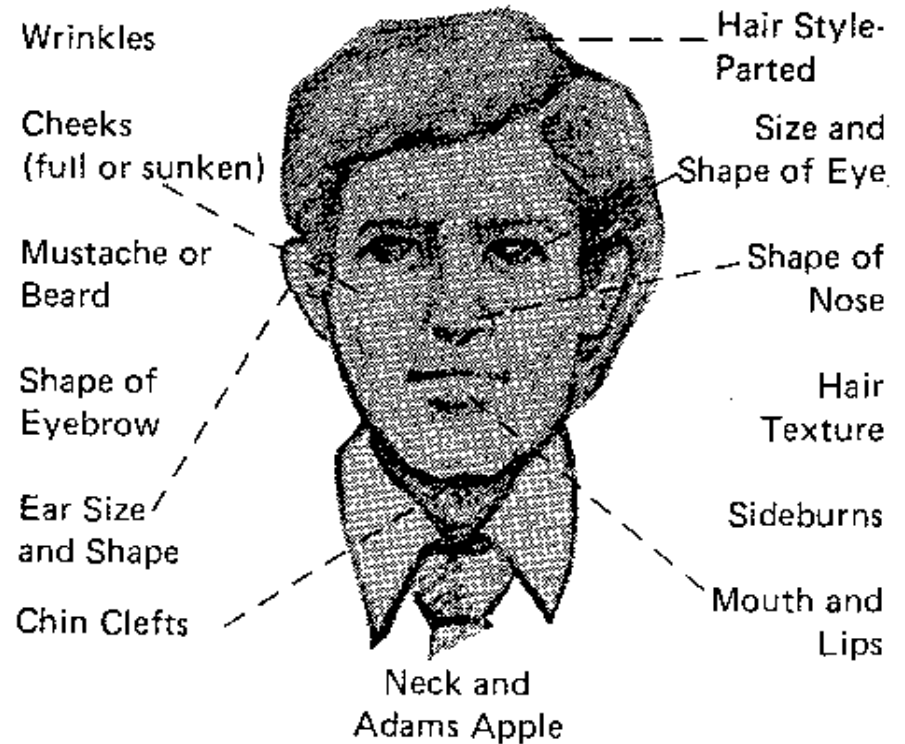
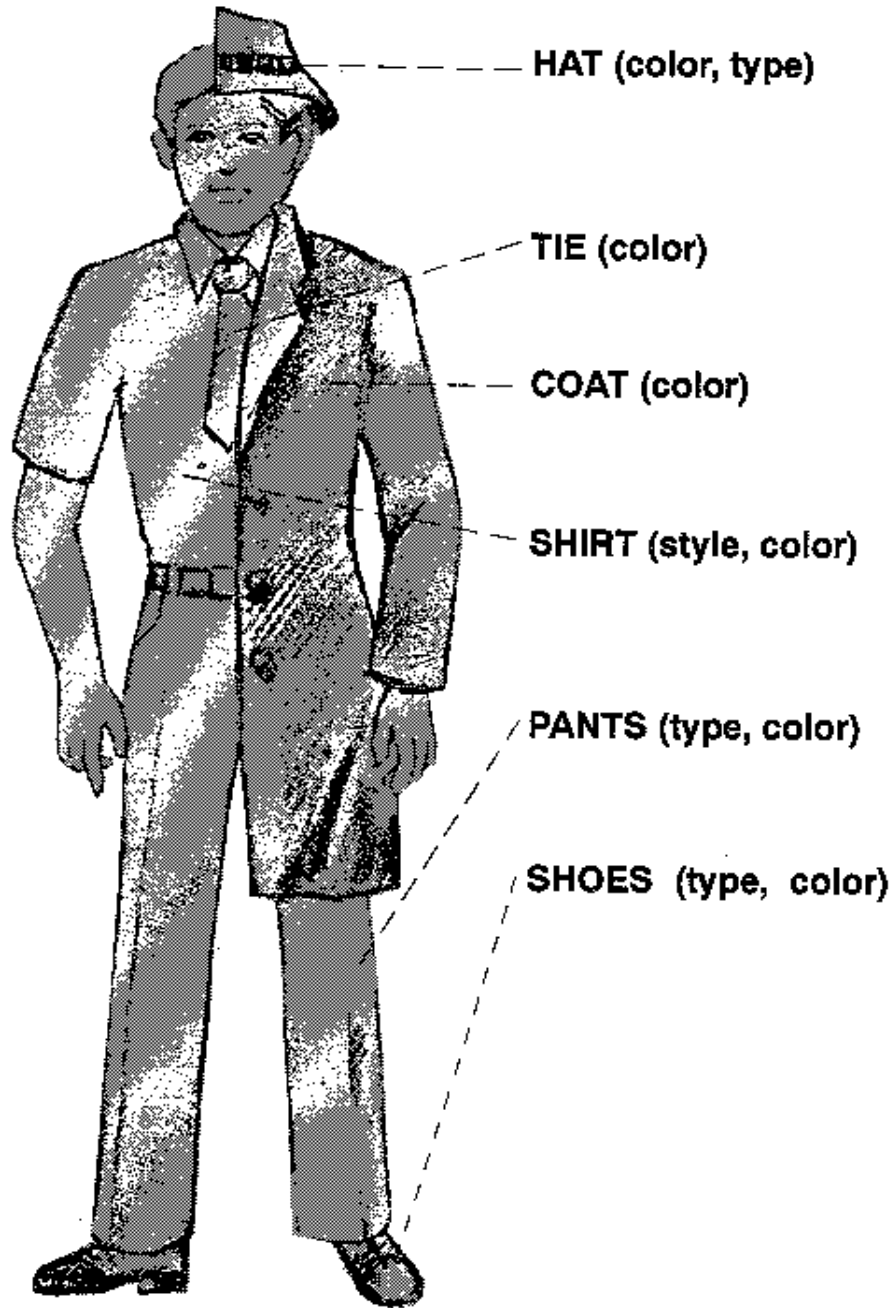


