Number and E-mail address of Preparer: Enter the preparer's telephone number and e-mail address.

If there were no human trafficking offenses to report for the month, check this box.

HUMAN TRAFFICKING OFFENSES

| 1 | 2 | 3 | 4 | 5 | 6 |
|----------------------------------|-------------------|---|--|---|---|
| Human Trafficking Classification | Offenses Reported | Unfounded, i.e., False or Baseless Complaints | Number of Actual Offenses (Column 2 Minus Column 3) (Include Attempts) | Total Offenses Cleared by Arrest or Exceptional Means | Number of Clearances Involving Only Persons Under 18 Years of Age |
| A. Commercial Sex Acts | | | 0 | | |
| B. Involuntary Servitude | | | 0 | | |
| GRAND TOTAL | 0 | 0 | 0 | 0 | 0 |

RETURN A - MONTHLY RETURN OF OFFENSES KNOWN TO THE POLICE

1-720 (Rev. 2-22-13)
 OMB No. 1110-0001
 Expires 07-31-16

This report is authorized by law Title 28, Section 534, U.S. Code. Your cooperation in completing this form will assist the FBI, in compiling timely, comprehensive, and accurate data. Please submit this form monthly, by the seventh day after the close of the month, and any questions to the FBI, Criminal Justice Information Services Division, Attention: Uniform Crime Reports/Module E-3, 1000 Custer Hollow Road, Clarksburg, West Virginia 26306; telephone 304-625-4830, facsimile 304-625-3566. Under the Paperwork Reduction Act, you are not required to complete this form unless it contains a valid OMB control number. The form takes approximately 10 minutes to complete. Instructions for preparing the form appear on the reverse side.

| CLASSIFICATION OF OFFENSES | DATA ENTRY | 2 OFFENSES REPORTED OR KNOWN TO POLICE (INCLUDE "UNFOUNDED" AND ATTEMPTS) | 3 UNFOUNDED, I.E., FALSE OR BASELESS COMPLAINTS | 4 NUMBER OF ACTUAL OFFENSES (COLUMN 2 MINUS COLUMN 3) (INCLUDE ATTEMPTS) | 5 TOTAL OFFENSES CLEARED BY ARREST OR EXCEPTIONAL MEANS (INCLUDES COL. 6) | 6 NUMBER OF CLEARANCES INVOLVING ONLY PERSONS UNDER 18 YEARS OF AGE |
|--|------------|--|--|--|--|---|
| 1. CRIMINAL HOMICIDE | | | | | | |
| a. MURDER AND NONNEGLIGENT HOMICIDE (Score attempts as aggravated assault) If homicide reported, submit Supplementary Homicide Report | 11 | | | 0 | | |
| b. MANSLAUGHTER BY NEGLIGENCE | 12 | | | 0 | | |
| 2. RAPE TOTAL | 20 | 0 | 0 | 0 | 0 | 0 |
| a. Rape | 21 | | | 0 | | |
| b. Attempts to commit Rape | 22 | | | 0 | | |
| Historical Rape (See Instruction #15 below) | | | | 0 | | |
| 3. ROBBERY TOTAL | 30 | 0 | 0 | 0 | 0 | 0 |
| a. Firearm | 31 | | | 0 | | |
| b. Knife or Cutting Instrument | 32 | | | 0 | | |
| c. Other Dangerous Weapon | 33 | | | 0 | | |
| d. Strong-Arm (Hands, Fists, Feet, Etc.) | 34 | | | 0 | | |
| 4. ASSAULT TOTAL | 40 | 0 | 0 | 0 | 0 | 0 |
| a. Firearm | 41 | | | 0 | | |
| b. Knife or Cutting Instrument | 42 | | | 0 | | |
| c. Other Dangerous Weapon | 43 | | | 0 | | |
| d. Hands, Fists, Feet, Etc. - Aggravated injury | 44 | | | 0 | | |
| e. Other Assaults - Simple, Not Aggravated | 45 | | | 0 | | |
| 5. BURGLARY TOTAL | 50 | 0 | 0 | 0 | 0 | 0 |
| a. Forcible Entry | 51 | | | 0 | | |
| b. Unlawful Entry - No Force | 52 | | | 0 | | |
| c. Attempted Forcible Entry | 53 | | | 0 | | |
| 6. LARCENY - THEFT TOTAL (Except Motor Vehicle Theft) | 60 | | | 0 | | |
| 7. MOTOR VEHICLE THEFT TOTAL | 70 | 0 | 0 | 0 | 0 | 0 |
| a. Autos | 71 | | | 0 | | |
| b. Trucks and Buses | 72 | | | 0 | | |
| c. Other Vehicles | 73 | | | 0 | | |
| GRAND TOTAL | 77 | 0 | 0 | 0 | 0 | 0 |

CHECKING ANY OF THE APPROPRIATE BLOCKS BELOW WILL ELIMINATE YOUR NEED TO SUBMIT REPORTS WHEN THE VALUES ARE ZERO. THIS WILL ALSO AID THE NATIONAL PROGRAM IN ITS QUALITY CONTROL EFFORTS.

MURDERS, JUSTIFIABLE HOMICIDES, OR MANSLAUGHTERS BY NEGLIGENCE OCCURRED IN THIS JURISDICTION DURING THE MONTH.

NO SUPPLEMENT TO RETURN A REPORT SINCE NO CRIME OFFENSES OR RECOVERY OF PROPERTY REPORTED DURING THE MONTH.

