



TARASOFF WARNING LETTER

Date: _____

To: _____

NAME: _____

ADDRESS: _____

We are authorized by law to inform you that _____ (person making threat)
has made a serious threat to harm you. During an evaluation on _____ (date of evaluation)
the person listed above made the following threat (describe threat made):

_____ was notified of this threat on _____.
(name of law enforcement agency) (date notified)

Officer/Deputy _____ Badge/Id # _____ took the call.
(officer's/deputy's name) (officer's/deputy's badge #)

The phone number for the above listed officer is _____ and the case
(law enforcement agency phone #)
number or log number assigned is _____.
(case number or log number)

If you have any questions, please contact me at: _____
(phone number)

Name/Title: _____
(name and title of person mailing or emailing letter)

CC: _____
(copy of letter sent to)

County of San Luis Obispo Health Agency