

# MAJOR CR / AE SCENE LOG

Case #: 8531

19ISPC008108

Date: 6/16/19 Time: 0345 Location: 110 W Wynn

Classification: OIS Officer: B. Canaracci PN: 2289

Name	Rank	Agency	Reason For Entry	Time In	Time Out
Dowling	PFC	SBPD	—	347	0647 <del>0647</del>
Varee		SOAD	—	347	0400
Pickard		SBPD		347	0400
S. Ryan		SBPD		347	0400
Hilpaka		SBPD		347	0400
K. Bilinski		SBPD		347	0645
B. Canaracci		SBPD		0347	0600
S. Ryan		SBPD		0347	0600
J. Wolff	PFC	SBPD	Escort	0725	0727
Knoorwetter	PFC	SBPD		0751	0804

# MAJOR CRIME SCENE LOG

Case #: 19-853A

Date: 06.16.19 Time: 0345 Location: 110 N. Williams

Classification: OIS Officer: Pfc. Wolff PN: 443

Name	Rank	Agency	Reason For Entry	Time In	Time Out
Cook	Pfc.	MHU	Investigation	0805	
BRESQRECK	MHU	MHU	Investigation	0805	
Frank	Pcos.	Pcos	Investigation	0805	0819



# SOUTH BEND POLICE DEPARTMENT - CASE REPORT

3

Page <u>1</u> of <u>2</u>	U.C.R Classification <b>AGGRAVATED ASSLT/FIREARM</b>	CASE NO <u>19</u> <u>8539</u>
Report Type <b>AGGRAVATED ASSAULT</b>	Location Type <b>PARKING LOT/GARAGE</b>	Date Reported <u>06/16/2019</u>
Location of Occurrence <b>110 N WILLIAM ST SOUTH BEND, IN</b>	Can Suspect Be Identified Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Time Reported <u>05:07</u>
Offense Begin Date <u>06/16/2019</u>	Offense Begin Time <u>03:33</u>	Offense End Date <u>06/16/2019</u>
Offense End Time <u>03:35</u>	Victim <b>UNKNOWN, PERSON</b>	
Sex <b>M</b>	Race <b>B</b>	Age
Date of Birth	Social Security Number	
Address	Home Phone <b>0-</b>	Employer Name / Address
Complainant	Employer Phone	
Sex	Race	Age
Date of Birth	Social Security Number	
Home Phone	Address	
Employer Name / Address	Employer Phone	

### SUSPECT INFORMATION

Name <b>ONEILL, RYAN</b>	Address <b>701 W SAMPLE ST SOUTH BEND, IN 46601</b>	
Home Phone	Cell Phone	Employer Phone
Employer Name / Address		
Date of Birth <u>11/26/1975</u>	Social Security Number	Sex <b>M</b>
Race <b>W</b>	Age <u>43</u>	Build
Height	Weight	Hair
Eyes	School Name / Address	
Weapons		
Arrest #	Arrest Date	Arrest Time
Arrest Location		
Arrest Charges	Injury Type	

Name	Address	
Home Phone	Cell Phone	Employer Phone
Employer Name / Address		
Date of Birth	Social Security Number	Sex
Race	Age	Build
Height	Weight	Hair
Eyes	School Name / Address	
Weapons		
Arrest #	Arrest Date	Arrest Time
Arrest Location		
Arrest Charges	Injury Type	

### VEHICLE INFORMATION

Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> Victimzied <input type="checkbox"/> Suspect <input type="checkbox"/> Towed <input type="checkbox"/> ATL <input type="checkbox"/>							
Year	Make	Model	Style	Color	License Number	License Year	State
VIN			Value	Towed By / Towed To			
Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> Victimzied <input type="checkbox"/> Suspect <input type="checkbox"/> Towed <input type="checkbox"/> ATL <input type="checkbox"/>							
Year	Make	Model	Style	Color	License Number	License Year	State
VIN			Value	Towed By / Towed To			

### CONNECTING CASE #'S

--	--	--	--	--	--	--	--



# SOUTH BEND POLICE DEPARTMENT - CASE REPORT

4

Page 2 of 2	<input checked="" type="checkbox"/> INCIDENT VIDEO TAPED	MVR TAPE NO 3233	Case No 19 8539
-------------	--	------------------	-----------------

### WEATHER/MISC

Lighting <b>DARK</b>	Weather <b>DARK</b>	Dispatch Location <b>110 N WILLIAM ST SOUTH BEND, IN</b>
Point of Entry	Point of Exit	Means of Entry
Tools used	Entry Direction	Exit Direction

### NARRATIVE

Provided a statement to CMHU (County Metro Homicide).  
 Generating a case report for use of force.  
 Below are the listed officer's no generating reports as they provided interview statements at CMHU as well:  
 Pfc. Lindzy  
 Pfc. Canarecci  
 Pfc. Knepper

"I AFFIRM, UNDER THE PAINS AND PENALTIES OF PERJURY, THAT THE AFOREMENTIONED FACTS ARE TRUE AND CORRECT AS PRESENTED TO AND /OR OBSERVED BY ME."

Electronic Signature of Reporting Officer <b>HIIPAKKA, RYAN-2173</b>	Date <b>06/16/2019</b>
Status: Pending <input checked="" type="checkbox"/> Unfounded <input type="checkbox"/> Arrest Adult <input type="checkbox"/> Arrest Juvenile <input type="checkbox"/> Exceptional Adult <input type="checkbox"/> Exceptional Juvenile <input type="checkbox"/> Admin Close <input type="checkbox"/>	Approving Supervisors Signature <b>HIIPAKKA, RYAN</b> P.N. <b>2173</b>



# SOUTH BEND POLICE DEPARTMENT - CASE SUPPLEMENTAL REPORT

CASE NO 19 8539-001

Page 1 of 2	Supplemental / Recovery Location 110 N WILLIAM ST SOUTH BEND, IN	Report Type ADDL INFO	Date Reported 06/16/2019	Time Reported 05:16
Victim UNKNOWN, PERSON		Address		

Name		Address							
Home Phone	Cell Phone	Employer Phone		Employer Name / Address					
Date of Birth	Social Security Number	Sex	Race	Age	Build	Height	Weight	Hair	Eyes
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No		School Name / Address			Weapons				
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No		Arrest #	Arrest Date	Arrest Time	Arrest Location				
Arrest Charges					Injury Type				

### VEHICLE INFORMATION

Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> Victimized <input type="checkbox"/> Suspect <input type="checkbox"/> Towed <input type="checkbox"/> ATL <input type="checkbox"/>									
Year	Make	Model	Style	Color	License Number	License Year	State		
VIN	Value			Towed By / Towed To					

### PROPERTY INFORMATION

Data/Code: F-Found B-Burned C-Counterfeit D-Damaged R-Recovered L-Lost S-Stolen O-Other/Unknown  
E-Evidence PP-Personal Property

Code	Property Type	Brand Name	Model	Serial Number	Value	Recovered

### NARRATIVE

**BWD 2259 USED SUMMARY**

On 06/16/19 at approx 0323 hrs, I Officer Canarecci responded to 110 N Williams Street Central High Apartments on a suspicious person breaking windows in the parking lot. Prior to my arrival, Sergeant Oneal had called out that he was on scene and shots had been fired.

I arrived on scene shortly thereafter and assisted with handcuffing and searching the suspect who had a white cell phone and charger, miscellaneous change and a purple wallet on him. Those items were left on the ground to be photographed and collected by assisted Officers.