NO LAW ENFORCEMENT OFFICERS KILLED OR ASSAULTED REPORT SINCE NONE OF THE OFFICERS WERE ASSAULTED OR KILLED DURING THE MONTH.

UNDER 18 YEARS OF AGE REPORT SINCE NO ARRESTS OF PERSONS WITHIN THIS AGE GROUP.

NO AGE, SEX, AND RACE OF PERSONS ARRESTED 18 YEARS OF AGE AND OVER REPORT SINCE NO ARREST OF PERSONS WITHIN THIS AGE GROUP.

NO MONTHLY RETURN OF ARSON OFFENSES KNOWN TO LAW ENFORCEMENT REPORT SINCE NO ARSONS OCCURRED.

| DO NOT USE THIS SPACE | |
|-----------------------|----------|
| RECORDED | INITIALS |
| | |
| EDITED | |
| ENTERED | |
| ADJUSTED | |
| CORRES | |

Month and Year of Report

Agency Identifier

Population

Prepared by

Title

Telephone Number

Date

INSTRUCTIONS FOR PREPARING RETURN A

(Detailed instructions are given in the *Uniform Crime Reporting Handbook*)

1. All Offenses listed on the *Return A* which occur during the month should be scored whether they become known to the police as the result of:
 - a. Citizens' complaints.
 - b. Reports of police officers.
 - c. "On view" (pick-up) arrests.
 - d. Citizens' complaints to sheriff, prosecutor, county police, private detectives, constables, etc.
 - e. Any other means.
2. The offenses listed in Column 1 are the Part I offenses of the Uniform Crime Reporting Program plus the offenses of simple assault and manslaughter by negligence. Follow the instructions for classifying and scoring as presented in the *Uniform Crime Reporting Handbook*. Offenses committed by juveniles should be classified in the same manner as those committed by adults even though the juveniles may be handled by juvenile authorities.
3. Adjustments should be made on this month's return for offenses omitted or scored inaccurately on returns of preceding months or those now determined to be unfounded. Offenses that occurred in a previous month but only became known to you this month should be scored this month.
4. Consider all spaces for each classification of offenses in Columns 2, 3, 4, 5, and 6. The breakdowns for forcible rape, robbery, assault, burglary, and motor vehicle theft, when added should equal the total for each of these offenses. Do not enter zeroes where no count exists.
5. Attempts of rape, robbery, assault, burglary, larceny-theft, and motor vehicle theft are to be scored on this form.
6. **Column 2:** Enter opposite the proper offense classification the total number of such offenses reported or known through any means. "Unfounded" complaints are included. Attempts are included except in homicide classifications.
7. **Column 3:** Enter the number of complaints which were proven to be "unfounded" by police investigation. An "unfounded" offense is one in which a complaint was received, but upon investigation, proves either to be baseless or not to have actually occurred. Remember that recovery of property or clearance of an offense does not unfound a complaint.
8. **Column 4:** Number of actual offenses. This number is obtained by subtracting the number in Column 3 from that in Column 2.
9. **Column 5:** Enter the total number of offenses **cleared** during the month. This total includes the clearances which you record in Column 6. An offense is cleared when one or more persons are charged and turned over for prosecution for that offense. Clearance totals also include exceptional clearances which are explained in the *Uniform Crime Reporting Handbook*.
10. **Column 6:** Enter here the number of offenses which are cleared through the arrest, releasing to parents, or other handling of persons under the age of 18. In those situations where an offense is cleared through the involvement of both an adult and a person under 18 years of age, count the clearance only in Column 5.
11. The grand totals for Columns 2, 3, 4, 5, and 6 are the totals of each of the seven classifications.
12. Tally books can be used to maintain a running count of offenses through the month. Totals for the *Return A* can then be taken directly from the Tally book. These Tally books can be obtained by corresponding with the FBI, Criminal Justice Information Services Division, Attention: Uniform Crime Reports/Module E-3, 1000 Custer Hollow Road, Clarksburg, West Virginia 26306; telephone 304-625-4830, facsimile 304-625-3566.
13. This *Return A* report should be forwarded to the FBI Uniform Crime Reports even though no offenses of this type listed were committed during the month. However, it is not necessary to submit supplemental reports in such cases. Simply check the appropriate box within the block near the bottom of the *Return A* report.
14. Any inquiry regarding the completion of this form, the classification and scoring of offenses, or prior to submitting crime data by computer printout, contact the Uniform Crime Reporting Program at the above-mentioned address.
15. Reporting according to the historical definition of rape is optional. This count should be included in the total reported in line 2a or line 2b.

SUPPLEMENT TO RETURN A

1-706 (Rev. 2-22-13)

OMB No. 1110-0001

Expires 07-31-16

MONTHLY RETURN OF OFFENSES KNOWN TO THE POLICE

This report is authorized by law Title 28, Section 534, U.S. Code. Your cooperation in completing this form with the *Return A* will assist the FBI in compiling timely, comprehensive, and accurate data. Please submit this form monthly, by the seventh day after the close of the month, and any questions to the FBI, Criminal Justice Information Services Division, Attention: Uniform Crime Reports/Module E-3, 1000 Custer Hollow Road, Clarksburg, West Virginia 26306; telephone 304-625-4830, facsimile 304-625-3566. Under the Paperwork Reduction Act, you are not required to complete the form unless it contains a valid OMB control number. The form takes approximately 11 minutes to complete.

