

Louisiana Court Security Incident Report Judicial Administrator's Office 400 Royal Street, Suite 1190

New Orleans, LA 70130-8101 FAX (504) 310-2587

LAJAO Staff Contact: Robert Harper, (504) 310-2601, rharper@lasc.org

Please submit this form at the end of the month in which the incident occurred.

1. Information of Person Completing Form:	attention is needed, contact the local police or sheriπ's department.
Last First	Area Code and Phone
Title	Email
2. Type of Court: Appellate District City/Parish Not related to a particular court type Name of Court or Courthouse/Court Building:	3. Parish: AN
5. Type of Incident: Physical assault	9. Who was the perpetrator in the incident: Name: Criminal defendant/juvenile respondent Plaintiff/non-criminal defendant/respondent/petitioner Family member/friend of party in the case Member of public (unknown relation to any case) Other: Was this individual charged as result of the incident? No Yes Pending 10. Was the incident reported to law enforcement? No Yes, name of agency: 11. Was this incident related to a particular case within the court? Criminal Civil Mental Health Not related to a particular case Case Number: Style: 12. Description of incident:
Clerk's office judge, magistrate, etc.) Clerk's office Holding area Parking lot Public area of courthouse/court building (lobby, hallway, etc.) Other: 7. Was a weapon involved? No Yes, identify all weapons involved: Gun Knife Blunt object Other: 8. Was anyone injured? No Yes, type of injury: If yes, was medical attention rendered? No Yes	