

ALABAMA UNIFORM INCIDENT/OFFENSE REPORT

1 ORI # AL0430200	2 Date of Report 03/06/2014	3 Time of Report 19:13	4 Type Report <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM <input type="checkbox"/> MIL	INCIDENT OFFENSE SUPPLEMENT	5 Supplement Date	6 Agency Case Number 14-03-00241	7 Suffix 1
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8 Agency Name Opelika Police Department	9 Sector 3
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10 Type of Incident or Offense <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Attempted <input checked="" type="checkbox"/> Completed Reckless Driving	11 Degree (Circle) 1 2 3	12 UCR Code 7777	13 State Code/Local Ordinance 32-5A-190
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14 Type of Incident or Offense <input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Attempted <input type="checkbox"/> Completed	15 Degree (Circle) 1 2 3	16 UCR Code	17 State Code/Local Ordinance
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18 Place of Occurrence <input type="checkbox"/> Check here if event occurred at victim's residence Interstate 85 (Northbound), Mile marker 63, Opelika, AL 36801	Victim Demographics (Where victim is an individual)		
19 Sex: <input checked="" type="checkbox"/> M <input type="checkbox"/> F 20 Race: <input checked="" type="checkbox"/> W <input type="checkbox"/> B <input type="checkbox"/> A <input type="checkbox"/> I 21 Ethnicity: <input type="checkbox"/> Hispanic <input checked="" type="checkbox"/> Other Non-Hispanic 22 Multiple Victims LE Officer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 23 Age: 28	24 Offender Suspected of Using <input type="checkbox"/> Alcohol <input type="checkbox"/> Computer Equipment <input type="checkbox"/> Drugs <input type="checkbox"/> N/A		25 Gang: <input type="checkbox"/> Juvenile Gang <input type="checkbox"/> Adult Gang <input checked="" type="checkbox"/> None/Unknown
	26 Hate Bias: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		27 Bias Code

29 Point of Entry <input type="checkbox"/> Door <input type="checkbox"/> Window <input type="checkbox"/> Roof <input type="checkbox"/> Other	30 Method of Entry <input type="checkbox"/> Forcible <input type="checkbox"/> Attempted Forcible <input type="checkbox"/> No Force	31 Local Use	32 Lighting <input checked="" type="checkbox"/> 1 Natural <input type="checkbox"/> 2 Moon <input type="checkbox"/> 3 Artificial Exterior <input type="checkbox"/> 4 Artificial Interior <input type="checkbox"/> 5 Unknown	33 Weather <input checked="" type="checkbox"/> 1 Clear <input type="checkbox"/> 2 Cloudy <input type="checkbox"/> 3 Rain <input type="checkbox"/> 4 Fog <input type="checkbox"/> 5 Snow <input type="checkbox"/> 6 Hail <input type="checkbox"/> 7 Unknown	34 Location Type (Circle) <input type="checkbox"/> 01 Terminal <input type="checkbox"/> 09 Drug Store <input type="checkbox"/> 02 Bank <input type="checkbox"/> 10 Field/Woods <input type="checkbox"/> 03 Bar <input type="checkbox"/> 11 Govt/Public Building <input type="checkbox"/> 04 Church <input type="checkbox"/> 12 Supermarket <input type="checkbox"/> 05 Commercial <input checked="" type="checkbox"/> 13 Highway/Street <input type="checkbox"/> 06 Construction <input type="checkbox"/> 14 Hotel/Motel <input type="checkbox"/> 07 Conv Store <input type="checkbox"/> 15 Jail/Prison <input type="checkbox"/> 08 Dept Store <input type="checkbox"/> 16 Lake/Waterway	17 Liquor Store 18 Parking Lot/Garage 19 Storage Facility 20 Residence/Home 21 Restaurant 22 School/College 23 Service/Gas Station 24 Specialty Store 25 Other/Unknown
35 Occurred from MM/DD/YY 03/06/2014	36 Time of Event 19:13	37 Day of Week S M T W T F S 1 2 3 4 5 6 7	40 Day of Week S M T W T F S 1 2 3 4 5 6 7	41 # Premises Entered (Burglary)	42 Type Criminal Activity B Buying/Receiving D Distributing/Selling O Operating/Promoting T Transporting/Importing C Cultivating/Manu E Exploiting Children P Possessing/Concealing U Using/Consuming	
38 Occurred to MM/DD/YY 03/06/2014	39 Time of Event 19:18	43 Victim Type <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Financial (Bank) <input type="checkbox"/> Religious Org <input type="checkbox"/> Business <input type="checkbox"/> Government <input type="checkbox"/> Society				