Electronic Signature of Reporting Officer: CANARECCI, BENJAMIN-2259 Date: 06/16/2019

Signature of Approving Supervisor: Date: 06/16/2019



SOUTH BEND POLICE DEPARTMENT - NARRATIVE SUPPLEMENTAL

Page 2 of 2	Report Type ADDL INFO	<input type="checkbox"/> INCIDENT VIDEO TAPED	Case No 19	8539-001
-------------	--------------------------	---	------------	----------

*Due to the severity of the gunshot wound the suspect was immediately transported to 615 N Michigan Memorial Hospital by assisting Officers. I stood by two spent casings and a knife located on scene until their locations could be marked with evidence markers.  
I also assisted by creating a major crime scene log. I stood by until released by the Metro Homicide Unit.  
Disp#19-43663  
This Officer reports nothing further.*

<small>I WARRANT UNDER MY PAINS AND BENEFITS OF OFFICERY THAT THE FOREMENTIONED FACTS ARE TRUE AND CORRECT AS PRESENTED TO AND/OR OBSERVED BY ME</small>		
Location Dispatched To	Date	Time
110 N WILLIAM ST SOUTH BEND, IN	06/16/2019	05:16
Electronic Signature of Reporting Officer	Date	
CANARECCI, BEN JAMIN-2259	06/16/2019	
Signature of Approving Supervisor	Date	
	06/16/2019	



7

# SOUTH BEND POLICE DEPARTMENT - CASE SUPPLEMENTAL REPORT

CASE NO 19 8539-002

Page 1 of 2	Supplemental / Recovery Location 110 N WILLIAM ST SOUTH BEND, IN	Report Type ADDL INFO	Date Reported 06/16/2019	Time Reported 05:19
Victim UNKNOWN, PERSON		Address		

Name		Address							
Home Phone	Cell Phone	Employer Phone		Employer Name / Address					
Date of Birth	Social Security Number	Sex	Race	Age	Build	Height	Weight	Hair	Eyes
School Name / Address		Weapons							
Arrest #		Arrest Date	Arrest Time	Arrest Location					
Arrest Charges		Injury Type							

### VEHICLE INFORMATION

Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> Victimized <input type="checkbox"/> Suspect <input type="checkbox"/> Towed <input type="checkbox"/> ATL <input type="checkbox"/>							
Year	Make	Model	Style	Color	License Number	License Year	State
VIN		Value	Towed By / Towed To				

### PROPERTY INFORMATION

Data/Code: F-Found B-Burned C-Counterfeit D-Damaged R-Recovered L-Lost S-Stolen O-Other/Unknown  
E-Evidence PP-Personal Property

Code	Property Type	Brand Name	Model	Serial Number	Value	Recovered

### NARRATIVE

\*\*\* BWD \*\*\*

On 6-16-19 while working as assigned Unit 327 I, PFC S. Ryan 2280, responded to 110 N. William St on an Officer Calling for Assistance.

Upon arrival I checked on the status and well being of involved officer(s), finding that they were not injured and that other Officers on scene were tending to the Suspect. I began securing the scene and putting up crime scene tape to ensure the scene be preserved. I began looking for vehicles in

Electronic Signature of Reporting Officer RYAN, SEAN-2280	Date 06/16/2019
Signature of Approving Supervisor	Date 06/16/2019



# SOUTH BEND POLICE DEPARTMENT - NARRATIVE SUPPLEMENTAL

Page 2 of 2	Report Type ADDL INFO	<input type="checkbox"/> INCIDENT VIDEO TAPED	Case No 19	8539-002
<p><i>the area which were involved in the original call which officer(s) were on scene investigating. While on scene I assisted in locating any evidence that would need to be marked or preserved for the investigation. Upon no longer being needed inside the perimeter I removed myself and remained on scene to secure the scene until such time as I was relieved.</i></p>				
<p><small>I AFFIRM UNDER THE PAINS AND PENALTIES OF PERJURY THAT THE FOREMENTIONED FACTS ARE TRUE AND CORRECT AS PRESENTED TO AND/OR OBSERVED BY ME.</small></p>				
Location Dispatched To		Date	Time	
110 N WILLIAM ST SOUTH BEND, IN		06/16/2019	05:19	
Electronic Signature of Reporting Officer		Date		
RYAN, SEAN-2280		06/16/2019		
Signature of Approving Supervisor		Date		
		06/16/2019		





# SOUTH BEND POLICE DEPARTMENT - CASE SUPPLEMENTAL REPORT

CASE NO 19-8539-003

Page 1 of 2	Supplemental / Recovery Location 110 N WILLIAM ST SOUTH BEND, IN 46601	Report Type ADDL INFO	Date Reported 06/16/2019	Time Reported 05:20
Victim UNKNOWN, PERSON		Address		

Name		Address							
Home Phone	Cell Phone	Employer Phone		Employer Name / Address					
Date of Birth	Social Security Number	Sex	Race	Age	Build	Height	Weight	Hair	Eyes
School Name / Address		Weapons							
Arrest #		Arrest Date	Arrest Time	Arrest Location					
Arrest Charges		Injury Type							

### VEHICLE INFORMATION

Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> Victimized <input type="checkbox"/> Suspect <input type="checkbox"/> Towed <input type="checkbox"/> ATL <input type="checkbox"/>									
Year	Make	Model	Style	Color	License Number	License Year	State		
VIN		Value	Towed By / Towed To						

### PROPERTY INFORMATION

Data/Code: F-Found B-Burned C-Counterfeit D-Damaged R-Recovered L-Lost S-Stolen O-Other/Unknown  
E-Evidence PP-Personal Property

Code	Property Type	Brand Name	Model	Serial Number	Value	Recovered

### NARRATIVE

MVR AND BWD not used

\*\*\* ADDITIONAL INFORMATION \*\*\*

On June 16, 2019, at approximately 0323 hours, I Pfc. Pickard (while working in uniform as unit #320) responded to the Central High Apartments (110 N. William St) reference shots fired and an officer needing help. Upon my arrival, I helped secure the scene by placing Police Caution Tape around the location and stood by for scene security.

Electronic Signature of Reporting Officer PICKARD,LUKE-2227	Date 06/16/2019
Signature of Approving Supervisor	Date 06/16/2019



10

# SOUTH BEND POLICE DEPARTMENT - NARRATIVE SUPPLEMENTAL

Page 2 of 2	Report Type ADDL INFO	<input type="checkbox"/> INCIDENT VIDEO TAPED	Case No 19	8539-003
Nothing further.				
I AFFIRM UNDER PENALTY OF PERJURY THAT THE AFOREMENTIONED FACTS ARE TRUE AND CORRECT AS REPRESENTED AND OBSERVED BY ME.				
Location Dispatched To		Date	Time	
110 N WILLIAM ST SOUTH BEND, IN 46601		06/16/2019	05:20	
Electronic Signature of Reporting Officer		Date		
PICKARD,LUKE-2227		06/16/2019		
Signature of Approving Supervisor		Date		
		06/16/2019		



# SOUTH BEND POLICE DEPARTMENT - CASE SUPPLEMENTAL REPORT

11

CASE NO 19 8539-004

Page 1 of 2	Supplemental / Recovery Location 110 N WILLIAM ST SOUTH BEND, IN	Report Type ADDL INFO	Date Reported 06/16/2019	Time Reported 05:22
Victim UNKNOWN, PERSON		Address		

Name				Address							
Home Phone		Cell Phone		Employer Phone		Employer Name / Address					
Date of Birth		Social Security Number		Sex	Race	Age	Build	Height	Weight	Hair	Eyes
School Name / Address						Weapons					
Arrest #		Arrest Date		Arrest Time		Arrest Location					
Arrest Charges						Injury Type					

### VEHICLE INFORMATION

Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> Victimized <input type="checkbox"/> Suspect <input type="checkbox"/> Towed <input type="checkbox"/> ATL <input type="checkbox"/>							
Year	Make	Model	Style	Color	License Number	License Year	State
VIN			Value	Towed By / Towed To			

### PROPERTY INFORMATION

Data/Code: F-Found B-Burned C-Counterfeit D-Damaged R-Recovered L-Lost S-Stolen O-Other/Unknown  
E-Evidence PP-Personal Property

Code	Property Type	Brand Name	Model	Serial Number	Value	Recovered

### NARRATIVE

On 06-16-19 while working as unit 324, in full police uniform and in a fully marked patrol car, made the scene of 110 N. William in reference to a shots fired call out by Sgt. O'Neil. Upon arrival I observed several other officers assisting a male black into the back seat of Pfc. Kneppers patrol car. I then went and checked on the status of O'Neil.

