



ILLEGAL DRUG INFORMATION

Today's Date: _____

Do you know the name or names of the persons involved with illegal drugs?

If you know a name or even a partial name, please enter the information here:

Do you know where the illegal activity is taking or has taken place?

Thank you very much for taking time to complete this form, and for being an involved citizen of Klamath County.



ILLEGAL DRUG INFORMATION

When did this activity take place? Please share the most recent event that you know of, and then include how far back you know of occurrences.

What drug or drugs were involved? What happened that you know of?

Is there anything else you think we should know about this activity or activities?

IF YOU WANT TO BE CONTACTED regarding this information, please leave your name and phone number, or an e-mail address. Someone will contact you only if you request so, and your identity will remain confidential.

Name: _____

Phone #: _____ E-mail Address: _____

Thank you very much for taking time to complete this form, and for being an involved citizen of Klamath County.