

Grand Counselor's
48 Hour Incident Report
(Attorney Client Privilege)

Name: _____

Title: _____

Address: _____

Email Address: _____

Telephone Number: _____

Date of Incident: _____

Facts:

Attach a statement detailing the following: what happened, where, when and who was involved. Include contact information for all persons involved.

Was anyone injured?

Include name, address and telephone number.

College or University?

Include contact name for Greek Affairs official.

Off Campus Activity?

Address/Location and contact name of owner or manager of facility.

Name, address and contact number of Chapter Officers.

Name, address and contact number of Chapter Administrator. (If applicable).

Name, address and contact number of MSP Chairman. (If applicable).

Name, address and contact number of witnesses.

Report should be emailed and mailed to Grand Counselor - Omega Psi Phi Fraternity, Inc.

Email Address:	IHQ-Legal@opphf.org
Address:	Grand Counselor Omega Psi Phi Fraternity, Inc. 3951 Snapfinger Parkway Decatur, Georgia 30035
Fax Number:	404-284-0333