After making sure O'Neil was not injured, I then directed Officers Vance and Ryan to put up crime scene tape to help secure the area. I then had dispatch contact street 11 to put up barricade's on Colfax and Williams St. After securing the scene I then did a walk through the parking lot and

Electronic Signature of Reporting Officer: DONLON, TYLER-2177 Date: 06/16/2019

Signature of Approving Supervisor: Date: 06/16/2019



12

# SOUTH BEND POLICE DEPARTMENT - NARRATIVE SUPPLEMENTAL

Page 2 of 2	Report Type ADDL INFO	<input type="checkbox"/> INCIDENT VIDEO TAPED	Case No 19	8539-004
<p>found that a White Toyota Highlander had a broken out passengers side window. No other vehicles in the lot had any broken windows or appeared to have been broken into. One other vehicle parked on William St. had a broken out drivers side window and that was a Gray in color Toyota Scion.</p> <p>I then provided scene security until MHU arrived and was relieved by day shift officers.</p> <p>This officer has nothing further to report at this time.</p>				
<p><small>I AFFIRM UNDER THE PAINS AND PENALTIES OF PERJURY THAT THE ABOVE MENTIONED FACTS ARE TRUE AND CORRECT AS PRESENTED TO AND/OR NOT SEEN BY ME.</small></p>				
Location Dispatched To		Date	Time	
110 N WILLIAM ST SOUTH BEND, IN		06/16/2019	05:22	
Electronic Signature of Reporting Officer		Date		
DONLON, TYLER-2177		06/16/2019		
Signature of Approving Supervisor		Date		
		06/16/2019		



13

# SOUTH BEND POLICE DEPARTMENT - CASE SUPPLEMENTAL REPORT

CASE NO 19 8539-005

Page 1 of 2	Supplemental / Recovery Location 110 N WILLIAM ST SOUTH BEND, IN 46601	Report Type ADDL INFO	Date Reported 06/16/2019	Time Reported 05:24
Victim UNKNOWN, PERSON		Address		

Name		Address		
Home Phone	Cell Phone	Employer Phone	Employer Name / Address	
Date of Birth	Social Security Number	Sex	Race	Age
			Build	Height
			Weight	Hair
				Eyes
School Name / Address		Weapons		
Arrest #	Arrest Date	Arrest Time	Arrest Location	
Arrest Charges		Injury Type		

### VEHICLE INFORMATION

Stolen  Recovered  Victimized  Suspect  Towed  ATL

Year	Make	Model	Style	Color	License Number	License Year	State
VIN		Value	Towed By / Towed To				

### PROPERTY INFORMATION

Data/Code: F-Found B-Burned C-Counterfeit D-Damaged R-Recovered L-Lost S-Stolen O-Other/Unknown  
E-Evidence PP-Personal Property

Code	Property Type	Brand Name	Model	Serial Number	Value	Recovered

### NARRATIVE

**BODY WORN CAMERA USED PN 2289**

**SUMMARY**

On 06/16/19 while working as unit 345 at approx 0325 hrs, I Officer Vance responded to 110 N Williams Street Central High Apartments on a suspicious person breaking windows in the parking lot. Prior to my arrival, Sergeant O'neal had called out that he was on scene and shots had been fired.

Electronic Signature of Reporting Officer VANCE, JEFFERY-2289	Date 06/16/2019
Signature of Approving Supervisor	Date 06/16/2019



14

# SOUTH BEND POLICE DEPARTMENT - NARRATIVE SUPPLEMENTAL

Page 2 of 2	Report Type ADDL INFO	<input type="checkbox"/> INCIDENT VIDEO TAPED	Case No 19	8539-005
-------------	--------------------------	---	------------	----------

*When I arrived on scene the suspect had already been cuffed. I assisted with putting the suspect in the back of an assisting Officer's car so he could be immediately transported to 615 N Michigan Street (Memorial Hospital), due to the severity of his gunshot wound.*

*I then helped secure the crime scene, and put up crime scene tape around the apartment complex's Northwest parking lot, and surrounding area. I then stood by on scene blocking the North entrance/exit of the parking lot until I was released by the Metro Homicide Unit.*

NOTHING FURTHER AT THIS TIME

I AFFIRM UNDER THE PAINS AND PENALTIES OF PERJURY THAT THE FOREMENTIONED FACTS ARE TRUE AND CORRECT AS PRESENTED TO AND/OR OBSERVED BY ME			
Location Dispatched To	Date	Time	
110 N WILLIAM ST SOUTH BEND, IN 46601	06/16/2019	05:24	
Electronic Signature of Reporting Officer	Date		
VANCE, JEFFERY-2289	06/16/2019		
Signature of Approving Supervisor	Date		
	06/16/2019		



15

# SOUTH BEND POLICE DEPARTMENT - CASE SUPPLEMENTAL REPORT

Page <b>1</b> of <b>3</b>		Supplemental / Recovery Location <b>110 N WILLIAM ST SOUTH BEND, IN</b>	Report Type <b>TECH REPT</b>	CASE NO <b>19 8539-006</b>
Victim <b>UNKNOWN, PERSON</b>		Date Reported <b>06/16/2019</b>		Time Reported <b>05:30</b>
		Address		

Name		Address		
Home Phone	Cell Phone	Employer Phone	Employer Name / Address	
Date of Birth	Social Security Number	Sex	Race	Age
		Build	Height	Weight
		Hair	Eyes	
School Name / Address		Weapons		
Arrest #	Arrest Date	Arrest Time	Arrest Location	
Arrest Charges		Injury Type		

### VEHICLE INFORMATION

Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> Victimized <input type="checkbox"/> Suspect <input type="checkbox"/> Towed <input type="checkbox"/> ATL <input type="checkbox"/>									
Year	Make	Model	Style	Color	License Number	License Year	State		
VIN		Value	Towed By / Towed To						

### PROPERTY INFORMATION

Data/Code: F-Found B-Burned C-Counterfeit D-Damaged R-Recovered L-Lost S-Stolen O-Other/Unknown  
E-Evidence PP-Personal Property

Code	Property Type	Brand Name	Model	Serial Number	Value	Recovered
<b>E</b>	<b>DAMAGE</b>	<b>DIGITAL</b>			<b>\$0.00</b>	<b>\$0.00</b>

### NARRATIVE

**BWD USED**

**TECH REPORT**

**EVIDENCE:**  
**(102) Photographs Taken**  
**1-4 Sgt. O'Neill**  
**5-73 Scene**

Electronic Signature of Reporting Officer <b>BILINSKI, KYLE-2205</b>	Date <b>06/16/2019</b>
Signature of Approving Supervisor	Date <b>06/16/2019</b>



# SOUTH BEND POLICE DEPARTMENT - NARRATIVE SUPPLEMENTAL

Page 2 of 3	Report Type <b>TECH REPT</b>	<input type="checkbox"/> INCIDENT VIDEO TAPED	Case No 19	8539-006
-------------	---------------------------------	---	------------	----------

74-85 Vehicle (SBU536) North End of Lot  
 86-99 Vehicle (221ZTX) Parked On Williams St  
 100-102 Scene

While working as unit 351, on 06-16-19, at approximately 0335 hrs. I responded to 110 N Williams St reference a call of an officer calling out shots fired. Once I arrived at 110 N Williams, I found that other officers had already placed crime scene tape up, blocking the street (William St) and the parking lot of 110 N Williams.

I was asked by Sgt. Hiipakka to take photographs of Sgt. O'Neill. I took overview photographs of Sgt. O'Neill and of his left forearm. I also placed evidence markers near items of evidence. EM 1 was of a casing near the rear of Sgt. O'Neill's vehicle. EM 2 was of a casing out from Sgt. O'Neill's vehicle's rear passenger side tire. EM 3 was of a knife near Sgt. O'Neill's vehicle's passenger side rear tire. EM 4 was of a tan purse in front of Sgt. O'Neill's vehicle.

I observed a cell phone/charging cables and a small wallet/purse behind a white SUV JFG645. On the rear hatch of this vehicle, I also observed what appeared to be smeared blood to the left of the license plate.

Next to the white SUV (JFG645) was a dark colored Honda (VTK152) with the driver door open.

Further to the north in the parking lot, officers observed a white SUV (SBU536) with the front passenger door window shattered.

On William St. in front of the main door for 110 N William, officers located a vehicle (221ZTX) with the driver door window shattered.

I took overview photographs of the scene, mentioned items, and mentioned vehicle damage.

I stayed on scene to assist with scene security and advised Ofc. Canarecci to start a crime scene log. Once, MHU arrived, I gave Investigator Slater a copy of the photographs (copied SD card).

Once I was informed that I was no longer needed, I transported my SD card to the South Bend Police Department to turn in. I placed the SD card containing photographs into a manila photograph evidence envelope, sealed and marked with KJB2205.

Nothing Further

I AFFIRM, UNDER THE PAINS AND PENALTIES OF PERJURY, THAT THE AFOREMENTIONED FACTS ARE TRUE AND CORRECT AS PRESENTED TO AND/OR OBSERVED BY ME.

