



**LOS ANGELES POLICE DEPARTMENT**  
**CALIFORNIA TRESPASS REPORT**

				Trespass Report		Report Number	
Date	Time	Postal	Location		Type of Property		Trespass Type
REPORTING PARTY INFORMATION							
Name: First			Middle			Last	
Residential Address			City	State	Postal	Phone Number	
Gender	Eyes	Hair	Height	Weight	Date of Birth	Email Address	
SUBJECT (TRESPASSER) INFORMATION							
Name: First			Middle			Last	
Residential Address			City	State	Postal	Phone Number	
Gender	Eyes	Hair	Height	Weight	Date of Birth	Email Address	
TRESPASS DETAILS							
Was Subject Previously Warned?		Date of Previous Warn (if applicable)		Did the Subject Refuse to Leave When Asked?		Was a Trespass Notice Issued?	
Was the Subject Cited / Arrested?			Subject Still on Scene?		Use of Force Involved?		Photos / Bodycam Available Upon Request?
Narrative							
OFFICER INFORMATION							
Officer Name		Badge Number		Agency		Signature	