

# COMPLAINANT'S ADDITIONAL LOSS SUPPLEMENTAL REPORT

DATE OF ORIGINAL REPORT	SERVICE NO.
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## DALLAS POLICE DEPARTMENT

COMPLAINANT OR FIRM (LAST NAME FIRST)	LOCATION OF OFFENSE
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COMPLAINANT'S ADDRESS	BEST CONTACT PHONE NUMBERS
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QTY	ITEMIZED PROPERTY LOSS			IDENTIFYING CHARACTERISTICS (special marks, damage, etc.)	CURRENT MARKET VALUE
	Type of Property	Make and Model	Serial Number		
				TOTAL:	

Subscribed and sworn to me this _____ day of _____ 19 _____, at _____  By _____ <p style="text-align: right;">Notary Public</p> <p style="text-align: center;">(SEAL)</p>	Under penalties of perjury, I declare that to the best of my knowledge and belief, the above is true and correct.   <p style="text-align: center;">YOUR SIGNATURE IS REQUIRED</p>
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### FOR POLICE USE ONLY

DETECTIVE _____ I.D. _____	BEAT OF OFFENSE LOCATION
SUPERVISOR _____ I.D. _____	
STATUS <input type="checkbox"/> OPEN <input type="checkbox"/> SUSPENDED <input type="checkbox"/> CLOSED	NCIC OPERATOR
	UCR DISPOSITION
RECORDS DIVISION USE ONLY STATUS <input type="checkbox"/> OPEN <input type="checkbox"/> SUSPENDED <input type="checkbox"/> CLOSED	REVIEWER _____