

*Kenny* 1/24/08

**KYIBRS REPORT**

*CA*

**KSP RECORDS**

COMMONWEALTH OF KENTUCKY

<b>ADMINISTRATIVE</b>	AGENCY ORI/NAME <b>0561500 UNIV. OF LOUISVILLE POLICE</b>				INCIDENT NUMBER <b>KY 08-0057</b>				
	INCIDENT DATE/TIME		EXACT/ESTIMATE	REPORT DATE	RECEIVED	DISPATCHED	ARRIVED	CLEARED	
	<b>01/18/2008 09:00 TO 01/18/2008 12:00</b>		<b>ESTIMATE</b>	<b>01/23/2008</b>	<b>17:00</b>	<b>17:05</b>	<b>17:10</b>	<b>17:43</b>	
	REPORTED BY: <b>FELNER, ROBERT D</b>						HOW REPORTED		
	ADDRESS:						<b>RADIO</b>		
	CITY:						PHONE NUMBER:		
	EXACT LOCATION OF OFFENSE	<b>COLLEGE OF EDUCATION</b>						SECTOR NO:	
		ADDRESS: <b>109 BRANDEIS AVE</b>							
		CITY: <b>LOUISVILLE</b>				STATE: <b>KY</b>	ZIP CODE: <b>40208</b>		
		COUNTY: <b>JEFFERSON</b>		LATITUDE	<b>38 DEG</b>	<b>13.212 MIN</b>	LONGITUDE	<b>85 DEG</b>	<b>45.473 MIN</b>
<b>OFFENSE DATA</b>	SEQUENCE # <b>1</b> OF <b>1</b>		LOCATION TYPE: <b>PARKING LOT/GARAGE</b>		TYPE WEAPON/FORCE INVOLVED		CRIMINAL ACTIVITY/GANG IFO		
	OFFENSE DESCRIPTION: <b>CRIMINAL MISCHIEF 3RD DEGREE</b>								
	OFFENSE CODE: <b>01403</b>	ASCF CODE: <b>0</b>	KRS CODE: <b>512.040</b>	CLASS: <b>B</b>	DEGREE: <b>M</b>	COUNTS: <b>1</b>			
	BIAS MOTIVATION: <b>NONE (NO BIAS)</b>		METHOD ENTRY:	NUMBER PREMISES:					
	SCHOOL NAME: <b>UNIVERSITY OF LOUISVILLE</b>			SCHOOL TYPE: <b>UNIVERSITY/COLLEGE</b>		CAMPUS? <b>ON CAMPUS</b>			
	OFFENDER SUSPECTED OF USING: <b>NOT APPLICABLE</b>				COURT ORDER TYPE:				
	SEQUENCE # <b>1</b> OF <b>1</b>		LOCATION TYPE:		TYPE WEAPON/FORCE INVOLVED		CRIMINAL ACTIVITY/GANG IFO		
	OFFENSE DESCRIPTION:								
	OFFENSE CODE:	ASCF CODE:	KRS CODE:	CLASS:	DEGREE:	COUNTS:			
	BIAS MOTIVATION:		METHOD ENTRY:	NUMBER PREMISES:					
SCHOOL NAME:			SCHOOL TYPE:		CAMPUS?				
OFFENDER SUSPECTED OF USING:				COURT ORDER TYPE:					
SEQUENCE # <b>1</b> OF <b>1</b>		LOCATION TYPE:		TYPE WEAPON/FORCE INVOLVED		CRIMINAL ACTIVITY/GANG IFO			
OFFENSE DESCRIPTION:									
OFFENSE CODE:	ASCF CODE:	KRS CODE:	CLASS:	DEGREE:	COUNTS:				
BIAS MOTIVATION:		METHOD ENTRY:	NUMBER PREMISES:						
SCHOOL NAME:			SCHOOL TYPE:		CAMPUS?				
OFFENDER SUSPECTED OF USING:				COURT ORDER TYPE:					
<b>PROPERTY DATA</b>	SEQ #	PROPERTY DESCRIPTION		TYPE OF LOSS	VALUE	RECVRD VALUE	REC. COND.	DATE RECOVERED	
	<b>1</b>	<b>AUTOMOBILES</b>		<b>DESTROYED/DAMAGED/VANDALIZED</b>	<b>\$34,000.00</b>				
	TOTAL STOLEN VALUE: <b>\$0.00</b>		TOTAL RECOVERED VALUE: <b>\$0.00</b>		TOTAL VEHICLES STOLEN: <b>0</b>		TOTAL VEHICLES RECOVERED: <b>0</b>		
	<b>DRUGS</b>	DRUG SEQ	PROP SEQ	DRUG TYPE			QUANTITY	MEASUREMENT	
	<b>STATUS</b>	INCIDENT STATUS		CLEARANCE TYPE		CLEARED EXCEPTIONALLY		EX. CLEARANCE DATE	UCR REPORTING FOR OTHER AGENCY
		<b>OPEN</b>							YES <input type="checkbox"/>
		REPORTING OFFICER			UNIT/BADGE NUMBER		REVIEWED BY		TIME SPENT
		<b>W CRANE</b>			<b>5619</b>		<b>R BRINGHURST</b>		<b>33 MIN</b>