Location Dispatched To <b>110 N WILLIAM ST SOUTH BEND, IN</b>	Date <b>06/16/2019</b>	Time <b>05:30</b>
Electronic Signature of Reporting Officer <b>BILINSKI, KYLE-2205</b>	Date <b>06/16/2019</b>	
Signature of Approving Supervisor	Date <b>06/16/2019</b>	





17

# SOUTH BEND POLICE DEPARTMENT - CASE SUPPLEMENTAL REPORT

Page 1 of 2	Supplemental / Recovery Location 110 N WILLIAM ST SOUTH BEND, IN	Report Type ADDL INFO	CASE NO 19 8539-007	Date Reported 06/16/2019	Time Reported 05:31
Victim UNKNOWN, PERSON		Address			

Name		Address							
Home Phone	Cell Phone	Employer Phone	Employer Name / Address						
Date of Birth	Social Security Number	Sex	Race	Age	Build	Height	Weight	Hair	Eyes
School Name / Address		Weapons							
Arrest #	Arrest Date	Arrest Time	Arrest Location						
Arrest Charges		Injury Type							

### VEHICLE INFORMATION

Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> Victimized <input type="checkbox"/> Suspect <input type="checkbox"/> Towed <input type="checkbox"/> ATL <input type="checkbox"/>							
Year	Make	Model	Style	Color	License Number	License Year	State
VIN	Value	Towed By / Towed To					

### PROPERTY INFORMATION

Data/Code: F-Found B-Burned C-Counterfeit D-Damaged R-Recovered L-Lost S-Stolen O-Other/Unknown  
E-Evidence PP-Personal Property

Code	Property Type	Brand Name	Model	Serial Number	Value	Recovered

### NARRATIVE

While working as patrol unit 390, I responded to the area of N William St reference a shooting. I was advised by officer's that they would be loading the injured party in a vehicle and transporting him. They needed intersections covered to safely transport him. I grabbed a few intersections and assisted in putting the injured party on a gurney once he arrived at the hospital. Nothing further.

Electronic Signature of Reporting Officer KUKLA, TRAVIS-2234	Date 06/16/2019
Signature of Approving Supervisor	Date 06/16/2019



# SOUTH BEND POLICE DEPARTMENT - CASE SUPPLEMENTAL REPORT

CASE NO 19 8539-008

Page 1 of 2	Supplemental / Recovery Location 110 N WILLIAM ST SOUTH BEND, IN	Report Type ADDL INFO	Date Reported 06/16/2019	Time Reported 06:00
Victim UNKNOWN, PERSON		Address		

Name		Address							
Home Phone	Cell Phone	Employer Phone		Employer Name / Address					
Date of Birth	Social Security Number	Sex	Race	Age	Build	Height	Weight	Hair	Eyes
School Name / Address		Weapons							
Arrest #		Arrest Date	Arrest Time	Arrest Location					
Arrest Charges				Injury Type					

### VEHICLE INFORMATION

Stolen  Recovered  Victimzied  Suspect  Towed  ATL

Year	Make	Model	Style	Color	License Number	License Year	State
VIN		Value	Towed By / Towed To				

### PROPERTY INFORMATION

Data/Code: F-Found B-Burned C-Counterfeit D-Damaged R-Recovered L-Lost S-Stolen O-Other/Unknown  
E-Evidence PP-Personal Property

Code	Property Type	Brand Name	Model	Serial Number	Value	Recovered

### NARRATIVE

On today's date while off duty, I received a call from Sgt. Masterson informing me of a police officer involved shooting. Sgt. Masterson advised that Sgt. O'Neill had shot a suspect while servicing a call at Central High Apartments.

I then proceeded to make Memorial Hospital. I met with Sgt. O'Neill, who was being evaluated and treated. He suffered a very small abrasion to his left forearm from the unknown suspect throwing a knife at him.

Electronic Signature of Reporting Officer: GALEA, JOSEPH-495 Date: 06/16/2019

Signature of Approving Supervisor: Date: 06/16/2019



19

# SOUTH BEND POLICE DEPARTMENT - NARRATIVE SUPPLEMENTAL

Page 2 of 2	Report Type ADDL INFO	<input type="checkbox"/> INCIDENT VIDEO TAPED	Case No 19	8539-008
-------------	--------------------------	---	------------	----------

The unknown suspect was in surgery at the time of this report in critical condition. The suspect's identity is unknown at this time. I met with Commander Grezgrokek(MHU) at Memorial, and Sgt. O'Neill was taken to MHU office to give a statement .Once he was released from the hospital. The MHU is taking over the investigation. See additional reports for further.

<small>INFORMATION CONTAINED HEREIN IS UNCLASSIFIED EXCEPT WHERE SHOWN OTHERWISE. IT IS THE POLICE DEPARTMENT'S POLICY TO MAKE INFORMATION AVAILABLE TO THE PUBLIC UNLESS IT IS DETERMINED THAT DISCLOSURE WOULD BE DETRIMENTAL TO THE NATIONAL DEFENSE.</small>		
Location Dispatched To	Date	Time
110 N WILLIAM ST SOUTH BEND, IN	06/16/2019	06:00
Electronic Signature of Reporting Officer	Date	
GALEA, JOSEPH-495	06/16/2019	
Signature of Approving Supervisor	Date	
	06/16/2019	



# SOUTH BEND POLICE DEPARTMENT - CASE SUPPLEMENTAL REPORT

Page 1 of 2	Supplemental / Recovery Location 110 N WILLIAM SOUTH BEND, IN	Report Type ADDL INFO	Date Reported 06/16/2019	Time Reported 06:00
Victim UNKNOWN, PERSON		Address		

Name		Address							
Home Phone	Cell Phone	Employer Phone		Employer Name / Address					
Date of Birth	Social Security Number	Sex	Race	Age	Build	Height	Weight	Hair	Eyes
School Name / Address					Weapons				
Arrest #		Arrest Date	Arrest Time	Arrest Location					
Arrest Charges				Injury Type					

### VEHICLE INFORMATION

Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> Victimized <input type="checkbox"/> Suspect <input type="checkbox"/> Towed <input type="checkbox"/> ATL <input type="checkbox"/>								
Year	Make	Model	Style	Color	License Number	License Year	State	
VIN	Value		Towed By / Towed To					

### PROPERTY INFORMATION

Data/Code: F-Found B-Burned C-Counterfeit D-Damaged R-Recovered L-Lost S-Stolen O-Other/Unknown  
E-Evidence PP-Personal Property

Code	Property Type	Brand Name	Model	Serial Number	Value	Recovered

### NARRATIVE

On 6/16/2019 I responded to 110 N William reference to and officer involved shooting. When I arrived on scene I assisted with Scene Security and assisted Street Department blocking off the streets. Once there was enough man power on scene and the scene was secure, I returned to service and began answering calls. At approximately 0530 I was sent back to Central High Apartments to transport Officer Canarecci to Metro Homicide.

Electronic Signature of Reporting Officer JOHNSON, DAVID-2079	Date 06/16/2019
Signature of Approving Supervisor	Date 06/16/2019



**SOUTH BEND POLICE DEPARTMENT - CASE SUPPLEMENTAL REPORT**

CASE NO 19 8539-010

Page 1 of 2 Supplemental / Recovery Location 110 N WILLIAM ST SOUTH BEND, IN Report Type TECH REPT Date Reported 06/16/2019 Time Reported 06:45  
 Victim UNKNOWN, PERSON Address

Name Address  
 Home Phone Cell Phone Employer Phone Employer Name / Address  
 Date of Birth Social Security Number Sex Race Age Build Height Weight Hair Eyes  
 School Name / Address Weapons  
 Arrest # Arrest Date Arrest Time Arrest Location  
 Arrest Charges Injury Type

**VEHICLE INFORMATION**

Stolen  Recovered  Victimized  Suspect  Towed  ATL   
 Year Make Model Style Color License Number License Year State  
 VIN Value Towed By / Towed To

**PROPERTY INFORMATION**

Data/Code: F-Found B-Burned C-Counterfeit D-Damaged R-Recovered L-Lost S-Stolen O-Other/Unknown  
 E-Evidence PP-Personal Property

Code	Property Type	Brand Name	Model	Serial Number	Value	Recovered
F	DAMAGE	SANDISC			\$0.00	\$0.00

**NARRATIVE**

\* TECH SUPPLEMENT \*

EVIDENCE

(1) One photographic evidence envelope sealed with (KAL2271) containing one SD card with sixteen digital images.

