

# Boston Police

William B. Evans, Police Commissioner

## INCIDENT REPORT

ORIGINAL

STATUS: APPROVED

KEY SITUATIONS		COMPLAINT NO.	RPT DIST.	CAD RA	RPT RA	CLEAR. DIST.		
OTHERS		[REDACTED]	C11	000	0			
UCR INCIDENT DESCRIPTION		UCR FINAL INCIDENT DESCRIPTION		STATUS	DATE OCCURRED FROM	DATE OCCURRED TO		
DEATH INVESTIGATION		HOMICIDE		Exceptionally Cleared	[REDACTED]			
LOCATION OF INCIDENT			APT	DISPATCH TIME	TIME OCCURRED FROM	TIME OCCURRED TO		
[REDACTED]			[REDACTED]	[REDACTED]	[REDACTED]			
NEIGHBORHOOD		TYPE OF BUILDING		PLACE OF ENTRY	WEATHER	LIGHTING		
[REDACTED]		[REDACTED]		[REDACTED]	[REDACTED]	INSIDE - WELL LIT		
TYPE OF WEAPON-TOOL		SUSPECT MODE OF TRANSPORTATION		VICTIM'S ACTIVITY		SUSPECT RELATIONSHIP TO VICTIM		
[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		
UNUSUAL ACTIONS AND STATEMENTS OF PERPETRATOR								
[REDACTED]								
P O R T E R S	1	TYPE		NAME (LAST, FIRST, MI)	S.S. NO.	BOOKING NO.	DOCKET NO.	
		VICTIM		KNOWN TO THE COMMONWEALTH		0		
		ALIAS		ADDRESS	GENDER	RACE	DOB	
					[REDACTED]	[REDACTED]		
		HEIGHT	WEIGHT	BUILD	HAIR	EYES	AGE	
				N/A			0	
	OCCUPATION		MARITAL STATUS	EMAIL ADDRESS	CONTACT #1	CONTACT #2		
SPECIAL CHARACTERISTICS(INCLUDING CLOTHING)								
[REDACTED]								
NARRATIVE AND ADDITIONAL INFORMATION:								
<p>About 04:05 P.M. on Saturday, November 08, 2014, Officers Tibets and Bellissimo in the H104F responded to a radio call for a "Person Shot" at [REDACTED]</p> <p>Upon arrival, officers observed a [REDACTED] / victim (Known to the Commonwealth) laying on the bedroom floor inside the apartment. Boston EMS A11 (EMT's Bellim and Deller) were on scene and declared the victim deceased at 04:12 P.M. on Saturday, [REDACTED]</p> <p>Units responded were as follows: H103F (P.O. Porter and Moccia), HK01F (P.O. Burns and Layden), H679F (P.O. Jones), HT55F (P.O. Principe), H681F (P.O. Lee), H102F (P.O. O'Brien and Callahan), H445F (P.O. James), H447F (P.O. Wilson), H902 (SGT. Mackinnon), H817 (DET. McPherson), H807 (DET. Duran), H805 (DET. Sullivan), H980 (SGT DET. Webb), H983 (SGT DET. Cullity), TE514 (P.O. Pero), VK901 (SGT Hines), VK11 (P.O. Burrows and Alves), VD196 (P.O. Dillon), VD210 (P.O. Cazeau), V915 (SGT DET Bulman), V951 (SGT DET Assad), VDC14 (P.O. Rogers), VKA1 (LT DET. Fitzpatrick), V840 (DET Munroe), V907 (SGT DET Sullivan), B615F (P.O. Goncalves), B614F (P.O. Daveiga), B801 (DET. Stanton), VC03 (Capt. Hasson), VA04 (LT. DET. Greeley), YC04 (SUP. INT. Memer), YC14 (DEP SUP Bailey), YD21 (DEP SUP Clark-Morgan), YC22 (DEP SUP Brown), YC01 (Commissioner Evans), Assistant District Attorney (Demore), Assistant District Attorney (Fredette)</p>								
UNIT ASSIGNED	SHIFT	REPORTING OFFICER'S NAME			REPORTING OFFICER'S ID	PARTNER'S ID		
H104F	2	HAROLD F. TIBETS			116880	80344		
SPECIAL UNITS NOTIFIED(REPORTING)								
AREA C-11;HOMICIDE UNIT								
DATE OF REPORT	TIME COMPLETED	APPROVING SUPERVISOR NAME			APPROVING SUPERVISOR ID			
[REDACTED]	[REDACTED]	DANIEL J TRACEY			10092			

