Municipal Code Number	
N.J.	0 0
NCIC Code Number	

STATE OF NEW JERSEY
DEPARTMENT OF LAW & PUBLIC SAFETY
Law Enforcement Officers Killed or Assaulted
Monthly Supplement
(Also Include on Return A)

OFFICERS KILLED — *Number of your law enforcement officers killed in the line of duty this month:*

By Felonious Act: [   ]   By Accident or Negligence: [   ]

POLICE OFFICERS ASSAULTED — *(Do not include officers killed):*

CIRCUMSTANCE	TOTAL ASSAULT	TYPE OF WEAPON USED				TYPE OF ASSIGNMENT							POLICE ASSAULTS CLEARED
		FIREARM	KNIFE/ OTHER CUTTING OBJECT	OTHER WEAPON	PHYSICAL FORCE	TWO OFFICER VEHICLE	ONE OFFICER VEHICLE		DETECTIVE or SPECIAL ASSIGNMENT		OTHER		
							ALONE	ASSISTED	ALONE	ASSISTED	ALONE	ASSISTED	
	A	B	C	D	E	F	G	H	I	J	K	L	M
1. Responding to "Disturbance" calls (family quarrels, man with gun, etc.)													
2. Burglaries in progress or pursuing burglary suspects													
3. Robberies in progress or pursuing robbery suspects													
4. Attempting other arrests													
5. Civil disorder (riot, mass disobedience, etc.)													
6. Handling, transporting, custody of prisoners													
7. Investigating suspicious persons or circumstances													
8. Ambush — no warning													
9. Handling persons with mental illness													
10. Traffic pursuits and stops													
11. All other													
12. Total (1 - 11)													
13. With personal injury													
14. Without personal injury													
15. Time of assaults — AM													
15. Time of assaults — PM													

12:01   2:00   4:00   6:00   8:00   10:00   12:00

Report for the Month of: _____

Prepared by: _____   Date: _____

Department: _____
Head of Department

DO NOT USE THIS SPACE	
	INITIALS
RECORDED	
REVIEWED	
PUNCHED	
VERIFIED	
ADJUSTED	
POP GROUP	
CHARACTER	

All information should be entered into the UCR System by the 7th day after the close of the reporting period.
DO NOT: Email, Fax, or Mail a paper copy of this form to the New Jersey State Police.

NJ-UCR-369A (Rev. 09/18)