

FIELD INFORMATION CARD - CONTACT DETAILS				
DATE (YYYYMMDD)	TIME (24 HR. CLOCK)	ZONE	 TPS208 200805	
AT <input type="checkbox"/> NEAR <input type="checkbox"/> LOCATION / INTERSECTION				
LOCATION DETAILS			OFFICER NO. (S) 1. 2.	
PROJECT #	REFERENCE TYPE/REF NO.	NATURE OF CONTACT		
CIRCUMSTANCES OF INVESTIGATION				
PERSON INVESTIGATED <input type="checkbox"/> IN VEHICLE <input type="checkbox"/> PEDESTRIAN <input type="checkbox"/> BICYCLIST <input type="checkbox"/>				
SURNAME: G1				
GZ		ALIAS / NICKNAME		
DOB (YYYYMMDD)	AGE	SEX	BIRTH PLACE	COLOUR
APPEARANCE		EYES	HAIR (STYLE/LENGTH/COLOUR)	FACIAL HAIR
HEIGHT	WEIGHT	IDENTIFIED BY (I.D. TYPE)		ID CONFIRMED YES <input type="checkbox"/> NO <input type="checkbox"/>
ADDRESS		SAME AS LOCATION <input type="checkbox"/> MFA <input type="checkbox"/>		PROV/COUNTRY
TELEPHONE NO. <input type="checkbox"/>	CELL NO. <input type="checkbox"/>	E-MAIL <input type="checkbox"/>		
DRIVER'S LICENCE NO.		PROV / STATE	DRIVER <input type="checkbox"/> PASS <input type="checkbox"/>	

ASSOCIATED* YES <input type="checkbox"/> NO <input type="checkbox"/> - THIS SUBJECT IS PART OF A GROUP				
*ENTER A SEPARATE TPS 208 FOR EACH ASSOCIATE AND ATTACH				
PRIMARY SURNAME TO LINK ASSOCS		ASSOC #	OF	
GANG/CLUB AND DESCRIPTION			GANG MEMBER <input type="checkbox"/> ASSOCIATE <input type="checkbox"/>	
CLOTHING AND BODY MARKINGS				
PERSON COMMENTS				
YOUNG PERSON INFORMATION				
ATTENDING (SCHOOL, ETC.)		GRADE	PARENTS DIVORCED <input type="checkbox"/> ARE SEPARATED <input type="checkbox"/>	
FATHER (SURNAME, G1)			CAREGIVER YES <input type="checkbox"/> ADVISED NO <input type="checkbox"/>	
MOTHER (SURNAME, G1)			YOUTH BUREAU YES <input type="checkbox"/> NOTIFIED NO <input type="checkbox"/>	
VEHICLE INFORMATION				
LICENCE PLATE		PROV / STATE	PLATE LOGO YES <input type="checkbox"/> NO <input type="checkbox"/>	LOGO DESIGN
YEAR (YYYY)	MAKE	MODEL	COLOUR	STYLE
VIN #				
VEHICLE DAMAGE				
DAMAGE LOCATION		DAMAGE DESCRIPTION		
DAMAGE / COMMENT			EMAIL TO	FIR ENTERED BY