Electronic Signature of Reporting Officer LINDZY, KYLE-2271 Date 06/16/2019  
 Signature of Approving Supervisor Date 06/16/2019



# SOUTH BEND POLICE DEPARTMENT - NARRATIVE SUPPLEMENTAL

Page 2 of 2	Report Type <b>TECH REPT</b>	<input type="checkbox"/> INCIDENT VIDEO TAPED	Case No 19	8539-010
-------------	---------------------------------	---	------------	----------

## NARRATIVE

While working as unit 309 on June 16, 2019 I was on scene at Memorial Hospital with an unidentified male black who had a gunshot wound to the chest. I used my department issued camera to take photographs of the victim while Memorial Hospital staff were treating him. In the photos I observed one gun shot wound to the males upper torso. I also captured photos South Bend Mechanical 711 which was used to transport the victim to the hospital.

I later transported the SD card to 701 W Sample Street South Bend, IN (South Bend Police Department) where it was placed in a photographic evidence envelope and sealed with my integrity seal (KAL2271).

I AFFIRM UNDER THE PAINS AND PENALTIES OF PERJURY THAT THE FOREMENTIONED FACTS ARE TRUE AND CORRECT AS PRESENTED AND/OR OBSERVED BY ME

Location Dispatched To	Date	Time
110 N WILLIAM ST SOUTH BEND, IN	06/16/2019	06:45
Electronic Signature of Reporting Officer	Date	
LINDZY, KYLE-2271	06/16/2019	
Signature of Approving Supervisor	Date	
	06/16/2019	



# SOUTH BEND POLICE DEPARTMENT - CASE SUPPLEMENTAL REPORT

CASE NO 19 8539-011

Page 1 of 1	Supplemental / Recovery Location 110 N WILLIAM ST SOUTH BEND, IN	Report Type TECH REPT	Date Reported 06/16/2019	Time Reported 12:31
Victim UNKNOWN, PERSON		Address		

Name		Address							
Home Phone	Cell Phone	Employer Phone		Employer Name / Address					
Date of Birth	Social Security Number	Sex	Race	Age	Build	Height	Weight	Hair	Eyes
<input type="checkbox"/> Yes <input type="checkbox"/> No	School Name / Address				Weapons				
<input type="checkbox"/> Yes <input type="checkbox"/> No	Arrest #	Arrest Date	Arrest Time	Arrest Location					
Arrest Charges				Injury Type					

### VEHICLE INFORMATION

Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> Vicimized <input type="checkbox"/> Suspect <input type="checkbox"/> Towed <input type="checkbox"/> ATL <input type="checkbox"/>							
Year	Make	Model	Style	Color	License Number	License Year	State
VIN			Value	Towed By / Towed To			

### PROPERTY INFORMATION

Data/Code: F-Found B-Burned C-Counterfeit D-Damaged R-Recovered L-Lost S-Stolen O-Other/Unknown  
E-Evidence PP-Personal Property

Code	Ploner/V/Type	Brand Name	Model	Serial Number	Value	Recovered

### NARRATIVE

Electronic Signature of Reporting Officer <b>BRICK, AARON-2052</b>	Date <b>06/16/2019</b>
Signature of Approving Supervisor	Date <b>06/16/2019</b>



24

# SOUTH BEND POLICE DEPARTMENT - CASE REPORT

Page 1 of 4	U.C.R. Classification <b>VANDALISM</b>	CASE NO 19 8533	
Report Type <b>VANDALISM TO VEHICLE</b>	Location Type <b>PARKING LOT/GARAGE</b>	Date Reported <b>06/16/2019</b>	Time Reported <b>03:23</b>
Location of Occurrence <b>110 N WILLIAM ST SOUTH BEND, IN</b>	Can Suspect Be Identified Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Offense Begin Date <b>06/16/2019</b>	Offense End Date <b>06/16/2019</b>
Offense Begin Time <b>03:24</b>	Offense End Time <b>03:24</b>		
Victim <b>POPPLEWEL, CHRISTOPHER FREDERICK</b>	Sex <b>M</b>	Race <b>W</b>	Age <b>43</b>
Date of Birth <b>10/29/1975</b>	Social Security Number [REDACTED]		
Address <b>110 N WILLIAM ST Apt: 207 SOUTH BEND, IN 46601</b>	Home Phone <b>(317) 496-8120</b>	Employer Name / Address	Employer Phone
Complainant <b>RYAN, SEAN</b>	Sex <b>M</b>	Race <b>U</b>	Age
Date of Birth	Social Security Number		Home Phone <b>0-</b>
Address <b>701 W SAMPLE ST SOUTH BEND, IN 46601</b>	Employer Name / Address		Employer Phone

## SUSPECT INFORMATION

Name <b>UNKNOWN, PERSON</b>		Address							
Home Phone	Cell Phone	Employer Phone		Employer Name / Address					
Date of Birth	Social Security Number	Sex <b>M</b>	Race <b>B</b>	Age	Build	Height	Weight	Hair	Eyes
Arrest #	Arrest Date		Arrest Time	Arrest Location					
Arrest Charges				Injury Type					

Name		Address							
Home Phone	Cell Phone	Employer Phone		Employer Name / Address					
Date of Birth	Social Security Number	Sex	Race	Age	Build	Height	Weight	Hair	Eyes
Arrest #	Arrest Date		Arrest Time	Arrest Location					
Arrest Charges				Injury Type					

## VEHICLE INFORMATION

Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> Victimized <input checked="" type="checkbox"/> Suspect <input type="checkbox"/> Towed <input type="checkbox"/> ATL <input type="checkbox"/>									
Year	Make	Model	Style	Color	License Number	License Year	State		
	<b>SCION</b>		<b>2D</b>	<b>BLK</b>	<b>221ZTX</b>	<b>2019</b>	<b>IN</b>		
VIN <b>ITKDE167X60075366</b>			Value <b>\$200.00</b>	Towed By / Towed To					
Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> Victimized <input checked="" type="checkbox"/> Suspect <input type="checkbox"/> Towed <input type="checkbox"/> ATL <input type="checkbox"/>									
Year	Make	Model	Style	Color	License Number	License Year	State		
<b>2007</b>	<b>TOYT</b>		<b>SUV</b>	<b>WHI</b>	<b>SBU536</b>	<b>2020</b>	<b>IN</b>		
VIN <b>JTEHW21A470043492</b>			Value <b>\$200.00</b>	Towed By / Towed To					

## CONNECTING CASE #S

19	8539						
----	------	--	--	--	--	--	--





25

# SOUTH BEND POLICE DEPARTMENT - CASE REPORT

Page 2 of 4	<input checked="" type="checkbox"/> INCIDENT VIDEO TAPED	MVR TAPE NO 2280	Case No 19 8533
-------------	--	------------------	-----------------

### WEATHER/MISC

Lighting	Weather	Dispatch Location 110 N WILLIAM ST SOUTH BEND, IN
Point of Entry	Point of Exit	Means of Entry
Tools used	Entry Direction	Exit Direction

### NARRATIVE

\*\*\* BWD 2280 \*\*\*

On 6-16-19 while working as assigned Unit 327 I, Officer S. Ryan 2280, responded to assist Officers working a Vandalism at 110 N. William St.

Upon arrival I located the listed vehicles which had been damaged or broken into by the Unknown Suspect.

The unknown suspect had been taken into custody and transported to Memorial Hospital and was unable to be identified at this time.

At this time I have only been able to locate Victim Popplewel, Christopher the owner of the listed Scion. Christopher stated that no property was taken the only damage was to the window of the Vehicle.

It is unknown at this time what property if any has been taken from the other vehicles.

"I AFFIRM, UNDER THE PAINS AND PENALTIES OF PERJURY, THAT THE AFOREMENTIONED FACTS ARE TRUE AND CORRECT AS PRESENTED TO AND /OR OBSERVED BY ME."