This form deals with the nature of crime and the monetary value of property stolen and recovered. The total offenses recorded on this form, page 2, should be the same as the number of actual offenses listed in Column 4 of the *Return A* for each crime class. Include attempted crimes on this form, but do not include unfounded offenses. If you cannot complete the report in all areas, please record as much information as is available. Tally sheets will be sent upon request.

| PROPERTY BY TYPE AND VALUE | | | |
|--|------------|--|------------------|
| Type of Property (1) | Data Entry | Monetary Value of Property Stolen in Your Jurisdiction | |
| | | Stolen (2) | Recovered (3) |
| (A) Currency, Notes, Etc. | 01 | | |
| (B) Jewelry and Precious Metals | 02 | | |
| (C) Clothing and Furs | 03 | | |
| (D) Locally Stolen Motor Vehicles | 04 | | |
| (E) Office Equipment | 05 | | |
| (F) Televisions, Radios, Stereos, Etc. | 06 | | |
| (G) Firearms | 07 | | |
| (H) Household Goods | 08 | | |
| (I) Consumable Goods | 09 | | |
| (J) Livestock | 10 | | |
| (K) Miscellaneous | 11 | | |
| TOTAL | 00 | \$0 | \$0 |

The total of this column should agree with the Grand Total (DATA ENTRY 77) shown on page 2.

Include in this column all property recovered even though stolen in prior months. The above is an accounting for only that property stolen in your jurisdiction. This will include property recovered for you by other jurisdictions, but not property you recover for them.

Prepared by _____ Title _____

Telephone Number _____ Date _____

Chief, Sheriff, Superintendent, or Commanding Officer _____

Month and Year of Report _____ Agency Identifier _____

Population _____

Agency and State _____

| DO NOT USE THIS SPACE | |
|------------------------------|----------|
| | INITIALS |
| RECORDED | |
| EDITED | |
| ENTERED | |
| ADJUSTED | |

| | |
|---------|--|
| CORRES. | |
|---------|--|

PROPERTY STOLEN BY CLASSIFICATION

| CLASSIFICATION | DATA ENTRY | Number of Actual Offenses (Column 4 Return A) | Monetary Value of Property Stolen |
|---|------------|---|-----------------------------------|
| 1. MURDER AND NONNEGLIGENT MANSLAUGHTER | 12 | | |
| 2. RAPE | 20 | | |
| 3. ROBBERY | | | |
| (a) HIGHWAY (streets, alleys, etc.) | 31 | | |
| (b) COMMERCIAL HOUSE (except c, d, and f) | 32 | | |
| (c) GAS OR SERVICE STATION | 33 | | |
| (d) CONVENIENCE STORE | 34 | | |
| (e) RESIDENCE (anywhere on premises) | 35 | | |
| (f) BANK | 36 | | |
| (g) MISCELLANEOUS | 37 | | |
| TOTAL ROBBERY | | 0 | \$0 |
| 5. BURGLARY - BREAKING OR ENTERING | | | |
| (a) RESIDENCE (dwelling) | | | |
| (1) NIGHT (6 p.m. - 6 a.m.) | 51 | | |
| (2) DAY (6 a.m. - 6 p.m.) | 52 | | |
| (3) UNKNOWN | 53 | | |
| (b) NON-RESIDENCE (store, office, etc.) | | | |
| (1) NIGHT (6 p.m. - 6 a.m.) | 54 | | |
| (2) DAY (6 a.m. - 6 p.m.) | 55 | | |
| (3) UNKNOWN | 56 | | |
| TOTAL BURGLARY | 50 | 0 | \$0 |
| 6. LARCENY - THEFT (Except Motor Vehicle Theft) | | | |
| (a) \$200 AND OVER | 61 | | |
| (b) \$50 TO \$199 | 62 | | |
| (c) UNDER \$50 | 63 | | |
| TOTAL LARCENY (Same as Item 6x) | 60 | 0 | \$0 |
| 7. MOTOR VEHICLE THEFT (Include Alleged Joy Ride) | 70 | | |
| GRAND TOTAL - ALL ITEMS | 77 | | \$0 |
| <small>ADDITIONAL ANALYSIS OF LARCENY AND MOTOR VEHICLE THEFT</small> | | | |
| 6x. NATURE OF LARCENIES UNDER ITEM 6 | | | |
| (a) POCKET-PICKING | 81 | | |
| (b) PURSE-SNATCHING | 82 | | |
| (c) SHOPLIFTING | 83 | | |
| (d) FROM MOTOR VEHICLES (except e) | 84 | | |
| (e) MOTOR VEHICLE PARTS AND ACCESSORIES | 85 | | |
| (f) BICYCLES | 86 | | |
| (g) FROM BUILDING (except c and h) | 87 | | |
| (h) FROM ANY COIN-OPERATED MACHINES (parking meters,etc.) | 88 | | |
| (i) ALL OTHER | 89 | | |
| TOTAL LARCENIES (Same as Item 6) | 80 | 0 | \$0 |
| 7x. MOTOR VEHICLES RECOVERED | | | |
| (a) STOLEN LOCALLY AND RECOVERED LOCALLY | 91 | | |
| (b) STOLEN LOCALLY AND RECOVERED BY OTHER JURISDICTIONS | 92 | | |
| (c) TOTAL LOCALLY STOLEN MOTOR VEHICLES RECOVERED (a & b) | 90 | 0 | |

AGE, SEX, RACE, AND ETHNICITY OF PERSONS ARRESTED

Under 18 Years of Age

1-708a (Rev. 12-19-11)

OMB No. 1110-0005

Expires 06-30-17

This report is authorized by law Title 28, Section 534, United States Code. While you are not required to respond, your cooperation in using this form to report the age, sex, and race of all persons under 18 years of age arrested by your department during the month will assist the FBI in compiling comprehensive accurate data on a timely basis. Instructions appear on the reverse of this form. Any questions regarding this report may be addressed to the Federal Bureau of Investigation, Criminal Justice Information Services Division, Attention: Uniform Crime Reports, Module E-3, 1000 Custer Hollow Road, Clarksburg, West Virginia, 26306; telephone (304) 625-4830, facsimile (304) 625-3566.

