

First Name:		Middle Name:		Last Name:	
Address #:		Street Name:		Apartment #:	
City:		State:	Zip Code:	Phone #:	
Employer Name:			Street Address:		
City:		State:	Zip Code:	Phone #:	

Law Enforcement Officer Killed or Assaulted (LEOKA)

Incident #:		CAD #:	
Agency Name:		Agency ORI:	
Vehicle Assignment: <input type="checkbox"/> F - Two Man Vehicle (Uniformed Officer) <input type="checkbox"/> G - One Man Vehicle (Uniformed Officer Alone) <input type="checkbox"/> H - One Man Vehicle (Assisted) <input type="checkbox"/> I - Detective Special Assignment (Alone) <input type="checkbox"/> J - Detective Special Assignment (Assisted) <input type="checkbox"/> K - Other (Alone) <input type="checkbox"/> L - Other (Assisted)		Circumstances/Activity Type: <input type="checkbox"/> 01 - Responding to Disturbance Calls <input type="checkbox"/> 02 - Burglaries in Progress or Pursuing Burglary Suspects <input type="checkbox"/> 03 - Robberies in Progress or Pursuing Robbery Suspects <input type="checkbox"/> 04 - Attempting Other Arrests <input type="checkbox"/> 05- Civil Disorder (riot, mass disobedience) <input type="checkbox"/> 06 - Handling, Transporting, Custody of Prisoners <input type="checkbox"/> 07 - Investigating Suspicious Persons or Circumstances <input type="checkbox"/> 08 - Ambush - No Warning <input type="checkbox"/> 09 - Handling Persons with Mental Illness <input type="checkbox"/> 10 - Traffic Pursuits and Stops <input type="checkbox"/> 11 - All Other	
If law enforcement official from another jurisdiction is involved, please provide the official's agency and ORI. (Cannot be your agency.)			

Officer Involved Shooting Information

Incident #:		CAD #:	LEOKA Incident?: <input type="checkbox"/> Yes <input type="checkbox"/> No
Officer Sequence #:	Officer's Years on Force:	Incident Level: <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor	Multi-Agency?: <input type="checkbox"/> Yes <input type="checkbox"/> No
Officer's Assignment Type: <input type="checkbox"/> U - Uniform <input type="checkbox"/> P - Plain Clothes <input type="checkbox"/> S - Special Assignment		Officer's Weapon Type: <input type="checkbox"/> 11 - Firearm (type unknown) <input type="checkbox"/> 12 - Handgun <input type="checkbox"/> 13 - Rifle <input type="checkbox"/> 14 - Shotgun <input type="checkbox"/> 15 - Other Firearm (machine gun, bazooka, etc.)	
Number of Shots Fired by Law Enforcement:			
Distance between Law Enforcement and Suspect (in ft.):			