



IOWA INCIDENT REPORT

Des Moines Police Department

100 Main Street

Des Moines, IA 12331-2154

(123) 456-7890

Case Number	08-00002
Date of Report	1/7/2008
Status	02 - INACTIVE

SUMMARY	County	POLK - 77		Report Type	0 - INITIAL INCIDENT		Day of week Incident Occurred	2 - MONDAY		
	Dispatched Location	5000 BLK MERLE HAY RD			Dispatched Time	12:01	Arrival Time	12:05	In Service Time	12:08
	Is Incident Date / Time Known?	YES	Incident Date or Lower Date Range	01/07/2008		Upper Date Range	Incident Time or Lower Time Range	12:01	Upper Time Range	
	INCIDENT REPORTED BY									
	Incident Reported by/Victim?	YES	Reporting Victim's Sequence No.	001		Name - Last	SMITH		First	JAMES
								Middle	JOHN	
								Suffix		
	Business Name (if Incident was Reported by a Business)				Address					
	WELLS FARGO				1234 NW 9TH AVE					
	City			State	Zip Code	Home Phone		Work Phone		
	DES MOINES			IA	50313	(515) 555-1234 EXT.		(515) 555-9876 EXT.		

OFFENSE	Seq. No.	Code Section	Charges/Offense			UCR Offense Code					
	001	708.1(2)	SIMPLE ASSAULT			SIMPLE ASSAULT - 13B					
	Attempted/Completed		Type of Criminal Activity (up to 3)								
	C - COMPLETED										
	Type of Weapon/Force Involved (up to 3)							Gang Information (up to 2)			
99 - NONE							N - NONE/UNKNOWN				
001	Method of Entry		Point of Entry	No. of Premises Entered		Offender Suspected of Using					
	N - NO FORCE					A - ALCOHOL					
	LOCATION OF OFFENSE										
Location Type					X Coordinate			Y Coordinate			
13 - HIGHWAY/ROAD/ALLEY					00441918			04612752			
Literal Description											
MERLE HAY RD											

OFFENDER	Type of Offender		Sequence No.	Name - Last			First		Middle		Suffix
	01 - OFFENDER		01	DIRTBAG			JOEY		G		
	Alias(es)								Offender Sobriety		
									2 - DRINKING (NOT IMPAIRED)		
	Address				City			State	Zip Code	Home Phone	
	1515 WEST 6TH ST				DES MOINES			IA	50313	(515) 555-1212 EXT.	
	DOB Known?	DOB	Age or Lower Age Range		Upper Age Range		SSN		Resident Status		
	YES	08/08/1974	33				123-45-6789		R - RESIDENT		
	Driver's License - Number			State	Gender	Height	Weight	Eye Color	Hair Color		
	123XX4567			IA	M	6' 01"	235 LBS	BROWN - BRO	RED OR AUBURN - RED		
Skin Tone				Race			Ethnicity				
LIGHT - LGT				3 - CAUCASIAN			N - NOT OF HISPANIC ORIGIN				
Scars/Marks/Tattoos							Was offender present when officer arrived?				
TATT-RT ARM-EAGLE							YES				
Type of Injury					Hospital Taken to			Transported By			
N - NONE											

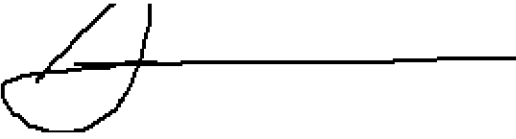
EMPLOYMENT OR SCHOOL INFO										
Employer or School					Occupation				Hours of Employment	
UNEMPLOYED										
Address				City			State	Zip Code	Work Phone	

ARREST INFO										
Offender Arrested?	Arrestee Seq. No	Type of Arrest				Arrest Date		Arrest Time		Hrs.
NO										
Miranda By			Miranda Date		Miranda Time		Arrestee Condition			
Arrestee Armed With (up to 2)					Place of Birth			Additional Incidents Cleared		