44 Loss Code	45 Property Code	46 Qty	47 Property Description <small>Include Make, Model, Size Type, Serial #, Color, Drug Type, Drug Qty, Etc.</small>	48 Dollar Value		49 Recovered	
				Stolen	Damaged	Date	Value
C	40	5	empty packages of assorted brands of spice			03/07/2014	
C	10	1	Opened package of spice ; Anonymous			03/07/2014	
C	75	1	Portable Electronic Communications ; Sony ; BLK			03/07/2014	
C	40	1	set of keys to 2004 GMC Envoy			03/07/2014	
<input type="checkbox"/> Continued on Supplement							

Loss Code <small>(Enter letter in loss code column)</small> S Stolen B Burned R Recovered F Forged/ D Damaged/ Counterfeited Destroyed N None C Confiscated/ Seized	Property Code <small>(Enter # in property type column)</small> 01 Aircraft 02 Alcohol 03 Autos 04 Bicycles 05 Buses 06 Clothes 07 Computer 08 Consumables 09 Credit Card 10 Drugs 11 Drug Equip 12 Farm Equip 13 Firearms 14 Gambling Equipment 15 Heavy Construction 16 Household Goods 17 Jewelry 18 Livestock 19 Merchandise 20 Money 21 Negotiable Instrument 22 Non-negotiable Instru 23 Office Equipment 24 Other Motor Vehicle 25 Purse/Wallet 26 Radios/TV/VCR 27 Recordings 28 RV's 29 Structure - Single Occupancy Dwelling 30 Structure - Other Dwelling 31 Structure - Other Commercial 32 Structure - Industrial/Manufacturing 33 Structure - Public/Community 34 Structure - Storage 35 Structure - Other 36 Tools - Power/Hand 37 Trucks 38 Vehicle Parts/Accessories 39 Watercraft 77 Other (40)
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50 Stolen Vehicle Only <input type="checkbox"/> Area Stolen <input type="checkbox"/> Business <input type="checkbox"/> Rural	51 Ownership verified by: <input type="checkbox"/> Tag Receipt <input type="checkbox"/> Title <input type="checkbox"/> Bill of Sale <input type="checkbox"/> Other	52 Veh. Categories <input type="checkbox"/> Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> Victim's Vehicle <input type="checkbox"/> Abandoned <input type="checkbox"/> Suspect's Vehicle <input type="checkbox"/> Unauthorized Use			
53 Vehicle Year 2004	54 Vehicle Make GMC	55 Vehicle Model Envoy	56 Number Veh Stolen 0	57 Vehicle Description	
58 Vehicle Style 4-door	59 Vehicle Color Top SIL - Silver/Aluminum Bottom SIL - Silver/Aluminum	60 License DR1Z321	61 LST TX	62 LIY 2014	63 Tag Color WHT
64 Vehicle VIN Number 1GKDS13S442384992		65 Warrant Signed <input type="checkbox"/> Yes <input type="checkbox"/> No Warrant Number			
Motor Vehicle Recovery Only Required For 24XX UCR Code		66 Stolen in your jurisdiction? <input type="checkbox"/> Yes <input type="checkbox"/> No Where?		67 Recovered in your jurisdiction? <input type="checkbox"/> Yes <input type="checkbox"/> No Where?	

68 Case #	69 SFX	70 Case #	71 SFX	72 Case #	73 SFX
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74 Case Status <input checked="" type="radio"/> 1 Pending <input type="radio"/> 2 Inactive <input type="radio"/> 3 Closed	75 Multiple Cases Closed Listed Above <input type="checkbox"/> Multiple Cases Closed Listed On Supplement <input type="checkbox"/>	76 Entered NCIC/ACJIC <input type="checkbox"/> Yes <input type="checkbox"/> No	77 Case Disposition 1 Cleared By Arrest (Juvenile) 2 Cleared By Arrest (Adult) 3 Unfounded 4 Exceptional Clearance 5 Administratively Cleared	78 Exceptional Clearance (Circle One) A Suspect/Offender Dead B Prosecution Declined/ Other Prosecution C Extradition Denied D Victim Refused to Cooperate E Juvenile (No Custody) F Death of Victim	79 Reporting Officer Jared Greer Officer ID Number 201108
Date (MM/DD/YY)				80 Assisting Officer Phillip Hancock Officer ID Number 200610	81 Supervisor Approval Sgt Rob Cook Officer ID Number 9413
NIC/AIN #:				82 Watch Commander Lt Terri McCall Officer ID Number 8522	