

# Cryptid Paranormal LLC – Dogman Encounter Report Form

Report ID (assigned): \_\_\_\_\_

Date Submitted: \_\_\_\_\_

Witness Name / Alias: \_\_\_\_\_

Preferred Contact: \_\_\_\_\_

Encounter Date & Time: \_\_\_\_\_

Location (City / County / State): \_\_\_\_\_

Nearest Landmark: \_\_\_\_\_

Description of Entity (height, build, features):

\_\_\_\_\_  
\_\_\_\_\_

Behavior Observed:

\_\_\_\_\_  
\_\_\_\_\_

Evidence Submitted (if any): \_\_\_\_\_

Additional Notes:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_