 City

 County

 State

 Month and Year of Report

 Prepared By

 Title

 Chief, Sheriff, Commissioner, or Superintendent

 Date Prepared
POLICE DISPOSITION OF JUVENILES-NOT TO INCLUDE NEGLECT OR TRAFFIC CASES**(Follow your State age definition for juveniles)****Total**

 0

 1. Handled within Department and released.
 (Warning, released to parents, etc.)

2. Referred to juvenile court or probation department.

3. Referred to welfare agency.

4. Referred to other police agency.

5. Referred to criminal or adult court.

| | |
|----------|--|
| Recorded | |
| Edited | |
| Entered | |
| Adjusted | |
| Corres. | |

INSTRUCTIONS

1. Show in the report all persons under 18 years of age taken into custody during the month for committing an offense of the indicated types within the local jurisdiction. (Include those released without having been formally charged.) For purposes of Uniform Crime Reporting, a juvenile should be counted as "arrested" when the circumstances are such that if he or she were an adult, an arrest would be tallied. Police "contacts" with juveniles where no offense has been committed should not be scored as arrests. Instances where a juvenile is taken into custody for his own protection, such as "neglect," and no crime committed, should not be listed as arrests. Enter on the front of this form your disposition of all juveniles arrested.
2. Arrests of persons 18 years of age and over are tallied on the white Age, Sex, and Race reporting form.
3. The offenses are taken from the uniform classification of offenses and cover all the Part I and Part II offenses except traffic. In compiling the data, follow definitions of offenses in Uniform Crime Reporting Handbook.
4. Enter opposite each offense the number of persons taken into custody listing them according to age and sex of the persons arrested and according to race without regard to sex. Juveniles should be listed opposite the classification of the offense for which they were taken into custody. For example, juveniles arrested for committing larceny should be listed opposite the larceny-theft classification on this report, even though they are charged with "juvenile delinquency."
5. The race totals should equal the age totals for each offense class.
6. Total all columns.

AGE, SEX, AND RACE OF PERSONS ARRESTED

Under 18 Years of Age

1-708a (Rev. 12-19-11)
 OMB No. 1110-0005
 Expires 06-30-17

This report is authorized by law Title 28, Section 534, United States Code. While you are not required to respond, your cooperation in using this form to report the age, sex, and race of all persons under 18 years of age arrested by your department during the month will assist the FBI in compiling comprehensive accurate data on a timely basis. Instructions appear on the reverse of this form. Any questions regarding this report may be addressed to the Federal Bureau of Investigation, Criminal Justice Information Services Division, Attention: Uniform Crime Reports, Module E-3, 1000 Custer Hollow Road, Clarksburg, West Virginia, 26306; telephone (304) 625-4830, facsimile (304) 625-3566.

City _____ County _____

State _____ Month and Year of Report _____

Prepared By _____ Title _____

Chief, Sheriff, Commissioner, or Superintendent _____

Date Prepared _____

POLICE DISPOSITION OF JUVENILES-NOT TO INCLUDE NEGLECT OR TRAFFIC CASES
 (Follow your State age definition for juveniles)

| | |
|--|-------|
| Total | 0 |
| 1. Handled within Department and released. (Warning, released to parents, etc.) | _____ |
| 2. Referred to juvenile court or probation department. | _____ |
| 3. Referred to welfare agency. | _____ |
| 4. Referred to other police agency. | _____ |
| 5. Referred to criminal or adult court. | _____ |

**DO NOT WRITE
 IN THESE SPACES**

_____ ORI _____ Month _____ Year _____

TYPE cc-16

- /b-Update
- 1-Delete Month
- 2-Adjustment

NARCOTICS/GAMBLING cc-17

- /b-18/19 Complete
- 1-Totals only
- 2-Totals 18 only
- 3-Totals 19 only

JUVENILE/ADULT cc-19

- /b-Data for both
- 1-Zero adult information
- 2-Zero juvenile information
- 3-Zero juvenile and adult

JUVENILE DISPOSITION cc-20

- /b-Update
- 1-Do not use
- 2-Delete

| | |
|----------|-------|
| Recorded | _____ |
| Edited | _____ |
| Entered | _____ |
| Adjusted | _____ |

RACE/EO cc-18

3-All data for ASR

4-No race

3-Adjust

| | |
|---------|--|
| Corres. | |
|---------|--|

| | | | | | | | | | | | | | |
|--|-----|--------|---|---|---|---|---|---|---|---|---|---|---|
| Opium or Cocaine and Their Derivatives (Morphine, Heroin, Codeine) | a | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Marijuana | b | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Synthetic Narcotics - Manufactured Narcotics Which Can Cause True Drug Addiction (Demerol, Methadones) | c | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Other - Dangerous Nonnarcotic Drugs (Barbiturates, Benzadrine) | d | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| (2) Possession Subtotal | 185 | Male | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | Female | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Opium or Cocaine and Their Derivatives (Morphine, Heroin, Codeine) | e | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Marijuana | f | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Synthetic Narcotics - Manufactured Narcotics Which Can Cause True Drug Addiction (Demerol, Methadones) | g | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Other - Dangerous Nonnarcotic Drugs (Barbiturates, Benzadrine) | h | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Gambling Total | 19 | Male | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | Female | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Bookmaking (Horse and Sport Book) | a | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Numbers and Lottery | b | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| All Other Gambling | c | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Offenses Against The Family and Children | 20 | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Driving Under The Influence | 21 | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Liquor Laws | 22 | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Drunkenness | 23 | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Disorderly Conduct | 24 | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Vagrancy | 25 | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| All Other Offenses (Except Traffic) | 26 | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Suspicion | 27 | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Curfew and Loitering Law Violations | 28 | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Runaways | 29 | Male | | | | | | | 0 | | | | |
| | | Female | | | | | | | 0 | | | | |
| Total | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

