OFFENSE RE	.i Oiti				PAGE				DOMEO	IIC VIOLENCE			
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TNO 450000 2. INCIDENT #			· · · · · · · · · · · · · · · · · · ·		REPORTING OF	EICEE	· ·	BADGE		1 D #			
Z. INCIDENT #					AEPOHING OF	TIUEF	\ 	DADGE	# 	10#			
REPORT TYPE	SUPPLEM ATTACH		INCIDEN	IT	5 DATE	6	TIME	DAY OF WEEK	TODAY'S DATE	ZONE			
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SUPPLEMEN	VT		RANGE	:	То	_ To_		То		GHID			
INCIDENT STA	TUS 3 EXCEP	TIONAL CI	EARANC	E DATE		4. T	IME DISPATCI	HED					
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☐ ACTIVE	UNFOUND	CASE PR	IORITY	DATE	DUE	ASSIG	NED TO	AUTHORIT	ΓY	DATE			
☐ INACTIVE	CLOSED				OFFE	Tal=		N-Markey - Makeyer					
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7 UCR OFFEN	SE CODE				OFFENSE		RELATED OFFENSE	OFFENSE RE WARRANT #	LATED TO TO	A# TCA			
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15 (*) ALARM	WAS	······································	16	(*) POI	NT OF ENTRY?				ICE AT SCENE				
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										V	ICT	IM.		Ċ.		- sylvi	Till Made about						*********		
22 OFFENSE(S) AGAINST VICTIM (UCR CODE(S))				VICTIM #1 NAME (LAST, FIRST, MIDDLE) (H) PHONE											☐ STATEMENT										
						ADDRE	ADDRESS (STREET, CITY, STATE, ZIP)																		
23 (*	TYP	E OF VIC	TIM	***************************************		EMPLOYMENT						RKPHO	1E	***********			DA	TE OF B	RTH	,	$\neg$	50 AGE SS#			
24 0	FFEN	ISE(S) AC	GAINST	VICTIM	***************************************	VICTIM #2 NAME								(H) PI	HONE	***************************************	<u> </u>					☐ STATEMEN	T		
"	acú (	,ODE(9))					FIRST, MID			310)										·					
23 (*	TYP	E OF VIC	TIM			EMPLO		LL1, O111, 0	JINIE,	ZIP)	T				<del></del>		<del>,</del>						~		
<u> </u>			· ///				TIVICIVI				WOH	RKPHON	NE.				DA.	TE OF B	RTH			50 AGE SS#			
1 2 2 24 SEX					HISPANIC				27 RESIDENT		1	+	2		THE VI	2	1	7	-	28 IS 7	THE VICTIM	1	2		
25 (*)	RAC	E				NON-H	ISPANIC WN			NON-RESI			#		]		YES NO		╁		A C	OLLEGE	YES	YES	
29 (*) INJURY TYPE (SUBMIT UP TO 5)					AGGRAVATED ASSAULT / HOMICIDE     NEGLIGENT     JUSTIFIABLE HOMICIDE & ADDITIONAL     JUSTIFIABLE HOMICIDE IF APPLICABLE					31 1	F YES	ON#	28, LIS	ST NA	ME OF C	OLLE	GE/UNI\	ERS			UDENT  IF COLLEGE:  STUDENT	1 110			
						1	30-A(*) AGGRAVATED ASSAULT / HOMICIDE				#1 _	· · · · · · · · · · · · · · · · · · ·	·····					<del></del>			-	FACULTY/STAFF			
1						1	CIRCUMST	ANCES			#2_										_	SECURITY D			
2		Third				#:					ADDITIONAL JUSTIFIABLE HOMICIDE (CHECK ONE IF ITEM 30C IS CHECKED)										}				
13 11	E VIG	TIM ALSO		OMPLAII 2	NANT	30-B(*) NEGLIGENT MANSLAUGHTER (SUBMIT ONE)  #1 #2  4 JUSTIFIABLE HOMICIDE (SUBMIT ONE)					1	2	-,												
YES NO		-		-	-						☐ ☐ A ATTACKED POLICE OFFICER AND THAT OFFICER KILL										_LED				
	D THI	E OFFEN	SE OCC	UR ON	***************************************						CRIMINAL  CRIMINAL  CRIMINAL  D  B  ATTACKED FELLOW OFFICER AND THAT OFFICER KI									III ED					