Electronic Signature of Reporting Officer RYAN, SEAN-2280		Date 06/16/2019	
Status	Pending <input checked="" type="checkbox"/> Arrest Adult <input type="checkbox"/> Exceptional Adult <input type="checkbox"/> Admin Close <input type="checkbox"/> Unfounded <input type="checkbox"/> Arrest Juvenile <input type="checkbox"/> Exceptional Juvenile <input type="checkbox"/>	Approving Supervisors Signature GALEA, JOSEPH	P.N. 495



# SOUTH BEND POLICE DEPARTMENT PERSON SUPPLEMENTAL

26

*Victim*

Name <b>HARRIS, DAVID</b>				Address <b>8881 SYCAMORE DR BREMEN, IN 46506</b>							
Home Phone ()-		Cell Phone		Employer Phone		Employer Name / Address					
Date of Birth <b>06/03/1937</b>		Social Security Number [REDACTED]		Sex <b>M</b>	Race <b>W</b>	Age <b>82</b>	Build	Height <b>509</b>	Weight <b>160</b>	Hair <b>BRO</b>	Eyes <b>BLU</b>
School Name / Address							Weapons				
Arrest #		Arrest Date		Arrest Time		Arrest Location					
Arrest Charges							Injury Type				

*Victim*

Name <b>MANVILLE, CELESTE</b>				Address <b>110 N WILLIAM ST Apt: 113 SOUTH BEND, IN 46545</b>							
Home Phone ()-		Cell Phone		Employer Phone		Employer Name / Address					
Date of Birth <b>12/18/1957</b>		Social Security Number [REDACTED]		Sex <b>F</b>	Race <b>W</b>	Age <b>61</b>	Build	Height	Weight	Hair	Eyes
School Name / Address							Weapons				
Arrest #		Arrest Date		Arrest Time		Arrest Location					
Arrest Charges							Injury Type				

*Victim*

Name				Address							
Home Phone		Cell Phone		Employer Phone		Employer Name / Address					
Date of Birth		Social Security Number		Sex	Race	Age	Build	Height	Weight	Hair	Eyes
School Name / Address							Weapons				
Arrest #		Arrest Date		Arrest Time		Arrest Location					
Arrest Charges							Injury Type				

*Victim*

Name				Address							
Home Phone		Cell Phone		Employer Phone		Employer Name / Address					
Date of Birth		Social Security Number		Sex	Race	Age	Build	Height	Weight	Hair	Eyes
School Name / Address							Weapons				
Arrest #		Arrest Date		Arrest Time		Arrest Location					
Arrest Charges							Injury Type				



# SOUTH BEND POLICE DEPARTMENT - VEHICLE SUPPLEMENTAL

Page 4 of 4 CASE NO 19 8533

## VEHICLE INFORMATION

<input type="checkbox"/> Stolen <input type="checkbox"/> Recovered <input checked="" type="checkbox"/> Victimized <input type="checkbox"/> Suspect <input type="checkbox"/> Towed <input type="checkbox"/> A/T/L							
Year	Make	Model	Style	Color	License Number	License Year	State
2016	HOND	CIV	4D	BLK	VTK152	2019	IN
VIN		Value		Towed By / Towed To			
19XFC2F51GE052450		\$200.00					

<input type="checkbox"/> Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> Victimized <input type="checkbox"/> Suspect <input type="checkbox"/> Towed <input type="checkbox"/> A/T/L							
Year	Make	Model	Style	Color	License Number	License Year	State
VIN		Value		Towed By / Towed To			

<input type="checkbox"/> Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> Victimized <input type="checkbox"/> Suspect <input type="checkbox"/> Towed <input type="checkbox"/> A/T/L							
Year	Make	Model	Style	Color	License Number	License Year	State
VIN		Value		Towed By / Towed To			

<input type="checkbox"/> Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> Victimized <input type="checkbox"/> Suspect <input type="checkbox"/> Towed <input type="checkbox"/> A/T/L							
Year	Make	Model	Style	Color	License Number	License Year	State
VIN		Value		Towed By / Towed To			

<input type="checkbox"/> Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> Victimized <input type="checkbox"/> Suspect <input type="checkbox"/> Towed <input type="checkbox"/> A/T/L							
Year	Make	Model	Style	Color	License Number	License Year	State
VIN		Value		Towed By / Towed To			

<input type="checkbox"/> Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> Victimized <input type="checkbox"/> Suspect <input type="checkbox"/> Towed <input type="checkbox"/> A/T/L							
Year	Make	Model	Style	Color	License Number	License Year	State
VIN		Value		Towed By / Towed To			



28

# SOUTH BEND POLICE DEPARTMENT - CASE SUPPLEMENTAL REPORT

Page 1 of 4	Supplemental / Recovery Location 110 N WILLIAM ST SOUTH BEND, IN	Report Type ADDL INFO	Date Reported 06/16/2019	Time Reported 06:38
Victim POPPLEWEL, CHRISTOPHER FREDERICK		Address 110 N WILLIAM ST Apt: 207 SOUTH BEND, IN 46601		

### Suspect

Name UNKNOWN, PERSON		Address		
Home Phone	Cell Phone	Employer Phone	Employer Name / Address	
Date of Birth	Social Security Number	Sex M	Race B	Age
		Buid	Height	Weight
		Hair	Eyes	
School Name / Address		Weapons		
Arrest #	Arrest Date	Arrest Time	Arrest Location	
Arrest Charges		Injury Type		

### VEHICLE INFORMATION

Stolen <input type="checkbox"/>		Recovered <input type="checkbox"/>	Victimized <input checked="" type="checkbox"/>	Suspect <input type="checkbox"/>	Towed <input type="checkbox"/>	ATL <input type="checkbox"/>
Year	Make MERC	Model MARO	Style 4D	Color LBL	License Number VHZ596	License Year 2019
State IN	VIN 2MECM75W7NX747755	Value \$200.00	Towed By / Towed To			

### PROPERTY INFORMATION

Data/Code: F-Found B-Burned C-Counterfeit D-Damaged R-Recovered L-Lost S-Stolen O-Other/Unknown  
E-Evidence PP-Personal Property

Code	Property Type	Brand Name	Model	Serial Number	Value	Recovered
D	FACEPL	UNKNOWN			\$750.00	\$0.00

### NARRATIVE

\*\*\* BWD 2280 \*\*\*

On 6-16-19 while working as assigned unit 327 I, PFC S. Ryan 2280, was providing scene security at 110 N William St. MHU Detectives informed me that while canvassing the area they located a face plate to a car stereo lying in the middle of the street nearby. MHU Detectives informed me that they located the Vehicle and the Owner of the Property.

I spoke to Property Owner Robinson, Leigh who stated that she left her car unlocked and did not give

Electronic Signature of Reporting Officer RYAN, SEAN-2280	Date 06/16/2019
Signature of Approving Supervisor GALEA, JOSEPH-495	Date 06/16/2019



29

# SOUTH BEND POLICE DEPARTMENT - NARRATIVE SUPPLEMENTAL

Page 2 of 4	Report Type <i>ADDL INFO</i>	<input type="checkbox"/> INCIDENT VIDEO TAPED	Case No 19 8533-001
-------------	---------------------------------	---	------------------------

*anyone consent to enter her vehicle and take her property.*

*The now broken stereo face plate was located in the middle of the street nearby.*

*The Property was not collected or returned at this time due to MHU's ongoing investigation.*

I HEREBY UNDERSTAND THE PAINS AND PENALTIES OF PERJURY THAT THE FOREMENTIONED FACTS ARE TRUE AND CORRECT AS PRESENTED TO AND/OR OBSERVED BY ME.

Location Dispatched To <i>110 N WILLIAM ST SOUTH BEND, IN</i>	Date <i>06/16/2019</i>	Time <i>06:38</i>
Electronic Signature of Reporting Officer <i>RYAN, SEAN-2280</i>	Date <i>06/16/2019</i>	
Signature of Approving Supervisor <i>GALEA, JOSEPH-495</i>	Date <i>06/16/2019</i>	



# SOUTH BEND POLICE DEPARTMENT PERSON SUPPLEMENTAL

30

Page 3 of 4      CASE NO 19 8533-001

*Victim / Prop / Veh / Owner*

Name <b>ROBINSON, LEIGHANNE</b>					Address <b>501 W WAHINGTON ST Apt: 14 SOUTH BEND, IN 46601</b>						
Home Phone <b>(574) 222-7720</b>		Cell Phone		Employer Phone		Employer Name / Address					
Date of Birth <b>01/23/1956</b>		Social Security Number		Sex <b>F</b>	Race <b>W</b>	Age <b>63</b>	Build	Height <b>504</b>	Weight <b>220</b>	Hair <b>GRY</b>	Eyes <b>BLU</b>
School Name / Address		Arrest #		Arrest Date		Arrest Time		Arrest Location			
Arrest Charges		Injury Type									

*Victim / Prop / Veh / Owner*

Name					Address						
Home Phone		Cell Phone		Employer Phone		Employer Name / Address					
Date of Birth		Social Security Number		Sex	Race	Age	Build	Height	Weight	Hair	Eyes
School Name / Address		Arrest #		Arrest Date		Arrest Time		Arrest Location			
Arrest Charges		Injury Type									

