

VEHICLE REPORT
FORM 83/5

POLICE DEPARTMENT
BALTIMORE, MARYLAND

1. REGISTERED OWNER'S NAME KIM [REDACTED]				AGE		2. COMPLAINT NO. 885801	
18. CAR NO. 8A15	19. POST 815	20. REPORTING AREA 0918	STREET CODE	3. REG. OWNER'S ADDRESS [REDACTED]		CITY BALTO.	
21. COMP'S. OCCUPATION		22. HOURS OF EMPL.	23. SOBRIETY	5. MAKE - YEAR - BODY - COLOR(S) NIS 98 4Dr Grey		6. VIN [REDACTED]	
24. DESCRIBE LOC. OF OFFENSE OR TYPE OF PREMISE Rear Alley				7. LOCATION STOLEN/TOWED FROM (ADDRESS) 300 (Rear) Edgewood St		8. STATE, YR., LIC. NO. MD 08 [REDACTED] 6 [REDACTED]	
25. VEHICLE USED BY SUSPECT		LIC. NO.	STATE	YEAR	9. REPORTING PERSON P/O D. Naylor		SEX-RACE-AGE F/27
YEAR	MAKE	BODY	COLOR(S)		11. REPORTING PERSON'S ADDRESS 424 Font Hill Ave		CITY Balt
IDENTIFYING CHARACTERISTICS OF VEHICLE Grey				13. DATE/TIME STOLEN/TOWED 28 Feb 99		14. DATE/TIME REPORTED 0430 hrs	
HOT DESK: PERSON NOTIFIED/TIME		REPO CHECK <input type="checkbox"/> YES <input type="checkbox"/> NO		15. CRIME OR INCIDENT Towed Vehicle		16. DATE/TIME RECOVERED	
26. NAME (CODE: W-WITNESS; P-PARENT; G-GUARDIAN)		CODE	RESIDENCE ADDRESS		CITY	RES. PHONE	17. CLASS. 24
29. IDENTIFY SUSPECTS BY NO. (NAME-ADDRESS-SEX-RACE-AGE-HT.-WT.-EYES-HAIR-COMPLEX.-CLOTHING-IDENTIFYING CHARACTERISTICS)							
(1) IF ARRESTED, INCLUDE, ARREST NO. AND CHARGE							
(2) M.C.I.C.							
(3) Luicide							
30. IGNITION LOCKED <input type="checkbox"/> YES <input type="checkbox"/> NO		31. KEYS IN IGNITION <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		32. DOORS LOCKED <input type="checkbox"/> YES <input type="checkbox"/> NO		33. WINDOWS CLOSED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
34. MILEAGE 5040		35. RADIO IN CAR <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		36. BATTERY IN CAR <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		37. SPARE TIRE IN CAR <input type="checkbox"/> YES <input type="checkbox"/> NO	
38. TRUNK LOCKED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		39. RADIO NOTIFIED		DATE/TIME		40. TOTAL LOSS VALUE	
41. POST. RECOV. 915		42. BY WHOM RECOVERED (OFFICER'S NAME AND SEQ. NO. - IF CITIZEN, NAME-ADDRESS-RES. PHONE-BUS. PHONE) DET. G.S. MACGILLIVRAY					
RECOVERY	43. REP. AREA		44. LOCATION RECOVERED 300 BLK Edgewood (Rear)		45. METHOD OF THEFT (JUMP WIRES-TINFOIL-IGNIT. LEFT OPEN, ETC.) Keys		
	46. ST. CODE		47. DESCRIBE EVIDENCE OF STRIPPING, TAMPERING NONE		48. IF TOWED NAME OF GARAGE Autobarns #76		
ITEM NO.	49. NARRATIVE (1) CONTINUATION OF ABOVE ITEMS (INDICATE "ITEM NUMBER" CONTINUED AT LEFT) INDICATE ADDITIONAL VICTIMS, WITNESSES AND SUSPECTS AS OUTLINED ABOVE (2) DESCRIBE DETAILS OF INCIDENT						
	<p>98 Nis, MD Tag [REDACTED] VIN# [REDACTED] 98 4DeGreg</p> <p>On 28 Feb 99, at approx 0430 hrs the above listed vehicle was towed from 300 Edgewood (rear alley) to downtown Headquarters for investigation. Veh was towed by Autobarns #76 and followed downtown by same officer.</p>						
COMPLAINT NO. DISPATCHED UNDER OTHER THAN ORIGINAL				50. TOW TRUCK OPERATOR—SIGNATURE [Signature]			51. TELETYPE NO.
52. REPORTING OFFICER D. Naylor		SEQ. NO. 15930	DIST. 864	53. STATUS (CHECK ONE) <input type="checkbox"/> OPEN <input type="checkbox"/> SUSPENDED <input checked="" type="checkbox"/> CLOSED		54. REFERRED TO:—	
2ND OFFICER		SEQ. NO.	DIST.	56. SUPERVISOR APPROVING [Signature]		SEQ. NO. 1410	57. REVIEWER [Signature]

