

**SUSPICIOUS PERSON ACTIVITY REPORTING CHECKLIST**

Sex \_\_\_\_\_ Hair: Color \_\_\_\_\_ Length \_\_\_\_\_  
Age \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_  
Facial Features: Glasses \_\_\_\_\_ Mustache \_\_\_\_\_ Beard \_\_\_\_\_  
Noticeable Scars \_\_\_\_\_ Tattoos \_\_\_\_\_  
Birthmarks/Moles \_\_\_\_\_ Race/Nationality \_\_\_\_\_  
Walk (Limp, Gait, Etc.) \_\_\_\_\_  
Clothing: Hat \_\_\_\_\_ Jacket \_\_\_\_\_ Shirt/Blouse \_\_\_\_\_  
Pants/Skirt \_\_\_\_\_ Footwear \_\_\_\_\_ Jewelry/Necklace \_\_\_\_\_  
What Are The Suspects Doing? \_\_\_\_\_

Location Of Sighting \_\_\_\_\_  
Date/Time Of Sighting \_\_\_\_\_

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