YES		1		2			RIMINAL KI	ILLED BY P	PRIVAT	E				CRI	IMINA	\L \L				., , , , , ,		111111 01110			
NO		•		***************************************							☐ ☐ C ATTACKED CIVILIAN ☐ ☐ D ATTEMPTED FLIGHT FROM A CRIME														
33 DC	MES	TIC VIOL	ENCE			1	#1			•	1.														
		1		2			RIMINAL KI OLICE OFF												1018	VOF.	A C	RIME			
YES NO					-						-					ED AR									
						10	#2						G	UNA	ABLE	וט ט	EIEI	MINE	/ N	OLF	NO	UGH INFOR	RMATI	NC	
35 TIM	E OF	ASSAUL	T				36 (*) TY	PE OF VEH	IICLE	L.	EOK		OFF	ICER	ON AS	SIGNM	ENT					38 TYPE OF LI	EOKA		
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40 NA	ΛΕ (L	AST)		<del></del>	(	FIRST)					DDLE)	·····	···	**********				AUTO	TAMC	TIC WE	APC	ON)			
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SS#				OLN#			ST			P	ното#						Τ,	THER		Paration			######################################	***************************************	

OFFENSE REPORT		PAGE 3	DOMESTIC VIOLE	ENCE [
	DOMES	STIC INFORMATION		
•• IS T	HERE AN EXISTING PROTE		NO	<u> </u>
	WAS THE VICTIM S	· · · · · · · · · · · · · · · · · · ·		
DDODEDTY DAMAGE EV		TYPE: HOUSE APAR		□ N/A
FROFER I I DAMAGE E	VIDENT! TES NO	THE GITCOUL GALARY	THERE OTTER	<b>—</b> 1071
		\$	/D	-
(Damage description)		(Damage Value)	(Property Owner's name)	
Has suspect struck victim	before? ☐ Yes ☐ No ☐ N//	A If yes, when?		
Statements or threats mad	de? Yes No No	If yes, by whom?		
VICTIM	RELATIONSHIP	HISTORY		
SUSPECT:	☐ Dating	☐ History of Domestic Violence	☐ Death of Victim	
	☐ Married	☐ Medical Treatment of Victim	☐ Charges Brought by Vict	tim
	☐ Divorced	☐ Referral to a Shelter	☐ Charges Brought by Office	cer
	☐ Shared Siblings	☐ Also Violence to Children	Sexual Abuse to Child	
	☐ Co-Habitant	☐ Referral to DHS		
	Other		American de la companya del la companya de la compa	
VICTIM MUST CIRCLE A	NSWERS TO THESE QUESTION	NS.		
		re I was struck	Yes No	
		ruck		
		he person who struck me		
•	•	to strike me		
4	•			
	•			
		tim unable to mark this position		
i affirm this information is	true and correct, and I received to	he domestic violence statement from the	s responding officer.	
Victims Signature		Date	· ·	
A copy of the Victim of DOM	ESTIC VIOLENCE RIGHTS has been	read to me and a copy left in my possession	ı, along with the phone number of th	ne shelter
Further, I (ACCEPT / DECLIN	IE) the officer's offer of transportation	to the location where arrest warrants are issu	red. I (ACCEPT / DECLINE) the office	cer's offe
of transportation to a shelter	or at the place of safety.		•	
Victims Signature		Date		
14/	Van No	Obtained by		
Warrant Obtained Arrest Made:	Yes No Yes No	Obtained by: Explain:		
Allest Wade.	100	Explain.		
		NARRATIVE		
			<u> Periodicina de la colorio de la colorio de la filoso de la colorio de </u>	
				***************************************
		<u> 1988 - Anna ann an Airsteann an Airsteann an Airsteann an Airsteann an Airsteann an Airsteann an Airstean</u> A		
		·		

OFFENSE REPO	ORT			PAGE 4 DOMESTIC VIOLENCE	ΕQ
	DOMES	STIC VIOLE	ICE (	CHECK LIST AND BODY DIAGRAM	
☐ Victim	Identify all sit and compla	es of injuries ints of pain		Victim's rights sheet given to victim. Any and all weapons used in domestic violence assaults which ar confiscated T.C.A. 36-3-620 List confiscated weapons brief description:	'e
□ Victim □ Suspect				Arrest made by officer. Bond Release Notification filed. Private Prosecutor  Ourt Preparation  Written and signed statement taken from suspect. Written and signed statement taken from victim. Written and signed statement taken from witnesses. Photographs taken of victim. Photographs taken of property damage.  Sistance requested from Victim/Witness Coordinator  Photographs of victim 24-48 hours after assault. E-911 tape of initial call. Witness subpoenas Victim subpoenas List subpoenas needed (name and address)  Number of prior calls to this address. Victim needs referral to a shelter.	
SOL	/ABILITY F	ACTOR •	RE	PORTING OFFICER SHALL COMPLETE	
	(S) ATTACHED PHYSICAL EVIDEI N BE IDENTIFIED	SUS NCE SUS CAN	SPECT N. SPECT C. I CRIME ROL INV	AN BE LOCATED SUSPECT VEHICLE DESCRIBED BE SOLVED WITH REASONABLE FOLLOW-UP? 'ESTIGATION CONTINUING?	E)
T.	N			DMONITION	
KNOWING THAT T THE OFFENSE OF VIOLATION OF TH AND 29 DAYS, A F	THE OFFENSE OR INCIDENT, OR KI	REPORT TO A LAW E INCIDENT DID NOT NOWING THE INFOR LL BE A CLASS A MIS EED \$2,500.00 OR BO	NFORCE OCCUR, MATION DEMEAN OTH.	TRUE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT IT SHALL BE EMENT OFFICER AN OFFENSE OR INCIDENT WITHIN THE OFFICER'S CONCEI, OR KNOWING THE PERSON REPORTING HAS NO INFORMATION RELATING TO RELATING TO THE OFFENSE OF INCIDENT IS FALSE. (T.C.A. 39-16-502)  NOR, WHICH CARRIES A JAIL SENTENCE OF NOT GREATER THAN 11 MONTHS	го
DATE AND TIME				· :	_
REPORTING OFFICER		ID	#	APPROVING SUPERVISORID#	