

Bomb Threat Check List

Time Reported:		Date Reported:
Exa	act words of caller:	
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Que	estions to ask:	
1.	When is the bomb going to e	xplode?
2.		?
3.	What kind of bomb is it?	
4.	What does it look like?	
5.	Why did you place the bomb	?
6.	When did you place the bom	b?
7.	Where are you calling from?	
8.	What is your name?	
9.	Where do you live?	
	scription of caller's voice: le: Female: Young:	Middle Aged: Old: Accent:
Bac	ckground noise	Was the voice familiar?
If so	o, what did it sound like?	×
Oth	ner voice characteristics:	
Tim	ne caller hung up:	
Rer	marks:	
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Nar	me, address and telephone r	umber of recipient:
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