



PLACE THIS CARD UNDER YOUR TELEPHONE

QUESTIONS TO ASK:

1. When is bomb going to explode?
2. Where is it right now?
3. What does it look like?
4. What kind of bomb is it?
5. What will cause it to explode?
6. Did you place the bomb?
7. Why?
8. What is your address?
9. What is your name?

EXACT WORDING OF THE THREAT:

Sex of caller: _____ Race: _____

Age: _____ Length of call: _____

Number at which call is received:

Time: _____ Date: _____

BOMB THREAT

CALLER'S VOICE:

- | | |
|-----------------------------------|--|
| <input type="checkbox"/> Calm | <input type="checkbox"/> Nasal |
| <input type="checkbox"/> Angry | <input type="checkbox"/> Stutter |
| <input type="checkbox"/> Excited | <input type="checkbox"/> Lisp |
| <input type="checkbox"/> Slow | <input type="checkbox"/> Raspy |
| <input type="checkbox"/> Rapid | <input type="checkbox"/> Deep |
| <input type="checkbox"/> Soft | <input type="checkbox"/> Ragged |
| <input type="checkbox"/> Loud | <input type="checkbox"/> Clearing throat |
| <input type="checkbox"/> Laughter | <input type="checkbox"/> Deep breathing |
| <input type="checkbox"/> Crying | <input type="checkbox"/> Cracking voice |
| <input type="checkbox"/> Normal | <input type="checkbox"/> Disguised |
| <input type="checkbox"/> Distinct | <input type="checkbox"/> Accent |
| <input type="checkbox"/> Slurred | <input type="checkbox"/> Familiar |

If voice is familiar, who did it sound like?

BACKGROUND SOUNDS:

- | | |
|--|--|
| <input type="checkbox"/> Street noises | <input type="checkbox"/> Animal noises |
| <input type="checkbox"/> Restaurant noises | <input type="checkbox"/> Factory machinery |
| <input type="checkbox"/> House noises | <input type="checkbox"/> Office machinery |
| <input type="checkbox"/> Voices | <input type="checkbox"/> Static |
| <input type="checkbox"/> PA system | <input type="checkbox"/> Clear |
| <input type="checkbox"/> Music | <input type="checkbox"/> Local |
| <input type="checkbox"/> Motor | <input type="checkbox"/> Long distance |
| | <input type="checkbox"/> Booth |

Other _____

THREAT LANGUAGE:

- | | |
|--------------------------------------|---|
| <input type="checkbox"/> Well-spoken | <input type="checkbox"/> Incoherent |
| <input type="checkbox"/> Foul | <input type="checkbox"/> Taped |
| <input type="checkbox"/> Irrational | <input type="checkbox"/> Message read by threat maker |

REMARKS: _____

Report call immediately to:

Phone number _____

Date _____

Name _____

Position _____

Phone number _____