FACIAL APPEARANCE













**WRITE DOWN SPECIFIC FACIAL DETAILS-
ONLY WHAT YOU DEFINATELY REMEMBER**



MARION COUNTY SHERIFF'S DEPARTMENT SUSPECT, WEAPON & VEHICLE DESCRIPTION SHEET



SUSPECT				WEAPON		VEHICLE
GENERAL DESCRIPTION				LONG BARREL REVOLVER	SNUB NOSE REVOLVER	MOTOR VEHICLE TYPE
RACE	SEX	AGE	HEIGHT			<input type="checkbox"/> PASSENGER CAR/STATION WAGON
WEIGHT	HAIR/FACIAL HAIR	EYES (COLOR)	GLASSES (TYPE)	HANDLE COLOR _____ BARREL COLOR _____	HANDLE COLOR _____ BARREL COLOR _____	<input type="checkbox"/> PICK UP
TATOOS	COMPLEXION	SCARS/MARKS	BUILD	LARGE AUTOMATIC	SMALL AUTOMATIC	<input type="checkbox"/> VAN
PHYSICAL HANDICAPS	OTHER (EARRING, GOLD TOOTH, ETC.)		OVERALL APPEARANCE <input type="checkbox"/> NEAT <input type="checkbox"/> DIRTY			<input type="checkbox"/> TRUCK
FACIAL APPEARANCE				HANDLE COLOR _____ BARREL COLOR _____	HANDLE COLOR _____ BARREL COLOR _____	<input type="checkbox"/> SEMI TRACTOR (ONLY)
WRINKLES	CHEEKS <input type="checkbox"/> FULL <input type="checkbox"/> SUNKEN		EAR SIZE & SHAPE	LUGAR	DERRINGER	<input type="checkbox"/> SEMI TRACTOR/TRAILER
MUSTACHE	BEARD					<input type="checkbox"/> MOTORCYCLE
HAIR TEXTURE	HAIR STYLE	HAIR PARTED		HANDLE COLOR _____ BARREL COLOR _____	HANDLE COLOR _____ BARREL COLOR _____	<input type="checkbox"/> MOPED
SIZE & SHAPE OF EYE	NECK & ADAMS APPLE	SIDE BURNS			FULL SIZE RIFLE	<input type="checkbox"/> OTHER _____
CHIN CLEFTS	SHAPE OF EYEBROW	MOUTH & LIPS			SAW-OFF RIFLES	COLOR _____
CLOTHING				BARREL COLOR _____	TAPE ON HANDLE _____	YEAR _____
HAT (COLOR, TYPE)	SHIRT (STYLE, COLOR)			HANDLE COLOR _____	COLOR OF TAPE _____	MAKE _____
TIE (COLOR)	PANTS (TYPE, COLOR)				FULL SIZE SHOTGUN	MODEL _____
COAT (COLOR)	SHOES (TYPE, COLOR)				SAW-OFF SHOTGUNS	STYLE _____
OTHER				<input type="checkbox"/> ONE BARREL	HANDLE COLOR _____	LICENSE YEAR _____
MODE OF TRAVEL	DIRECTION OF TRAVEL			<input type="checkbox"/> TWO BARREL	TAPE ON HANDLE _____	LICENSE STATE _____
WHAT DID SUSPECT SAY? (ANY ACCENT?)				BARREL COLOR _____	COLOR OF TAPE _____	LICENSE NUMBER _____
						DIRECTION OF TRAVEL _____
						NO. OF SUSPECTS _____
						ADDITIONAL INFO (LOUD MUFFLER, DENTS, MISSING HUBCAPS, ETC.) _____ _____ _____ _____ _____ _____