JUVENILE INFO										
Parent/Guard. Contacted?	Name - Last				First		Middle		Suffix	
Address				City			State	Zip Code		
Home Phone			Work Phone			Juvenile Arrestee Disposition				

V I C T I M 001	Type of Victim I - INDIVIDUAL	Sequence No. 001	Name - Last SMITH		First JAMES		Middle JOHN		Suffix	
	Business/Organization/Municipality Name			Address 1234 NW 9TH AVE		City DES MOINES		State IA	Zip Code 50313	
	Phone (515) 555-1234 EXT.		Alias(es)				Victim Sobriety 1 - HAD NOT BEEN DRINKING			
	DOB Known? YES	DOB 08/08/1979	Age or Lower Age Range 28		Upper Age Range		SSN 123-56-7891		Resident Status R - RESIDENT	
	Driver's License - Number 132XX1234		State IA	Gender M - MALE	Height 6' 01"	Weight 185 LB	Eye Color BLUE - BLU		Hair Color BLONDE OR STRAWBERRY - BLN	
	Skin Tone FAIR - FAR		Race 3 - CAUCASIAN		Ethnicity N - NOT OF HISPANIC O		Scars/Marks/Tattoos			
	Type of Injury N - NONE				Hospital Taken To			Transported By		
	EMPLOYMENT OR SCHOOL INFO									
	Employer or School WELLS FARGO				Occupation BANK TELLAR				Hours of Employment	
	Address				City		State	Zip Code	Work Phone (515) 555-9876 EXT.	
VICTIM CONNECTED TO UCR OFFENSE CODES										
UCR Offense Code 1 SIMPLE ASSAULT - 13B				UCR Offense Code 2						
UCR Offense Code 3				UCR Offense Code 4						
ADDITIONAL OFFENSE CIRCUMSTANCE INFO										
Aggravated Assault/Homicide Circumstances (up to 2)										
Additional Justifiable Homicide Circumstances										
VICTIM'S RELATIONSHIP TO OFFENDER(S)										
First Offender Seq. No. 001	Victim's Relationship to First Offender AQ - VICTIM WAS ACQUAINTANCE			Second Offender Seq. No.	Victim's Relationship to Second Offender					
Third Offender Seq. No.	Victim's Relationship to Third Offender			Fourth Offender Seq. No.	Victim's Relationship to Fourth Offender					
SPECIAL CIRCUMSTANCES										
Not Applicable <input checked="" type="checkbox"/>		Bias Crime <input type="checkbox"/>		Domestic Abuse <input type="checkbox"/>			LEOKA <input type="checkbox"/>			
BIAS CRIME										
Bias Motivation				Target Code						
Bias Group Affiliations										
DOMESTIC ABUSE										
Children Present?	Seq. No. of Domestic Abuse Offender	Does the victim have a current No Contact Order? <input type="checkbox"/> YES <input type="checkbox"/> NO			Has the subject been charged with domestic abuse assault on the victim or others in the past? <input type="checkbox"/> YES <input type="checkbox"/> NO					
Was the Abused Persons Rights given? <input type="checkbox"/> YES <input type="checkbox"/> NO		Does the Victim request a No Contact Order? <input type="checkbox"/> YES <input type="checkbox"/> NO								
Domestic Abuse Referrals (up to 6)										
LEOKA										
Officer Killed				Type of Assignment						
Body Armor				Call Type						
NARRATIVE										
SMITH ADVISED THAT DIRTBAG THREATENED HIM VERBALLY. SMITH DECLINED TO FILE CHARGES. BOTH PARTIES WERE SENT ON THEIR WAY.										

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Complainant/Reporting Party Signature 				
Reporting Officer ADMIN SYSTEM	Badge Number 00001	Video Taken? 01 - IN CAR	Evidence Seized? NO	Photos Taken? NO
Supervisor	Badge Number	Incident Assigned To		
Cleared Exceptionally N - NOT APPLICABLE			Date Cleared Exceptionally	
Notifications Investigators <input type="checkbox"/> Identification Unit <input type="checkbox"/> Officer Case Investigative Photos <input type="checkbox"/>				