

KEWAUNEE COUNTY

INCIDENT / THREAT QUESTIONNAIRE FORM

Incident Description: _____

Date / Time: _____

Location _____

Reporting Person _____

Received by:

Mail In Person Phone Package Found Object Note Voice Mail

Narrative: _____

Physical Descriptors:

Male Female Eye Color _____ Hair Color _____ Height _____ Weight _____

Hair Style _____ Facial Hair _____ Scars / Tattoos _____

Clothing:

Pants _____ Shirt _____ Shoes _____ Jacket _____

Hat _____ Purse _____ Briefcase _____ Dress _____

Skirt _____ Suit _____ Jewelry _____

Number of Suspects: _____

Reason for Being in Your Office: _____

Is Person Known to You? _____ How? _____

Please Submit Completed Form to the Security Officer