VEHICLE PROCESSING REPORT

CC#: 8B5801	OFFENSE: HOMICIDE	DATE: 28 Feb 99
VEHICLE INFORMATION		
Year/Make/Model: 98 Nissan Sentra	VIN#	
Tags (on vehicle): FSV645	Are Tags Stolen? YES / NO (If Yes, CC#)	Is
	Vehicle Stolen? <u>YES</u> / NO (If Yes, CC#)	
Registered Owner:	Soundex#:	
Address:	Phone:	
Date/Time Recovered: 28 Feb 99	Location Recovered:	
Vehicle location:	HQ Garage Space #:	Other:
	Keys in Vehicle? N/A	Other:
OFFENSE INFORMATION		
Date/Time Occurred:	Location Occurred:	
Victim's Name:	Race:	Sex: DOB:
Victim's Address:		
Defendant/Suspect(s):		
Name:	Race:	Sex: DOB: BPI#
Name:	Race:	Sex: DOB: BPI#
Name:	Race:	Sex: DOB: BPI#
SERVICES REQUESTED		
Process for fingerprints? <u>YES</u> / NO If YES, circle one: Interior only / Exterior only / <u>Interior & Exterior</u>		
Evidence to be recovered:		
Special Requests:		
DESCRIPTION OF OFFENSE		
OFFICER'S INFORMATION		
Officer towing vehicle into garage: Name D. Naylor	Unit # 8A15	Seq# F930
Investigating Officer/Detective: Name Bowi / Sarro	Unit # 6423	Seq#

TOWING AND RELEASE INFORMATION

TOWING INFORMATION

into HQ garage:

Towing Company: *The Auto Barr* Truck #: *76* Date: *Feb 28, 99*
Driver's Name (Print): *John Smith* Signature: *[Signature]*

Out of HQ garage:

Towing Company: _____ Truck #: _____ Date: _____
Driver's Name (Print): _____ Signature: _____
Officer requesting tow: _____ Unit: _____ Seq#: _____

RELEASE INFORMATION

Released by: Officer's Name: *D. Naylor* Unit: *8A15* Seq#: *F930*

Released to: Name: *YOUNG LEE* Soundex#: _____
* Signature: *[Signature]* Date: *3/7/99*

PROCESSING INFORMATION

Processing completed by Crime Laboratory:

Technician: *F. SANDERS / R. THOMAS* Unit: *5836 / 5830* Seq#: *TV69 / S872* Date: *02/28/99*

NOTIFICATIONS:

Notified:	Date/Time:	By:
Notified:	Date/Time:	By:
Notified:	Date/Time:	By:

(Note: Vehicle Processing Information On Back)

COMMENTS:

Note: Unless advised otherwise, the Mobile Unit will have the district involved