

Onslow County Sheriff's Office
Lost/Stolen Article Report

Name: _____ Date of Birth: _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Cell: _____

Height: _____ Weight _____ Race _____ Sex _____ Eyes: _____ Hair: _____

Drivers License#: _____ State _____ Social Security # _____

Possible date, time and location of loss: _____

Items Missing (Include description: color, serial number, model number, identifying marks etc.)

1. _____

2. _____

3. _____

4. _____

Describe how you believe item(s) were lost or stolen (continue on back)

This information is true to the best of my knowledge

Signature: _____

This form must be filled out *completely* and in pen for a report to be filed.