



UTAH COUNTY SHERIFF DEPARTMENT
RUNAWAY AND MISSING PERSON REPORT

CASE _____ DEPUTY _____ DATE ____/____/____

DETECTIVE ASSIGNED _____ N.C.I.C. _____

NAME OF MISSING PERSON _____

DOB ____/____/____ SEX _____ RACE _____ HGT _____ WGT _____

EYE COLOR _____ HAIR COLOR _____ LENGTH / STYLE _____

DATE OCCURRED ____/____/____ TIME _____ POB _____

Reported By _____ Phone _____ Work _____

Address _____

Clothing Description _____
INCLUDE JEWELRY DESCRIPTION

Scars / Marks / Tattoos _____

Alias, Nicknames _____

Misc _____
AFFILIATIONS, REASON FOR LEAVING, 10-0, WILL RUN IF APPROACHED, ECT.

OTHER PHYSICAL CHARACTERISTICS: Deformities _____ Fractures _____

Freckles _____ Birthmarks _____ Moles _____ Pierced Ears _____

Skin Tone _____ Contacts _____ Glasses _____

Explain _____
ITEMS MARKED

MEDICAL CONDITIONS: Under a Doctors Care _____ Medications _____

Allergies _____ Behavioral _____ Blood Type _____ Substance Abuse _____

Explain _____
LIST MEDICATIONS, TYPE OF SUBSTANCE ABUSE

MISCELLANEOUS INFORMATION: With Anyone _____

Possible Destination _____

Vehicle License _____ State _____ Exp _____ Make _____ Year _____

Model _____ Style _____ Color _____ VIN _____

DL # _____ State _____ Exp _____ SSN _____

Explain _____
GIVE ANY PERTINENT INFORMATION RE: WHO WITH, DESTINATION, VEH MARKS ON IDENTIFICATION

REQUEST FOR APPREHENSION OF A RUNAWAY CHILD

I, _____ being the _____
PARENT, LEGAL GUARDIAN
of _____, a child under 18 years of age, hereby state that the said child is a runaway from home and is otherwise beyond my control. I hereby request the Utah County Sheriff Department to take the said child in temporary custody wherever said child may be found. I have this day furnished the Utah County Sheriff Department with a physical description and probable whereabouts of said child.

This request authorized the Utah County Sheriff Department to take the above named child into custody as being a runaway from home. As soon as the child is taken into temporary custody, the parent or custodian or their legal custodian will be notified and will respond to take the child.

Date _____
SIGNATURE OF PARENT OR LEGAL GUARDIAN

FOR OFFICE USE ONLY

ENTRY

ATL _____ N.C.I.C. _____ DATE ____/____/____ TIME _____:

FOLLOW-UP

CANCELLATION

DATE RETURNED / ARRESTED _____ CANCELED OVER RADIO _____

N.C.I.C. CANCELED _____ ENTRY ATTACHED _____

ENTRY ON SUPPLEMENTAL NARRATIVE _____