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<b>VICTIM DATA</b>	VICTIM SEQUENCE		VICTIM NAME						PHONE	
	1 of 1		FELNER, ROBERT D							
	Address Unknown								VICTIM TYPE: SCHOOL STAFF	
	CITY:		STATE:		KY RESIDENT: RESIDENT					
	SSN	HEIGHT	WEIGHT	EYE COLOR		HAIR COLOR				
		5' 06"	155 lbs	BROWN		BROWN				
	GENDER		RACE		ETHNIC ORIGIN			PEACE OFFICER?		
	MALE		WHITE		NOT HISPANIC			YES <input type="checkbox"/>		
	NBR	OFFENDER #	VICTIM RELATIONSHIP TO OFFENDER: VICTIM WAS		NBR	OFFENDER #	VICTIM RELATIONSHIP TO OFFENDER: VICTIM WAS		NBR	INJURY TYPE
VICTIM OF OFFENSE(S)			AGG ASSAULT/ HOMICIDE CIRC			ADDTL JUSTIFIABLE HOMICIDE CIRC				
01403										
LEOKA ASSIGNMENT				LEOKA ACTIVITY						
<b>SUSPECT/ARRESTEE DATA</b>	SUSPECT SEQ. #		NAME:						ARRESTED?	ARREST DATE
	of		ALIAS:						YES <input type="checkbox"/>	
	ADDRESS						DATE OF BIRTH:	PHONE:	KY RESIDENT:	
	CITY:			STATE:	ZIP CODE:					
	SSN	SEX	RACE		ETHNIC ORIGIN	HEIGHT	WEIGHT	EYE COLOR	HAIR COLOR	
	ARRESTEE SEQ. #	MULTIPLE ARREST IND.	ARREST TYPE		RELATED CITATION NUMBERS					
	of				1	4	8			
	ARRESTEE ARMED WITH				2	5	7			
					3	6	9			
<b>SUSPECT/ARRESTEE DATA</b>	SUSPECT SEQ. #		NAME:						ARRESTED?	ARREST DATE
	of		ALIAS:						YES <input type="checkbox"/>	
	ADDRESS						DATE OF BIRTH:	PHONE:	KY RESIDENT:	
	CITY:			STATE:	ZIP CODE:					
	SSN	SEX	RACE		ETHNIC ORIGIN	HEIGHT	WEIGHT	EYE COLOR	HAIR COLOR	
	ARRESTEE SEQ. #	MULTIPLE ARREST IND.	ARREST TYPE		RELATED CITATION NUMBERS					
	of				1	4	7			
	ARRESTEE ARMED WITH				2	5	8			
					3	6	9			
<b>WITNESS DATA</b>	WITNESS SEQUENCE		WITNESS NAME						PHONE	
	of									
	ADDRESS:								DATE OF BIRTH	
	CITY:			STATE:	ZIP CODE:		SSN:			
	WITNESS SEQUENCE		WITNESS NAME						PHONE	
	of									
ADDRESS:								DATE OF BIRTH		
CITY:			STATE:	ZIP CODE:		SSN:				

**KYIBRS REPORT: UOR2 SUPPLEMENT**

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**SYNOPSIS:**

Victim reports unknown person(s) damaged the top of his 2006 BMW, lic# 3079 U of L plate 2008, sometime during the morning hours.

**MODUS OPERANDI:**

**DATE & TIME OF OCCURRENCE:**

**ACCUSED:**

**SUSPECTS:**

**STOLEN PROPERTY:**

**OTHER PROPERTY:**

**EVIDENCE & HOW MARKED:**

**EVIDENCE DISPOSITION:**

**INVESTIGATION:**

**STATUS OF CASE:**

open

**ATTACHMENT**