INSTRUCTIONS

1. Show in the report all persons under 18 years of age taken into custody during the month for committing an offense of the indicated types within the local jurisdiction. (Include those released without having been formally charged.) For purposes of Uniform Crime Reporting, a juvenile should be counted as "arrested" when the circumstances are such that if he or she were an adult, an arrest would be tallied. Police "contacts" with juveniles where no offense has been committed should not be scored as arrests. Instances where a juvenile is taken into custody for his own protection, such as "neglect," and no crime committed, should not be listed as arrests. Enter on the front of this form your disposition of all juveniles arrested.
2. Arrests of persons 18 years of age and over are tallied on the white Age, Sex, and Race reporting form.
3. The offenses are taken from the uniform classification of offenses and cover all the Part I and Part II offenses except traffic. In compiling the data, follow definitions of offenses in Uniform Crime Reporting Handbook.
4. Enter opposite each offense the number of persons taken into custody listing them according to age and sex of the persons arrested and according to race without regard to sex. Juveniles should be listed opposite the classification of the offense for which they were taken into custody. For example, juveniles arrested for committing larceny should be listed opposite the larceny-theft classification on this report, even though they are charged with "juvenile delinquency."
5. The race totals should equal the age totals for each offense class.
6. Total all columns.

AGE, SEX, AND RACE OF PERSONS ARRESTED

18 Years of Age and Over

1-708 (Rev. 12-19-11)
OMB No. 1110-0005
Expires 06-30-17

This report is authorized by law Title 28, Section 534, United States Code. While you are not required to respond, your cooperation in using this form to report the age, sex, and race of all persons 18 years of age and over arrested by your department during the month will assist the FBI in compiling comprehensive accurate data on a timely basis. Instructions appear of the reverse of this form. Any questions regarding this report may be addressed to the Federal Bureau of Investigation, Criminal Justice Information Services Division, Attention: Uniform Crime Reports/Module E-3, 1000 Custer Hollow Road, Clarksburg, West Virginia 26306; telephone 304-625-4830, facsimile 304-625-3566.

City _____

County _____

State _____

Month and Year of Report _____

Prepared By _____ Title _____

Chief, Sheriff, Commissioner, or Superintendent _____

Date Prepared _____

**DO NOT WRITE
IN THESE SPACES**

ORI

MONTH

YEAR

TYPE cc-16

- /b-Update
- 1-Delete Month
- 2-Adjustment

NARCOTICS/GAMBLING cc-17

- /b-18/19 Complete
- 1-Totals only
- 2-Totals 18 only
- 3-Totals 19 only

RACE/EO cc-18

- /b-All data for ASREO
- 2-No Race
- 3-No ethnic origin
- 4-Data for age and sex only

JUVENILE/ADULT cc-19

- /b-Data for both
- 1-Zero adult information
- 2-Zero juvenile information
- 3-Zero juvenile and adult

JUVENILE DISPOSITION cc-20

- /b-Update
- 1-Do not use
- 2-Delete
- 3-Adjust

| | |
|----------|--|
| Recorded | |
| Edited | |
| Entered | |
| Adjusted | |
| Corres. | |



AGE, SEX, AND RACE OF PERSONS ARRESTED, 18 years of age and over

(Include those released without having been formally charged)

| CLASSIFICATION OF OFFENSES | SEX | AGE | | | | | | | | | | | | | | | TOTAL | RACE | | | | |
|---|--------|-----|----|----|----|----|----|----|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------------|-------|-------|-----------------------------------|---------------------------|
| | | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25-29 | 30-34 | 35-39 | 40-44 | 45-49 | 50-54 | 55-59 | 60-64 | | 65 and over | White | Black | American Indian or Alaskan Native | Asian or Pacific Islander |
| Murder and Nonnegligent Manslaughter 01a | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Manslaughter by Negligence 01b | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Forcible Rape 02 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Robbery 03 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Aggravated Assault (Return A - 4a-d) 04 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Burglary - Breaking or Entering 05 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Larceny - Theft (Except Motor Vehicle Theft) 06 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Motor Vehicle Theft 07 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Other Assaults (Return A - 4e) 08 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Arson 09 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Forgery and Counterfeiting 10 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Fraud 11 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Embezzlement 12 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Stolen Property; Buying, Receiving, Possessing 13 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Vandalism 14 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Weapons; Carrying, Possessing, etc. 15 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Prostitution and Commercialized Vice 16 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Sex Offenses (Except Forcible Rape and Prostitution) 17 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| Drug Abuse Violations | Male | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | | | |
| Grand Total 18 | Female | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| (1) Sale/Manufacturing | Male | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | | | |
| Subtotal 180 | Female | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

| | | | | | | | | | | | | | | | | | | | | | | |
|--|--------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|--|--|--|--|
| Opium or Cocaine and Their Derivatives (Morphine, Heroin, Codeine) | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |

| | | | | | | | | | | | | | | | | | | | | | | | |
|--|-----|--------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Marijuana | b | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| Synthetic Narcotics - Manufactured Narcotics Which Can Cause True Drug Addiction (Demerol, Methadones) | c | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| Other - Dangerous Nonnarcotic Drugs (Barbiturates, Benzedrine) | d | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| (2) Possession | 185 | Male | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | | | |
| Subtotal | | Female | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Opium or Cocaine and Their Derivatives (Morphine, Heroin, Codeine) | e | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| Marijuana | f | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| Synthetic Narcotics - Manufactured Narcotics Which Can Cause True Drug Addiction (Demerol, Methadones) | g | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| Other - Dangerous Nonnarcotic Drugs (Barbiturates, Benzedrine) | h | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| Gambling | 19 | Male | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | | | |
| | | Female | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Bookmaking (Horse and Sport Book) | a | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| Numbers and Lottery | b | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| All Other Gambling | c | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| Offenses Against the Family and Children | 20 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| Driving Under the Influence | 21 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| Liquor Laws | 22 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| Drunkenness | 23 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| Disorderly Conduct | 24 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| Vagrancy | 25 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |
| All Other Offenses (Except Traffic) | 26 | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | | Female | | | | | | | | | | | | | | | | | | 0 | | | |

| | | | | | | | | | | | | | | | | | | | | | | |
|-----------|--------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| Suspicion | Male | | | | | | | | | | | | | | | | | 0 | | | | |
| | Female | | | | | | | | | | | | | | | | | 0 | | | | |
| | Total | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

INSTRUCTIONS

1. Show in the report all persons 18 years of age and over taken into custody during the month for committing an offense of the indicated types within the local jurisdiction. (Include those released without having been formally charged.)
2. Arrests of persons under 18 years of age are tallied on the pink Age, Sex, and Race reporting form.
3. The offenses are taken from the uniform classification of offenses and cover all the Part I and Part II offenses except traffic. In compiling the data, follow definitions of offenses in Uniform Crime Reporting Handbook.
4. Enter opposite each offense the number of persons taken into custody listing them according to age and sex of the persons arrested and according to race without regard to sex.
5. The race totals should equal the age totals for each offense class.
6. Total all columns.

MONTHLY RETURN OF ARSON OFFENSES KNOWN TO LAW ENFORCEMENT

This form is authorized by law Title 28, Section 534, U.S. Code, and the enactment of the fiscal year 1979, Department of Justice Authorization Bill S. 3151. Your cooperation in completing this form to report all monthly incidents of arson, will assist the FBI in compiling timely, comprehensive, and accurate data. Please submit this form and any questions to the FBI, Criminal Justice Information Services Division, Attention: Uniform Crime Reports/Module E-3, 1000 Custer Hollow Road, Clarksburg, West Virginia 26306; telephone 304-625-4830, facsimile 304-625-3566. Under the Paperwork Reduction Act, you are not required to complete this form unless it contains a valid OMB control number. This form takes approximately 9 minutes to complete. Instructions appear on reverse side.

1-725 (Rev. 08-08-11)

OMB No. 1110-0008

Expires 06-30-17

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|--|--|---|--|--|---|--|------------------------------------|
| PROPERTY CLASSIFICATION | Offenses Reported or Known to Police (Include Unfounded) and Attempts) | Unfounded, i.e., False or Baseless Complaints | Number of Actual Offenses (Column 2 Minus Column 3) (Include Attempts) | Total Offenses Cleared by Arrest or Exceptional Means (Include Column 6) | Number of Clearances Involving Only Persons Under 18 Years of Age | Offenses Where Structures Uninhabited, Abandoned, or not Normally in Use | Estimated Value of Property Damage |
| STRUCTURAL | A. Single Occupancy Residential: Houses, Townhouses, Duplexes, etc. | | 0 | | | | |
| | B. Other Residential: Apartments, Tenements, Flats, Hotels, Motels, Inns, Dormitories, Boarding Houses, etc. | | 0 | | | | |
| | C. Storage: Barns, Garages, Warehouses, etc. | | 0 | | | | |
| | D. Industrial/Manufacturing | | 0 | | | | |
| | E. Other Commercial: Stores, Restaurants, Offices, etc. | | 0 | | | | |
| | F. Community/Public: Churches, Jails, Schools, Colleges, Hospitals, etc. | | 0 | | | | |
| | G. All Other Structure: Out Buildings, Monuments, Buildings Under Construction, etc. | | 0 | | | | |
| | TOTAL STRUCTURE | 0 | 0 | 0 | 0 | 0 | 0 |
| MOBILE | H. Motor Vehicles: Automobiles, Trucks, Buses, Motorcycles, etc.: UCR Definition | | 0 | | | | |
| | I. Other Mobile Property: Trailers, Recreational Vehicles, Airplanes, Boats, etc. | | 0 | | | | |
| | TOTAL MOBILE | 0 | 0 | 0 | 0 | 0 | \$0 |
| J. TOTAL OTHER Crops, Timber, Fences, Signs, etc. | | | 0 | | | | |
| GRAND TOTAL | 0 | 0 | 0 | 0 | 0 | 0 | \$0 |

Agency Identifier _____ Month _____

Agency _____ State _____

Prepared by/Telephone number/Email address _____ Chief, Commissioner, Sheriff, or Superintendent _____

| DO NOT WRITE HERE | |
|-------------------|--|
| Recorded | |
| Edited | |
| Entered | |
| Adjusted | |
| Corres. | |

MONTHLY RETURN OF ARSON OFFENSES KNOWN TO LAW ENFORCEMENT

Arson Definition

The offense of arson is defined by the national Uniform Crime Reporting (UCR) Program to include any willful or malicious burning or attempts to burn, with or without intent to defraud, a dwelling house, public building, motor vehicle or aircraft, personal property of another, etc.

