



# BUTTE COUNTY SHERIFF'S OFFICE



## CHAPLAIN ACTIVITIES LOG

Chaplain:	ID#:	Date of Call:	
Called Out By:	Time Started:	Time Finished:	
Total Time:	Type of Call:		
Where to Meet:			
<input type="checkbox"/> Victim	<input type="checkbox"/> Deceased	<input type="checkbox"/> Injured	<input type="checkbox"/> Other:
Name:	Sex:	Height:	Weight:
Last Known Address:	Hair:	Eyes:	DOB:
Known and releasable facts surrounding the victim:			
Others Notified:	Relationship:		
<b>ACTIVITIES / SERVICES PROVIDED</b> (Number of persons in each category)			
Death Notifications:			
Crisis Interventions:			
Emergency Assistance:			
Follow-up Counseling:			
Presentations:			
Other:			

### NOTES