



ARSON CONTROL REWARD REQUEST

Committee Use Only	No.
Rec.	Dec.

A	1. Type of Property Involved (House, Bar, School, Truck, etc.)				2. Date of Fire/Offense		Disposition
	B	1. Address (Location) of Fire		2. County	3. City/Township		
C		1. Value/Property	2. Dollar Loss/Fire	2. Fatals	4. Injuries	5. Responding Fire Dept.	
	D	Insurance Carrier			Property Coverage		Contents Coverage

E	Witness Information	1. Name		2. Address		City	State	Zip
	F	1. Age	2. Date Info. Rec'd.	3. By Whom		Will He/She be a Court Witness 1. <input type="checkbox"/> No 2. <input type="checkbox"/> Yes 3. <input type="checkbox"/> Has Testified		
G	How Did He/She Learn of Reward Offer? 4. <input type="checkbox"/> Poster 5. <input type="checkbox"/> Friend 6. <input type="checkbox"/> Investigator 7. <input type="checkbox"/> T.V. 8. <input type="checkbox"/> Newspaper 9. <input type="checkbox"/> _____							
H	Relationship to Fire Victim	1. <input type="checkbox"/> Friend	2. <input type="checkbox"/> Knows Fire Victim	3. <input type="checkbox"/> Does Not Know Fire Victim	4. <input type="checkbox"/> Family - How?			
I	Relationship to Defendant	1. <input type="checkbox"/> Friend	2. <input type="checkbox"/> Does Not Know Defendant	3. <input type="checkbox"/> Knows Defendant	4. <input type="checkbox"/> Participant	5. <input type="checkbox"/> Family - How?		
J	Has or Will He/She Receive Any Other Remuneration Connected With This Case?				1. <input type="checkbox"/> No 2. <input type="checkbox"/> Yes - Specify			
K	Is the witness an immediate family member of any law enforcement official, fire service employee, owner or occupant of the property burned or private investigator hired to investigate or adjust the fire? 1. <input type="checkbox"/> no 2. <input type="checkbox"/> yes - explain							

L	How did the "Arson Control" reward offer influence the witness to come forward with information?							
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M N O P Q R	DEFENDANTS	1	1. Name		2. City		3. State	4. Age	5. Date/Arrest	
			1. Charges		2. Court Issuing Warrant		3. Current Court Status of Defendant			
		2	1. Name		2. City		3. State	4. Age	5. Date/Arrest	
			1. Charges		2. Court Issuing Warrant		3. Current Court Status of Defendant			
		3	1. Name		2. City		3. State	4. Age	5. Date/Arrest	
			1. Charges		2. Court Issuing Warrant		3. Current Court Status of Defendant			

S 1. Brief Summary of How Information Led to the Arrest and/or Conviction of Defendant.

T 1. Remarks (Comment on any threats or harassment to the witness, also use this space for additional information to supplement the front side...use letters and numbers please).

U Include a copy of the investigative report and fire report.

Investigating Officer (print or type)		
Signature		
Department		
Address		
City	Zip	Telephone No.
Investigation No.		Date Submitted

**MAIL TO: James LaBuhn
Michigan Arson Prevention Committee
3245 East Jefferson
Detroit, Michigan 48207-4222**

ATTACH COPIES OF F.D. REPORT, INVESTIGATION REPORT, WARRANT, ARREST REPORT, NEWSPAPER ACCOUNTS AND ANY OTHER PERTINENT INFORMATION.