# Boston Police

William B. Evans, Police Commissioner

## INCIDENT REPORT

ORIGINAL

STATUS: APPROVED

KEY SITUATIONS <b>WARRANT ARREST</b>		COMPLAINT NO. [REDACTED]	RPT DIST. E5	CAD RA 000	RPT RA 0	CLEAR. DIST. E5		
UCR INCIDENT DESCRIPTION <b>WARRANT ARREST</b>		UCR FINAL INCIDENT DESCRIPTION <b>WARRANT ARREST</b>		STATUS Cleared By Arrest		DATE OCCURRED FROM [REDACTED]	DATE OCCURRED TO [REDACTED]	
LOCATION OF INCIDENT [REDACTED]				APT. [REDACTED]	DISPATCH TIME [REDACTED]	TIME OCCURRED FROM [REDACTED]	TIME OCCURRED TO [REDACTED]	
NEIGHBORHOOD [REDACTED]		TYPE OF BUILDING [REDACTED]		PLACE OF ENTRY FRONT DOOR	WEATHER SUNNY - DAY	LIGHTING [REDACTED]		
TYPE OF WEAPON-TOOL [REDACTED]		SUSPECT MODE OF TRANSPORTATION [REDACTED]		VICTIM'S ACTIVITY [REDACTED]		SUSPECT RELATIONSHIP TO VICTIM [REDACTED]		
UNUSUAL ACTIONS AND STATEMENTS OF PERPETRATOR [REDACTED]								
PERSONS	1	TYPE VICTIM		NAME (LAST, FIRST, MI) COMM OF MASS		S.S. NO. [REDACTED]	BOOKING NO. 0	DOCKET NO. [REDACTED]
	ALIAS		ADDRESS		GENDER	RACE	DOB	AGE 0
	HEIGHT	WEIGHT	BUILD	HAIR		EYES		
	OCCUPATION		MARITAL STATUS	EMAIL ADDRESS		CONTACT #1	CONTACT #2	
	SPECIAL CHARACTERISTICS(INCLUDING CLOTHING) [REDACTED]							
	PERSONS	2	TYPE WITNESS		NAME (LAST, FIRST, MI) (V981) SGT DET ALBERT - ET AL		S.S. NO. [REDACTED]	BOOKING NO. 0
ALIAS		ADDRESS 20 VINE ST, CHARLESTOWN MA		GENDER	RACE	DOB	AGE 0	
HEIGHT		WEIGHT	BUILD	HAIR		EYES		
OCCUPATION		MARITAL STATUS	EMAIL ADDRESS		CONTACT #1	CONTACT #2		
SPECIAL CHARACTERISTICS(INCLUDING CLOTHING) [REDACTED]								
PERSONS		3	TYPE OFFENDER		NAME (LAST, FIRST, MI) [REDACTED]		S.S. NO. [REDACTED]	BOOKING NO. [REDACTED]
	ALIAS		ADDRESS [REDACTED]		GENDER	RACE	DOB	AGE
	HEIGHT	WEIGHT	BUILD	HAIR		EYES		
	OCCUPATION		MARITAL STATUS	EMAIL ADDRESS		CONTACT #1	CONTACT #2	
	SPECIAL CHARACTERISTICS(INCLUDING CLOTHING) [REDACTED]							
	NARRATIVE AND ADDITIONAL INFORMATION: About 1517 hours on 01/08/2015 members of the Boston Police Department Fugitive Unit under the direct supervision of (V981) Sgt Det Albert and while conducting Operation [REDACTED] did place suspect [REDACTED] (dob [REDACTED]) under arrest at [REDACTED]. Officers placed the suspect under arrest by virtue of a DEFAULT WARRANT issued on 07/28/2014 at SUFFOLK SUPERIOR COURT by Judge Rouse. WARRANT REF [REDACTED] DOCKET [REDACTED] HEROIN/MORPHINE/OPIUM, TRAFFICKING IN. Suspect transported to E5 and booked in the usual manner. Warrant Unit to be notified via fax.							
UNIT ASSIGNED VD223	SHIFT 2	REPORTING OFFICER'S NAME MICHAEL A BROWN			REPORTING OFFICER'S ID 95175	PARTNER'S ID 11088		
SPECIAL UNITS NOTIFIED(REPORTING) <b>WARRANT UNIT</b>								
DATE OF REPORT [REDACTED]		TIME COMPLETED [REDACTED]		APPROVING SUPERVISOR NAME WILLIAM J SLAVIN		APPROVING SUPERVISOR ID 8890		



