

TIP SHEET



Code #
Texas Crime Stoppers
Tip Information Sheet

Person Taking Information: _____ Date: _____ Time: _____

Has Caller Called Before: _____ Code # Used Last Call: _____ Date Called: _____

Type Offense/Crime: _____

Date Offense/Crime Committed: _____ Location Committed: _____

Suspect #1 Info:

L / Name: _____ F / Name: _____ M or Street Name _____

Race / Sex: ___/___ Age: ___ DOB: _____ Ht: ___ Wt: _____ Hair Color: _____ Length: _____

Address: _____ City / State: _____

If Address Unknown, Description And Location of House: _____

Home Phone: _____ Work Phone: _____

Employment: _____ Shift/Hours Worked: _____

Previous Arrest: _____ Gang Involvement: _____ Gang Name: _____

Carries Or Has Weapons, Guns/Knives, Etc: _____

Spouse/Parents Or Other Family Members Names _____

Suspect Vehicle Info:

Yr.: ___ Make: _____ Model: ___ Color: ___/___ 2 Dr. ___ 4 Dr. ___ Lic. #/State: _____

Suspect #2 Info:

L / Name: _____ F / Name: _____ M or Street Name _____

Race / Sex: ___/___ Age: ___ DOB: _____ Ht: ___ Wt: _____ Hair Color: _____ Length: _____

Address: _____ City / State: _____

If Address Unknown, Description And Location of House: _____

Home Phone: _____ Work Phone: _____

Employment: _____ Shift/Hours Worked: _____

Previous Arrest: _____ Gang Involvement: _____ Gang Name: _____

Carries Or Has Weapons, Guns/Knives, Etc: _____

Spouse/Parents Or Other Family Members Names _____

Suspect Vehicle Info:

Yr.: ___ Make: _____ Model: ___ Color: ___/___ 2 Dr. ___ 4 Dr. ___ Lic. #/State: _____

Known Hangouts Or Associates Of Suspects: _____

TEXAS CRIME STOPPERS CASE FACT SHEET



CALLER# _____ CASE# _____

VICTIM: _____

SUSPECTS: _____

#ARRESTED: _____ \$ RECOVERED/SEIZED: _____ #CLEARED: _____

INVESTIGATOR: _____

SUBMITTED TO BOARD: _____

DATE PAID: _____

AMOUNT PAID: _____

COMMENTS:

