



# South Carolina Law Enforcement Division Case Status Report

INFORMATION DESCRIPTION			CASE NUMBER
<b>OPEN</b>	<b>COMPLETED</b>	<b>CLOSED</b>	<b>Cross Ref. No</b> _____
___ Active	Date _____	___ Unfounded	<b>Character</b> _____, _____, _____
___ Under Pros. Review		___ Declined	<b>Character Details</b> _____
___ Suspended		___ Adjudicated	_____
___ Awaiting Court		___ Ex. Cleared	_____
Opening Date _____	Closing Date _____	Lab Number _____	

Case Agent (last name, initials) \_\_\_\_\_ Assisting Agent (last name, initials) \_\_\_\_\_ Supervisor (last name, initials) \_\_\_\_\_

Requesting Agency _____	Name _____
SLED Authority _____	Date Received _____
Incident Date _____	Incident Location _____

Subject (last name, first name, middle initial) _____	Victim (last name, first name, middle initial) _____
_____	_____
_____	_____

Subject Vehicle(s): \_\_\_\_\_

Remarks: \_\_\_\_\_

Approved Supervisor / Date \_\_\_\_\_

Approved Admin. Supervisor / Date \_\_\_\_\_