Instructions

In Column 2, report all arson incidents which occurred in your jurisdiction and became known to your department during the month. Use your law enforcement jurisdiction and not fire districts to determine if an arson incident should be scored on your report. Count all arsons even though the offenses may have occurred in conjunction with violent crimes reported on the Return A. Include attempts to commit arson. Also, include "unfounded" reports of arson.

In Column 3, include all reports of arson which prove to be unfounded; those reports which prove upon investigation to be baseless and no offense of arson was committed or attempted.

In Column 4, enter the number of actual offenses of arson. This number is obtained by subtracting the number in Column 3 from the number in Column 2. Include attempts to commit arson.

In Column 5, enter the total number of arson offenses which were cleared by arrest or exceptional means.

In Column 6, enter the number of arson offenses cleared by arrest or exceptional means involving **only** persons under 18 years of age. This number is included in Column 5 and excludes those situations in which one or more of the persons involved were 18 years of age or over.

In Column 7, enter the number of arson offenses listed in Column 4 which involve structures (A. - G. only) which were uninhabited, abandoned, deserted, or not normally in use.

In Column 8, enter the estimated value of property damage for all arson offenses listed in Column 4. Enter zero (\$0) if no property damage.

The UCR handbook may be used as a guide to preparing this reporting with two **exceptions**:

1. The Hierarchy Rule will not apply in this additional report. Any other Part I offenses occurring in conjunction with an arson will be reported on the Return A and the arson will be reported on this report.
2. If one of the property crimes occurs in conjunction with the arson, the value of the stolen property will be reported on the Supplement to Return A and the property loss due to fire, smoke, water, or other damage resulting from the arson will be reported in Column 8 of this report.

Each agency is requested to submit this arson form each month even if there are no arsons or attempted arsons to report. (In those instances, please submit the form indicating "None" or zero (0) arson offenses.)

How to Prepare the Monthly Return of Human Trafficking Offenses Known to Law Enforcement

The Human Trafficking Form is a Uniform Crime Reporting (UCR) form used to collect monthly data on the number of human trafficking offenses that become known to local, county, state, and tribal law enforcement agencies (LEA) in the United States.

The Hierarchy Rule does not apply when reporting human trafficking. If a human trafficking offense occurs in conjunction with a Part I offense (murder and nonnegligent manslaughter, rape, robbery, aggravated assault, burglary, larceny-theft, motor vehicle theft, and arson), the reporting LEA must report the Part I offense on the Return A or Arson Forms, and the human trafficking offense must be reported on this form.

When reporting the number of human trafficking offenses, the number of offenses per victim are counted. One human trafficking victim can be counted under commercial sex acts, involuntary servitude, or both. For example, during the weekdays a victim is labored at a kiosk in the mall and on weekends the same victim is prostituted. One offense of commercial sex acts should be counted and one offense of involuntary servitude should be counted. *Count the number of human trafficking offenses per victim.*

Column 1 - Human Trafficking Classification

Two human trafficking offense classifications are listed. The human trafficking offenses are defined as:

- Offense A **Human Trafficking, Commercial Sex Acts:** Inducing a person by force, fraud, or coercion to participate in commercial sex acts, or in which the person induced to perform such act(s) has not attained 18 years of age. *(Commercial sex acts may be exchanged for anything of value.)*
- Offense B **Human Trafficking, Involuntary Servitude:** The obtaining of a person(s) through recruitment, harboring, transportation, or provision, and subjecting such persons by force, fraud, or coercion into involuntary servitude, peonage, debt bondage, or slavery. *(Not to include commercial sex acts.)*

Column 2 - Offenses Reported

All actual and attempted human trafficking offenses occurring within an agency's jurisdiction for the month should be reported in this column. Also included in this column are any offenses committed in previous months but not reported until this month. *All known offenses, including those subsequently determined to be "unfounded,"* should be entered in column 2.

All commercial sex acts and involuntary servitude offenses and attempts which occur during the month should be reported whether they become known to the police as the result of: (a) Citizens' complaints, (b) Reports of police officers, (c) "On view" (pick-up) arrests, (d) Citizens' complaints to sheriff, prosecutor, county police, private detective, constable, etc., and (e) Any other means.

- Row 1 Enter all actual, attempted, and unfounded commercial sex acts offenses reported for the month. Also included in this column are any commercial sex acts offenses committed in previous months but not reported until this month. *All known commercial sex acts offenses, including those subsequently determined to be "unfounded,"* should be entered.
- Row 2 Enter all actual, attempted, and unfounded involuntary servitude offenses reported for the month. Also included in this column are any involuntary servitude offenses committed in previous months but not reported until this month. *All known involuntary servitude offenses, including those subsequently determined to be "unfounded,"* should be entered.
- Row 3 Enter the totals of row 1 and row 2.

Column 3 - Unfounded, i.e., False or Baseless Complaints

An unfounded, false, or baseless complaint is when a department receives a report of an offense from a citizen which, after preliminary investigation by officers, is determined to be false or baseless. In other words, no crime occurred. In this case, each unfounded complaint should be reported in column 3.

- Row 1 Enter the number of commercial sex acts complaints which were proved to be "unfounded" by police investigation.
- Row 2 Enter the number of involuntary servitude complaints which were proved to be "unfounded" by police investigation.

