

1. NUMBER OF OCCURRENCES: **7631** STAGE: **PASSHOME TERR.** APP. NO. **01 DEC 07, 1100** 2422, 2422  
 2. TYPE OF OCCURRENCE OR PROSECUTION OR OTHER INDICATED BY CODE: **STRGTS.** 3. DATE OF OCCURRENCE: **01 DEC 07, 1116**  
 4. TYPE OF LOCATION OR PREMISES WHERE OCCURRENCE TOOK PLACE: **STRGTS.**

ALL INFORMATION, DESCRIPTIONS AND STATEMENTS IN THIS SECTION SHOULD BE SUBMITTED IN THE MANNER INDICATED BY THE INSTRUCTIONS ON THE REVERSE SIDE OF THIS PAGE.

21. NAME (LAST, FIRST, MI)	22. IDENTITY VERIFIED	23. HOME ADDRESS (NO., ST., STREET, APT. NO.)	24. SEX - RACE - AGE	25. HT. - WT. - HAIR	26. BUSINESS PHONE	27. TIME AVAILABLE	28. OCCUPATION	29. IN JURISDICTION	30. BY (REL. C.)
<b>HANNUITY, MICHAEL C.</b>	<input type="checkbox"/>				<b>SALV.</b>	<b>12-17-07</b>	<b>(11-17-07)</b>	<b>2</b>	<b>029</b>

31. OFFENSE'S MAKE (FOR MOTOR OR CLOTHING, ETC.): **SUCCOR, PHOENIX**  
 32. MAKE: **SUCCOR**  
 33. MODEL: **PHOENIX**  
 34. COLOR: **BLACK**  
 35. MAKE: **PHOENIX**  
 36. MODEL: **PHOENIX**  
 37. COLOR: **PHOENIX**

38. OFFENSE'S MAKE (FOR MOTOR OR CLOTHING, ETC.): **G.POWER, JAY R**  
 39. MAKE: **G.POWER**  
 40. MODEL: **JAY R**  
 41. COLOR: **RED**  
 42. MAKE: **G.POWER**  
 43. MODEL: **JAY R**  
 44. COLOR: **RED**

45. DESCRIBE PROPERTY IN LARDED TYPE: **SEE PAGE 1**  
 46. TAKEN: **0** RECOVERED: **0**

47. MAKE: **BMW** 48. MODEL: **202** 49. COLOR: **BLU** 50. VIN: **WBADW5349JJA38719**  
 51. LICENSE NO.: **2274** 52. STATE: **IL** 53. YEAR: **89/90**

**EVENT SUMMARY: VICTIM ADVISED TO PM THAT AS HE WAS WALKING BACK TO HIS VEHICLE (SEE BU 72), HE OBSERVED THE OFFENDERS LEAN UP AGAINST HIS VEHICLE AND REMOVE A DROGUE HIS LEFT ARM AND HAND ALONG ITS PASSENGER SIDE. AS OFFENDERS WALKED AWAY FROM VICTIM'S VEHICLE, VICTIM OBSERVED A SCRATCH ALONG THE KEYS TRUNK AND PASSENGER'S**

54. EXTRA COPIES REQUIRED: **0**  
 55. FIRST OFFICER AT SCENE: **L. J. JORDAN**  
 56. REPORTING OFFICER'S NAME (PRINT): **L. J. JORDAN** STAR NO. **8229**  
 57. OFFICER'S SIGNATURE: *[Signature]*  
 58. DATE APPROVED: **01-DEC-07, PM**  
 59. SUPERVISOR'S SIGNATURE: *[Signature]* DATE APPROVED: **01-DEC-07, PM**

DOOR AREA WHERE OFFENDER DROPPED HIS  
 DPM AND HAND OVER.  
 VICTIM AND WITNESS STOPPED OFFENDER  
 AND CONFRONTED HIM. VICTIM HAS MILITARY  
 PLATES AND DECALS ON HIS VEHICLE  
 AND OFFENDER MADE ANTI WAR AND  
 MILITARY COMMENTS TO VICTIM.  
 UPON R/O'S ARRIVAL TO SCENE, OFFENDER  
 DENIED SCRATCH <sup>ON</sup> VICTIM'S VEHICLE, BUT  
 DID ADMIT TO RUBBING PAST IT.  
 VICTIM AT THIS TIME DID NOT SIGN COMPLAINT  
 BECAUSE HE IS LEAVING TOWN FOR MILITARY

DUTY. FIRST  
 OFFENDER SAID THEY ACCIDENTLY ~~HIT~~ OF SURFSCHE-I  
 THE CAR BECAUSE HE'S SENIOR.  
 OFFENDER'S STATEMENTS/RESPONSES TO  
 R/O'S QUESTIONS UNREASONABLE.

