APPENDIX E

BOMB THREAT FORM

Date:		
Name	of Recipient:	
Addr	ess of Recipient:	
Telep	hone Number of Recipient:	_
Exac	Words of Person Placing Call:	
QUE	STIONS TO ASK:	
1.	When is the bomb going to explode?	
2.	Where is the bomb right now?	
3.	What kind of bomb is it?	
4.	What does it look like?	
5.	Why did you place the bomb?	
		