Row 3 Enter the totals of row 1 and row 2.

Column 4 - Number of Actual Offenses (Column 2 minus Column 3) (Include Attempts)

To complete this column, the numbers in column 3 are subtracted from those in column 2 for each offense; that is, the Unfounded (column 3) count is subtracted from the Offenses Reported (column 2) count. The difference is the count to be reported as the Number of Actual Offenses (column 4) which occurred in the jurisdiction for the month.

- Row 1 Enter the number of actual and attempted commercial sex acts offenses reported for the month.
- Row 2 Enter the number of actual and attempted involuntary servitude offenses reported for the month.
- Row 3 Enter the totals of row 1 and row 2.

Column 5 - Total Offenses Cleared by Arrest or Exceptional Means

Offenses are cleared either by arrest or exceptional means. In column 5, one entry should be made for each human trafficking offense that is cleared. **DO NOT COUNT THE NUMBER OF PERSONS ARRESTED IN COLUMN 5.** Column 5 is the total number of offenses cleared. An offense is "cleared by arrest" when at least one person is arrested, charged, and turned over to the court for prosecution. The arrest of many persons may clear only one offense or several offenses may be cleared by the arrest of one person.

Offenses can be cleared by exceptional means if the investigation (1) has definitely established the identity of the offender, (2) if there was enough information to support an arrest, charge, and turning over to the court for prosecution, (3) if the exact location of the offender was known so that the subject could be taken into custody, and (4) if there was some reason outside law enforcement control that preclude arresting, charging, and prosecuting the offender. Reasons outside of law enforcement control include circumstances such as: suicide of the offender, double murder, deathbed confession, offender killed by police or citizen, confession by an offender already in custody, or offender is prosecuted or in custody of another jurisdiction. The list is not all-inclusive; there may be other circumstances in which a LEA is entitled to an exceptional clearance.

The administrative closing of a case or the "clearing" of it by departmental policy does not permit exceptionally clearing the offense for UCR unless all four criteria mentioned earlier can be answered yes.

- Row 1 Enter the number of commercial sex acts offenses cleared by arrest or exceptional means.
- Row 2 Enter the number involuntary servitude offenses cleared by arrest or exceptional means.
- Row 3 Enter the totals of row 1 and row 2.

Column 6 - Number of Clearances Involving Only Persons Under 18 Years of Age

In column 6, one entry should be made for each human trafficking offense cleared involving OFFENDERS under 18 years of age *only*. The number in this column can never be greater than the number in column 5.

If an offense is cleared by arrest or exceptional means and offenders include both adults and persons under 18 years of age, *the clearance should be scored only in column 5.* If a clearance involves only persons under age 18, the clearance is entered in both columns 5 and 6. **REMEMBER THAT PERSONS ARRESTED ARE NOT BEING COUNTED IN COLUMNS 5 AND 6. COUNT ONLY THE NUMBER OF HUMAN TRAFFICKING OFFENSES CLEARED.**

Offenses reported in previous months but not cleared can be cleared in columns 5 and 6 of this month's report.

- Row 1 Enter the number of commercial sex acts offenses cleared by arrest or exceptional means by offenders under 18 years of age.
- Row 2 Enter the number involuntary servitude offenses cleared by arrest or exceptional means by offenders under 18 years of age.
- Row 3 Enter the totals of row 1 and row 2.

This Human Trafficking Form should be forwarded to the FBI UCR Program. Each agency is requested to submit this form each month by the seventh day after the close of the month. If there were no human trafficking or attempted human trafficking offenses to report, check the box on the Human Trafficking Form.

MONTHLY RETURN OF HUMAN TRAFFICKING OFFENSES KNOWN TO LAW ENFORCEMENT

This form is authorized by PL 110-457 (HR 7311), the *William Wilberforce Trafficking Victims Protection Reauthorization Act of 2008*. Even though you are not required to respond, your cooperation in completing this form to report all monthly incidents of human trafficking will assist the FBI in compiling timely, comprehensive, and accurate data. Please submit this form to UCRstat@leo.gov and any questions to the FBI, Criminal Justice Information Services Division, Attention: Uniform Crime Reports/Module E-3, 1000 Custer Hollow Road, Clarksburg, West Virginia 26306; telephone 304-625-4830, facsimile 304-625-3566. Under the Paperwork Reduction Act, you are not required to complete this form unless it contains a valid OMB control number. This form takes approximately 5 minutes to complete.

ADMINISTRATIVE INFORMATION

ORI Number: Enter the nine-character Originating Agency Identifier assigned to your agency.

Month and Year: Enter the month and year of data being submitted.

Name of Agency: Enter the name of your agency.

Name and Title of Preparer: Enter the preparer's name and job title.

Telephone Number and E-mail address of Preparer: Enter the preparer's telephone number and e-mail address.

If there were no human trafficking offenses to report for the month, check this box.

HUMAN TRAFFICKING OFFENSES

| | 1 Human Trafficking Classification | 2 Offenses Reported | 3 Unfounded, i.e., False or Baseless Complaints | 4 Number of Actual Offenses (Column 2 Minus Column 3) (Include Attempts) | 5 Total Offenses Cleared by Arrest or Exceptional Means | 6 Number of Clearances Involving Only Persons Under 18 Years of Age |
|--------------------|---------------------------------------|------------------------|--|---|--|--|
| A. | Commercial Sex Acts | | | 0 | | |
| B. | Involuntary Servitude | | | 0 | | |
| GRAND TOTAL | | 0 | 0 | 0 | 0 | 0 |