



# CORPUS CHRISTI POLICE DEPARTMENT ADDITIONAL LOSS REPORT



Reporting Officer: \_\_\_\_\_ Payroll No. \_\_\_\_\_ Case No.: \_\_\_\_\_

Last Name		First Name		Middle Initial	Suffix
Street No.	Street Address			City	Zip Code
Date of Occurrence				Phone No. (      )	

<b>1</b>	Are you: <input type="checkbox"/> Submitting this item for the first time? <input type="checkbox"/> Updating information?	Stolen or Recovered?	Make	Model	Color	Value	Quantity
	Description			Serial No.		Owner Applied No.	
<b>2</b>	Are you: <input type="checkbox"/> Submitting this item for the first time? <input type="checkbox"/> Updating information?	Stolen or Recovered?	Make	Model	Color	Value	Quantity
	Description			Serial No.		Owner Applied No.	
<b>3</b>	Are you: <input type="checkbox"/> Submitting this item for the first time? <input type="checkbox"/> Updating information?	Stolen or Recovered?	Make	Model	Color	Value	Quantity
	Description			Serial No.		Owner Applied No.	
<b>4</b>	Are you: <input type="checkbox"/> Submitting this item for the first time? <input type="checkbox"/> Updating information?	Stolen or Recovered?	Make	Model	Color	Value	Quantity
	Description			Serial No.		Owner Applied No.	
<b>5</b>	Are you: <input type="checkbox"/> Submitting this item for the first time? <input type="checkbox"/> Updating information?	Stolen or Recovered?	Make	Model	Color	Value	Quantity
	Description			Serial No.		Owner Applied No.	
<b>6</b>	Are you: <input type="checkbox"/> Submitting this item for the first time? <input type="checkbox"/> Updating information?	Stolen or Recovered?	Make	Model	Color	Value	Quantity
	Description			Serial No.		Owner Applied No.	
<b>7</b>	Are you: <input type="checkbox"/> Submitting this item for the first time? <input type="checkbox"/> Updating information?	Stolen or Recovered?	Make	Model	Color	Value	Quantity
	Description			Serial No.		Owner Applied No.	
<b>8</b>	Are you: <input type="checkbox"/> Submitting this item for the first time? <input type="checkbox"/> Updating information?	Stolen or Recovered?	Make	Model	Color	Value	Quantity
	Description			Serial No.		Owner Applied No.	
<b>9</b>	Are you: <input type="checkbox"/> Submitting this item for the first time? <input type="checkbox"/> Updating information?	Stolen or Recovered?	Make	Model	Color	Value	Quantity
	Description			Serial No.		Owner Applied No.	

**I UNDERSTAND THAT FILING A FALSE REPORT AT A POLICE AGENCY IS A CLASS A MISDEMEANOR,  
PUNISHABLE BY UP TO ONE YEAR IN JAIL AND/OR A FINE NOT TO EXCEED \$2,500.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<p><i>FOR OFFICE USE ONLY:</i></p> <p>Entry Clerk: _____</p> <p>Citizen Contacted?    Yes    No</p>	
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<b>10</b>	Are you: <input type="checkbox"/> Submitting this item for the first time? <input type="checkbox"/> Updating information?	Stolen or Recovered?	Make	Model	Color	Value	Quantity
	Description			Serial No.		Owner Applied No.	
<b>11</b>	Are you: <input type="checkbox"/> Submitting this item for the first time? <input type="checkbox"/> Updating information?	Stolen or Recovered?	Make	Model	Color	Value	Quantity
	Description			Serial No.		Owner Applied No.	
<b>12</b>	Are you: <input type="checkbox"/> Submitting this item for the first time? <input type="checkbox"/> Updating information?	Stolen or Recovered?	Make	Model	Color	Value	Quantity
	Description			Serial No.		Owner Applied No.	
<b>13</b>	Are you: <input type="checkbox"/> Submitting this item for the first time? <input type="checkbox"/> Updating information?	Stolen or Recovered?	Make	Model	Color	Value	Quantity
	Description			Serial No.		Owner Applied No.	
<b>14</b>	Are you: <input type="checkbox"/> Submitting this item for the first time? <input type="checkbox"/> Updating information?	Stolen or Recovered?	Make	Model	Color	Value	Quantity
	Description			Serial No.		Owner Applied No.	
<b>15</b>	Are you: <input type="checkbox"/> Submitting this item for the first time? <input type="checkbox"/> Updating information?	Stolen or Recovered?	Make	Model	Color	Value	Quantity
	Description			Serial No.		Owner Applied No.	
<b>16</b>	Are you: <input type="checkbox"/> Submitting this item for the first time? <input type="checkbox"/> Updating information?	Stolen or Recovered?	Make	Model	Color	Value	Quantity
	Description			Serial No.		Owner Applied No.	
<b>17</b>	Are you: <input type="checkbox"/> Submitting this item for the first time? <input type="checkbox"/> Updating information?	Stolen or Recovered?	Make	Model	Color	Value	Quantity
	Description			Serial No.		Owner Applied No.	
<b>18</b>	Are you: <input type="checkbox"/> Submitting this item for the first time? <input type="checkbox"/> Updating information?	Stolen or Recovered?	Make	Model	Color	Value	Quantity
	Description			Serial No.		Owner Applied No.	
<b>19</b>	Are you: <input type="checkbox"/> Submitting this item for the first time? <input type="checkbox"/> Updating information?	Stolen or Recovered?	Make	Model	Color	Value	Quantity
	Description			Serial No.		Owner Applied No.	
<b>20</b>	Are you: <input type="checkbox"/> Submitting this item for the first time? <input type="checkbox"/> Updating information?	Stolen or Recovered?	Make	Model	Color	Value	Quantity
	Description			Serial No.		Owner Applied No.	
<b>21</b>	Are you: <input type="checkbox"/> Submitting this item for the first time? <input type="checkbox"/> Updating information?	Stolen or Recovered?	Make	Model	Color	Value	Quantity
	Description			Serial No.		Owner Applied No.	

**PLEASE RETURN TO:**

**CENTRAL INFORMATION DIVISION  
CORPUS CHRISTI POLICE DEPARTMENT  
321 JOHN SARTAIN ST.  
CORPUS CHRISTI, TX 78401**

**PHONE: 886-2735  
FAX: 826-2962**