*Victim / Prop / Veh / Owner*

Name					Address						
Home Phone		Cell Phone		Employer Phone		Employer Name / Address					
Date of Birth		Social Security Number		Sex	Race	Age	Build	Height	Weight	Hair	Eyes
School Name / Address		Arrest #		Arrest Date		Arrest Time		Arrest Location			
Arrest Charges		Injury Type									

*Victim / Prop / Veh / Owner*

Name					Address						
Home Phone		Cell Phone		Employer Phone		Employer Name / Address					
Date of Birth		Social Security Number		Sex	Race	Age	Build	Height	Weight	Hair	Eyes
School Name / Address		Arrest #		Arrest Date		Arrest Time		Arrest Location			
Arrest Charges		Injury Type									



31

# SOUTH BEND POLICE DEPARTMENT - CASE REPORT

Page 1 of 3	U.C.R Classification <b>LARCENY/FROM AUTO</b>	CASE NO 19 8558
Report Type <b>THEFT FROM VEHICLE</b>	Location Type <b>PARKING LOT/GARAGE</b>	Date Reported 06/16/2019
Location of Occurrence <b>110 S TAYLOR ST SOUTH BEND, IN</b>	Can Suspect Be Identified Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Offense Begin Date 06/15/2019
Offense Begin Time 01:30	Offense End Date 06/16/2019	Offense End Time 11:30
Victim <b>FISHER, EVAN SAMUEL</b>	Sex M	Race W
Age 32	Date of Birth 05/27/1987	Social Security Number [REDACTED]
Address <b>110 S TAYLOR ST Apt: 2N SOUTH BEND, IN 46601</b>	Home Phone (574) 250-3739	Employer Name / Address UNKNOWN
Employer Phone	Complainant <b>FISHER, EVAN SAMUEL</b>	Sex M
Race W	Age 32	Date of Birth 05/27/1987
Social Security Number [REDACTED]	Home Phone (574) 250-3739	Address <b>110 S TAYLOR ST Apt: 2N SOUTH BEND, IN 46601</b>
Employer Name / Address UNKNOWN	Employer Phone	

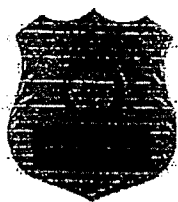
### SUSPECT INFORMATION

Name <b>UNKNOWN, PERSON</b>		Address									
Home Phone		Cell Phone		Employer Phone		Employer Name / Address					
Date of Birth	Social Security Number	Sex U	Race U	Age	Build	Height	Weight	Hair	Eyes		
School Name / Address		Weapons									
Arrest #		Arrest Date		Arrest Time		Arrest Location					
Arrest Charges		Injury Type									

Name		Address									
Home Phone		Cell Phone		Employer Phone		Employer Name / Address					
Date of Birth	Social Security Number	Sex	Race	Age	Build	Height	Weight	Hair	Eyes		
School Name / Address		Weapons									
Arrest #		Arrest Date		Arrest Time		Arrest Location					
Arrest Charges		Injury Type									

Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> Victimized <input type="checkbox"/> Suspect <input type="checkbox"/> Towed <input type="checkbox"/> ATL <input type="checkbox"/>											
Year 2013	Make HOND	Model CRV	Style SUV	Color MAR	License Number EAN0120	License Year 2019	State IN				
VIN 5J6RM3H52CL018641			Value \$0.00	Towed By / Towed To							
Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> Victimized <input type="checkbox"/> Suspect <input type="checkbox"/> Towed <input type="checkbox"/> ATL <input type="checkbox"/>											
Year	Make	Model	Style	Color	License Number	License Year	State				
VIN			Value	Towed By / Towed To							

--	--	--	--	--	--	--	--	--	--



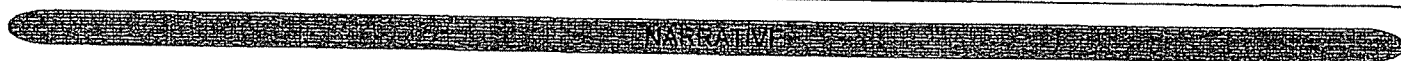
32

# SOUTH BEND POLICE DEPARTMENT - CASE REPORT

Page 2 of 3	<input type="checkbox"/> INCIDENT VIDEO TAPED	MVR TAPE NO.	Case No 19 8558
-------------	---	--------------	-----------------



Lighting	Weather	Dispatch Location 110 S TAYLOR ST SOUTH BEND, IN
Point of Entry	Point of Exit	Means of Entry
Tools used	Entry Direction	Exit Direction



On 6/16/19 Evan Fisher called the station to make a theft report.

Fisher states that between 0130 hrs and 1130 hrs on 6/16/19 an unknown suspect gained entry to his unlocked vehicle and stole two Speedway gift cards from within. Fisher's vehicle was parked in a lot near his residence. No damage was seen on the vehicle.

New World number: 19-43741

I FIRM, UNDER THE PAINS AND PENALTIES OF PERJURY, THAT THE AFOREMENTIONED FACTS ARE TRUE AND CORRECT AS PRESENTED TO AND/OR OBSERVED BY ME.

Electronic Signature of Reporting Officer HARMAN, ADAM-927	Date 06/16/2019
Status: Pending <input checked="" type="checkbox"/> Unfounded <input type="checkbox"/> Arrest Adult <input type="checkbox"/> Arrest Juvenile <input type="checkbox"/> Exceptional Adult <input type="checkbox"/> Exceptional Juvenile <input type="checkbox"/>	Admin Close <input type="checkbox"/> Approving Supervisors Signature WALSH, MARK E
	P.N. 2014





34



# SOUTH BEND POLICE DEPARTMENT - CASE SUPPLEMENTAL REPORT

CASE NO 19 8558-001

Page 1 of 1	Supplemental / Recovery Location 110 S TAYLOR ST SOUTH BEND, IN 46601	Report Type ADDL INFO	Date Reported 06/17/2019	Time Reported 09:08
Victim FISHER, EVAN SAMUEL		Address 110 S TAYLOR ST Apt: 2N SOUTH BEND, IN 46601		

Name FISHER, EVAN		Address 110 S TAYLOR ST Apt: 2N SOUTH BEND, IN 46601		
Home Phone	Cell Phone (574) 250-3739	Employer Phone	Employer Name / Address	
Date of Birth 05/27/1987	Social Security Number	Sex M	Race W	Age 32
Build	Height 601	Weight 165	Hair BLN	Eyes BLU
School Name / Address	Weapons			
Arrest #	Arrest Date	Arrest Time	Arrest Location	
Arrest Charges		Injury Type		

### VEHICLE INFORMATION

Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> Victimized <input type="checkbox"/> Suspect <input type="checkbox"/> Towed <input type="checkbox"/> ATL <input type="checkbox"/>							
Year	Make	Model	Style	Color	License Number	License Year	State
Value			Towed By / Towed To				

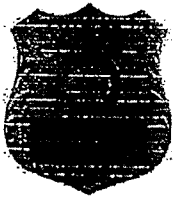
### PROPERTY INFORMATION

Data/Code: F-Found B-Burned C-Counterfeit D-Damaged R-Recovered L-Lost S-Stolen O-Other/Unknown  
E-Evidence PP-Personal Property

Code	Item Name	Brand/Model	Value	Value
S	KNIFE	GERBER	\$100.00	\$100.00
S	KNIFE	KERSHAW	\$65.00	\$65.00

On 6/17/19 Eric Fisher called the station to add two knives that were stolen out of his vehicle. The property page was updated.