I HAVE REVIEWED THIS REPORT AND BY MY SIGNATURE INDICATE THAT IT IS ACCEPTABLE. SUPERVISOR'S SIGNATURE DATE (DAY-MO-YR.)

FOR USE BY BUREAU OF INVESTIGATIVE SERVICES ONLY

UCR OFFENSE CODE -- <input type="checkbox"/> 1 CORRECT <input type="checkbox"/> 2 REVISED		REV. CODE	UCR METHOD CODE		METHOD ASSIGNED <input type="checkbox"/> 1 FIELD <input type="checkbox"/> 3 SUMMARY <input type="checkbox"/> 2 ADMIN.	UNIT NO.	OFFICER ASSIGNED STAR NO.	DATE ASSIGNED	SUPV. STAR NO.	INVESTIGATIVE FILE <input type="checkbox"/> 1 YES <input type="checkbox"/> 2 NO	REASSIGNED <input type="checkbox"/> 1 YES <input type="checkbox"/> 2 NO	
OFFICER REASSIGNED -- STAR NO.	DATE	STATUS <input type="checkbox"/> 0 PROGRESS <input type="checkbox"/> 1 SUSPENDED <input type="checkbox"/> 2 UNFOUNDED <input type="checkbox"/> 3 CLEARED CLOSED <input type="checkbox"/> 4 CLEARED OPEN <input type="checkbox"/> 5 EXC. CLRD. CLOSED <input type="checkbox"/> 6 EXC. CLEARED OPEN <input type="checkbox"/> 7 CLOSED-NON-CRIMINAL			IF CASE IS CLEARED, HOW CLEARED (USE THIS BOX FOR SINGLE CLEAR UP OR FIRST CLEAR UP OF MULTIPLE CLEAR UP LIST) <input type="checkbox"/> 1 ARREST & PROSECUTION <input type="checkbox"/> 2 DIRECTED TO FAMILY COURT <input type="checkbox"/> 3 COMPL. REFUSED TO PROSECUTE <input type="checkbox"/> 4 COMMUNITY ADJUSTMENT <input type="checkbox"/> 5 OTHER EXCEPTIONAL							
VICTIM IDENTIFIERS <input type="checkbox"/> 1 CORRECT <input type="checkbox"/> 2 REVISED		VICTIM NO.	REVISED NAME		REVISED ADDRESS			REVISED PHONE NO. <input type="checkbox"/> HOME <input type="checkbox"/> BUSINESS				
VALUE OF PROPERTY TAKEN/RECOVERED		<input type="checkbox"/> 1 DNA	<input type="checkbox"/> 2 VERIFIED	<input type="checkbox"/> 3 CORRECTED	FILL IN THE FULL AMOUNT OF ONLY THOSE VALUES WHICH EITHER DIFFER FROM OR WERE NOT REPORTED ON THE REVERSE, THE NARRATIVE OR A SUPPLEMENTARY REPORT.							
1 MONEY <input type="checkbox"/> T \$ <input type="checkbox"/> R	2 JEWELRY <input type="checkbox"/> T \$ <input type="checkbox"/> R	3 FURS <input type="checkbox"/> T \$ <input type="checkbox"/> R	4 CLOTHING <input type="checkbox"/> T \$ <input type="checkbox"/> R	7 OFFICE EQUIPMT. <input type="checkbox"/> T \$ <input type="checkbox"/> R	8 TV, RADIO, STEREO <input type="checkbox"/> T \$ <input type="checkbox"/> R	9 HOUSEHOLD GOODS <input type="checkbox"/> T \$ <input type="checkbox"/> R	10 CONSUM. GOODS <input type="checkbox"/> T \$ <input type="checkbox"/> R	11 FIREARMS <input type="checkbox"/> T \$ <input type="checkbox"/> R	12 NARC/DANG. DRUGS <input type="checkbox"/> T \$ <input type="checkbox"/> R	15 OTHER <input type="checkbox"/> T \$ <input type="checkbox"/> R	16 N <input type="checkbox"/> T \$ <input type="checkbox"/> R	
SERIAL NOS. OR IDENTIFICATION NOS. <input type="checkbox"/> 1 DNA <input type="checkbox"/> 2 VERIFIED <input type="checkbox"/> 3 CORRECTED				LIST ALL CORRECTIONS & NEW OR ADDITIONAL NOS. OBTAINED								

REMARKS (PERTINENT INFORMATION NOT ON ORIGINAL REPORT)

PREPARED BY - SIGNATURE STAR NO. DATE (DAY-MO-YR.) APPROVED BY - SIGNATURE STAR NO. DATE

720 ICS 5/21-1 (a) CDTP