



# FIREARM DISCHARGE REPORT

Incident #: \_\_\_\_\_ Reporting Officer's Name/ID: \_\_\_\_\_

Supervisor Notified: Y / N      Supervisor's Name/ID: \_\_\_\_\_

Officer(s) Involved: \_\_\_\_\_

Charges: \_\_\_\_\_

Firearm Serial #: \_\_\_\_\_ Firearm Make: \_\_\_\_\_ Firearm Model: \_\_\_\_\_

## **Incident/Call Type:**

Combative ( )      Suicidal ( )      Domestic ( )      Barricaded ( )  
Armed ( )      Warrant ( )      Other: \_\_\_\_\_

**General Location of Incident:**    Indoor ( )      Outdoor ( )      Jail ( )

Other: \_\_\_\_\_

## **Level of Force Used: (Check all that apply)**

Physical ( )      Chemical ( )      Less Lethal ( )      Impact Weapon ( )  
Firearm ( )

Medical Treatment Required:    Y / N      Photographs Taken:      Y / N

Did Firearm Discharge Cause Injury:      Y / N

If YES, was the Subject Treated for the Injury: Y / N



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Admitted to the Hospital for the Injury: Y / N

Admitted to the Hospital for Psychiatric: Y / N

Medical Facility: \_\_\_\_\_ Doctor: \_\_\_\_\_

Suspect Under the Influence of Alcohol/Drugs: Y / N

## **Suspect Information:**

Person ( )      Animal ( )      Type of Animal: \_\_\_\_\_

DOB: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Number of Rounds Fired: \_\_\_\_\_

Approximate Target Distance at Time of Discharge: \_\_\_\_\_ FT

## **Resistance Encountered from Subject/Suspect: (Check all that apply)**

Flee ( )      Attack other person ( )      Edged Weapon ( )

Threat/Posture ( )      Punch/Hit ( )      Firearm ( )

Pull Away ( )      Kick/Knee ( )      Other Weapon ( )

Other ( )

***\*This report does not replace or eliminate the need for a written narrative of the incident. This report is a supplement specific to the use of a Firearm.***