Electronic Signature of Reporting Officer HARMAN, ADAM-927	Date 06/17/2019
Signature of Approving Supervisor WALSH, MARK E-2014	Date 06/17/2019



35

# SOUTH BEND POLICE DEPARTMENT - CASE REPORT

Page 1 of 3	U.C.R Classification <b>VANDALISM</b>	CASE NO 19 8555
Report Type <b>VANDALISM TO VEHICLE</b>	Location Type <b>PARKING LOT/GARAGE</b>	Date Reported 06/16/2019
Location of Occurrence <b>110 S TAYLOR ST SOUTH BEND, IN</b>	Can Suspect Be Identified Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Time Reported 12:06
Offense Begin Date 06/15/2019	Offense Begin Time 15:00	Offense End Date 06/16/2019
Offense End Time 11:30	Victim <b>PRIEBE, DUSTIN L</b>	
Sex M	Race W	Age 33
Date of Birth 07/20/1985	Social Security Number [REDACTED]	
Address <b>110 S TAYLOR ST SOUTH BEND, IN 46601</b>	Home Phone (574) 286-6072	Employer Name / Address UNKNOWN
Complainant <b>PRIEBE, DUSTIN L</b>	Sex M	Race W
Age 33	Date of Birth 07/20/1985	Social Security Number [REDACTED]
Home Phone (574) 286-6072	Address <b>110 S TAYLOR ST SOUTH BEND, IN 46601</b>	
Employer Name / Address UNKNOWN	Employer Phone	

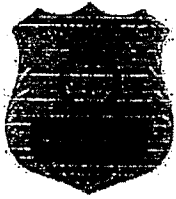
### SUSPECT INFORMATION

Name <b>UNKNOWN, PERSON</b>	Address										
Home Phone	Cell Phone	Employer Phone		Employer Name / Address							
Date of Birth	Social Security Number	Sex U	Race U	Age	Build	Height	Weight	Hair	Eyes		
School Name / Address					Weapons						
Arrest #	Arrest Date	Arrest Time	Arrest Location								
Arrest Charges					Injury Type						

Name	Address										
Home Phone	Cell Phone	Employer Phone		Employer Name / Address							
Date of Birth	Social Security Number	Sex	Race	Age	Build	Height	Weight	Hair	Eyes		
School Name / Address					Weapons						
Arrest #	Arrest Date	Arrest Time	Arrest Location								
Arrest Charges					Injury Type						

Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> Victimized <input checked="" type="checkbox"/> Suspect <input type="checkbox"/> Towed <input type="checkbox"/> ATL <input type="checkbox"/>									
Year 2002	Make HOND	Model CIV.	Style 2D	Color RED	License Number 340YB	License Year 2019	State IN		
VIN 18GEM229920007436			Value \$100.00	Towed By / Towed To					
Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> Victimized <input type="checkbox"/> Suspect <input type="checkbox"/> Towed <input type="checkbox"/> ATL <input type="checkbox"/>									
Year	Make	Model	Style	Color	License Number	License Year	State		
VIN			Value	Towed By / Towed To					

--	--	--	--	--	--	--	--	--	--



36

# SOUTH BEND POLICE DEPARTMENT - CASE REPORT

Page 2 of 3	<input type="checkbox"/> INCIDENT VIDEO TAPED	MVR TAPE NO	Case No 19-8555
-------------	---	-------------	-----------------

Lighting	Weather	Dispatch Location 110 S TAYLOR ST SOUTH BEND, IN
Point of Entry	Point of Exit	Means of Entry
Tools Used	Entry Direction	Exit Direction

On 6/16/19 Dustin Priebe called the station to make a vandalism report.

Dustin states that between 6/15/19 1500 hrs and 6/16/19 1130 hrs an unknown suspect used an unknown object to break out his driver's side window. Dustin's vehicle was parked in a parking lot near his residence. Nothing was taken from inside the vehicle. The damaged window was added to the property page.

New World number: 19-43724

"AFFIRM, UNDER THE PAINS AND PENALTIES OF PERJURY, THAT THE AFOREMENTIONED FACTS ARE TRUE AND CORRECT AS PRESENTED TO AND /OR OBSERVED BY ME."

Electronic Signature of Reporting Officer HARMAN, ADAM-927	Date 06/16/2019
Status Pending <input checked="" type="checkbox"/> Arrest Adult <input type="checkbox"/> Exceptional Adult <input type="checkbox"/> Admin Close <input type="checkbox"/> Unfounded <input type="checkbox"/> Arrest Juvenile <input type="checkbox"/> Exceptional Juvenile <input type="checkbox"/>	Approving Supervisors Signature GIBBONS, KEVIN
	PJN 386





# SOUTH BEND POLICE DEPARTMENT - CASE REPORT

Page 1 of 3	U.C.R Classification <b>LARCENY/FROM AUTO</b>		CASE NO 19   8546	
Report Type <b>THEFT FROM VEHICLE</b>	Location Type <b>HIGHWAY/ROAD/ALLEY</b>		Date Reported 06/16/2019	Time Reported 10:00
Location of Occurrence <b>131 S WILLIAM ST SOUTH BEND, IN</b>	Can Suspect Be Identified Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Offense Begin Date 06/16/2019	Offense Begin Time 10:13	Offense End Date 06/16/2019
Victim <b>DOYLE, JOSEPHINE</b>	Sex F	Race W	Age 45	Date of Birth 05/05/1974
Address <b>131 S WILLIAMS ST SOUTH BEND,</b>	Home Phone <b>(574) 286-8914</b>	Employer Name / Address		Social Security Number [REDACTED]
Complainant <b>DOYLE, JOSEPHINE</b>	Sex F	Race W	Age 45	Date of Birth 05/05/1974
Address <b>131 S WILLIAMS ST SOUTH BEND,</b>	Home Phone <b>(574) 286-8914</b>	Employer Name / Address		Social Security Number [REDACTED]

### SUSPECT INFORMATION

Name <b>UNKNOWN, PERSON</b>		Address							
Home Phone	Cell Phone	Employer Phone		Employer Name / Address					
Date of Birth	Social Security Number	Sex U	Race U	Age	Build	Height	Weight	Hair	Eyes
School Name / Address		Weapons							
Arrest #	Arrest Date	Arrest Time	Arrest Location						
Arrest Charges		Injury Type							

Name		Address							
Home Phone	Cell Phone	Employer Phone		Employer Name / Address					
Date of Birth	Social Security Number	Sex	Race	Age	Build	Height	Weight	Hair	Eyes
School Name / Address		Weapons							
Arrest #	Arrest Date	Arrest Time	Arrest Location						
Arrest Charges		Injury Type							

### VEHICLE INFORMATION

Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> Victimized <input checked="" type="checkbox"/> Suspect <input type="checkbox"/> Towed <input type="checkbox"/> ATL <input type="checkbox"/>									
Year 2003	Make HOND	Model EXX	Style 4D	Color BLK	License Number 166ADP	License Year 2020	State IN	VIN 1HGES16523L015550	
Value \$1.00			Towed By / Towed To						
Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> Victimized <input type="checkbox"/> Suspect <input type="checkbox"/> Towed <input type="checkbox"/> ATL <input type="checkbox"/>									
Year	Make	Model	Style	Color	License Number	License Year	State	VIN	
Value			Towed By / Towed To						

### ADDITIONAL INFORMATION

--	--	--	--	--	--	--	--	--	--



39

# SOUTH BEND POLICE DEPARTMENT - CASE REPORT

Page 2 of 3	<input type="checkbox"/> INCIDENT VIDEO TAPED	MVR TAPE NO.	Case No 19 18546
-------------	---	--------------	------------------

WEATHER

Lighting	Weather	Dispatch Location 131 S WILLIAM ST SOUTH BEND, IN
Point of Entry	Point of Exit	Means of Entry
Tools used	Entry Direction	Exit Direction

NARRATIVE

NO MVR

On 06/16/19 at 1000 hrs victim/complainant JOSEPHINE DOYLE F/W reports her 2003 Honda 4/D broken into overnight while it was parked next to her residence at 131 S. William Street.

On this date and time I made contact with DOYLE who had already cleaned up the glass and placed plastic over her vehicles window. DOYLE advised around 0300 hrs on today's date she heard a noise outside her residence but did not see anything. Around 0930 hrs she went outside discovering her front drivers side window busted out.

DOYLE advised missing from inside her vehicle was a white IPHONE phone corded phone charger and some unknown amount of unknown named CD's. I could not locate any residential or commercial surveillance cameras that may have captured this incident in the area.

Case number provided for insurance.

Nothing further from this officer.

I AFFIRM, UNDER THE PAINS AND PENALTIES OF PERJURY, THAT THE AFOREMENTIONED FACTS ARE TRUE AND CORRECT AS PRESENTED TO AND/OR OBSERVED BY ME."

Electronic Signature of Reporting Officer DAWSON, ANTHONY-2150	Date 06/16/2019
Status Pending <input checked="" type="checkbox"/> Arrest Adult <input type="checkbox"/> Exceptional Adult <input type="checkbox"/> Admin Close <input type="checkbox"/> Unfounded <input type="checkbox"/> Arrest Juvenile <input type="checkbox"/> Exceptional Juvenile <input type="checkbox"/>	Approving Supervisor's Signature GIBBONS, KEVIN
	P.N. 386

