AMMUNITION REPORTING COVER SHEET ARCS

IMPORTANT:

Read the Ammunition Tracing Manual and Ammunition Tracing Protocols before completing this form

1. REPORTER INFORMA	ATION
Tick this box if you pre	fer to remain anonymous: 🗆
Provide initials to identify	YOUTSelf: Add the same initials to all attached ARF forms, documents and photograph
Alternatively (preferre	d by the Small Arms Survey), please supply:
	Last name:
·	ched ARF forms, documents and photographs
Postal or email address	for correspondence:
2. LOCATION WHERE A	AMMUNITION WAS RECORDED
Nearest town:	Administrative region/district:
Country:	GPS coordinates (if available):
Other relevant informati	on about the location:
2. STATUS OF THE AM	IMUNITION WHEN RECORDED
The ammunition was: (tio	k one box only, then enter the date when the ammunition was recorded or found)
The ammunition was: (tic 1. In the hands of the use	k one box only, then enter the date when the ammunition was recorded or found) r when recorded (i.e. the user was present) \[\sqrt{DD/MM/YYYY})://
The ammunition was: (tion 1. In the hands of the use 2. Found by the reporter of	k one box only, then enter the date when the ammunition was recorded or found) r when recorded (i.e. the user was present) or other party (on the ground, in a cache, etc.) (DD/MM/YYYY)://
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4. SOURCE OF THE AMMUNITION
If the user/s was/were present during the recording, specify the group to which he/she/they belong/s: (do not give names of persons)
Group to which user belongs (e.g. police, rebel group, civilian, etc.):
Did the user specify how he/she had come into possession of the ammunition?
No, did not specify \square Yes, specified origin \square
If yes, give exact details of how the user acquired the ammunition:
Supplier (belongs to which group?):
Supplier location (town, district, country):
Any other relevant information about the reported supplier or supply chain:
5. NOTES SECTION
Please use this space to provide any other relevant information:
6. CONTENTS OF YOUR REPORT
Number of ARF Reporting Forms enclosed/attached with this cover sheet: #
Numbers of printed photographs enclosed/attached with this cover sheet: #
Number of digital photographs sent to weaponsID@smallarmssurvey.org: #
Please check before you post or fax the report that <u>all</u> ARF reporting forms, photographs, and additional notes or documentation (if required) are labelled with your name or initials.
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SENDING YOUR REPORT TO THE SMALL ARMS SURVEY

By email to: weaponsID@smallarmssurvey.org (please put 'WEAPONS ID' in the subject line)

By post to: Weapons ID, Small Arms Survey, 47 Avenue Blanc, CH-1202, Geneva, Switzerland

By fax to: +41 22 732 27 38 (include a first page with the heading WeaponsID on it)

Electronic cover sheets and reporting forms are available at: www.smallarmssurvey.org/weaponsID

The Small Arms Survey will make a preliminary analysis of the information you have sent and will contact you to verify the information. All information received by the Survey is confidential. It is stored securely and subject to restricted access.