# Incident Report

Case Number ██████████	CAD Incident # ██████████
Report Type Incident Report	Page 1 of 7
Date / Time Occurred ██████████ to ██████████	Date / Time Reported ██████████

Arrested Suspects 2	Additional Suspects	Unknown Suspects	Victims 1	Other Persons	Vehicles 1	Items	Evidence Count	Leoka Count	File #		
<input type="checkbox"/> Drugs	<input type="checkbox"/> DVIP	<input type="checkbox"/> Juvenile	<input type="checkbox"/> Child Present	<input type="checkbox"/> Elderly	<input type="checkbox"/> Sexual Assault	<input type="checkbox"/> CRU - Hate/Bias	<input type="checkbox"/> Licensed Premise	<input type="checkbox"/> Disabled	<input type="checkbox"/> Homeland Security	<input type="checkbox"/> Homeland Security - UASI	<input type="checkbox"/> Home Invasion
<input type="checkbox"/> Car Jack	<input checked="" type="checkbox"/> Gun	<input type="checkbox"/> Gang	<input type="checkbox"/> Shols Fired	<input type="checkbox"/> Victim Shot	<input type="checkbox"/> Victim Stabbed	<input type="checkbox"/> Other Agency/Unit Notified	<input type="checkbox"/> Warrant Arrest	<input type="checkbox"/> Search Warrant	<input type="checkbox"/> Licensed Premise Violation	<input type="checkbox"/> LPR	<input type="checkbox"/> Human Trafficking
<input type="checkbox"/> Bicycle	<input type="checkbox"/> School	<input type="checkbox"/> Homeless	<input type="checkbox"/> Sex Offender								

Incident Details			
Unit Number	Clearance Disposition	Cleared by Exception	Exceptional Clearance Date
Situation Found On Site		Case Status	
Location Given By Dispatcher			

Incident Address			
Street Address ██████████			
City BSTN	State MASSACHUSETTS	Zip ██████████	District DISTRICT B3

Administrative Info		
Reporting Officer BURROWS, JOHN	Employee Number 099722	Approving Supervisor BICKERTON, DEAN

## OFFENSE

<input type="checkbox"/> Upgrade/Downgrade Offense	Upgrade/Downgrade Offense Code
<input checked="" type="checkbox"/> Primary Offense	Crime Description WEAPON - FIREARM - CARRYING / POSSESSING, ETC
Offense Code Value 01501	Attempted/Completed Completed
	Premise Type Highway/Road/Alley
Circumstances Bias	
None - No Bias	
Criminal Activity 1 Possessing / Concealing	Criminal Activity 2 Offender Using 2
	Criminal Activity 3 Offender Using 3
# Premise Entered	Home Invasion
	Domestic Violence
	Gang Activity
Gang Type #1	Gang Name #1
Gang Type #2	Gang Name #2
Drug Related	Drug Type
	Drug Origin
	Drug Precursors
MO Panel	Entry Area
Entry Type	Entry Method
Entry Point 1	Entry Point 2
	Exit Point 1
Exit Point 2	Target Area
	Property Target 1
Property Target 2	Property Target 3
	Victim Target
Time of Day	Victim Activity
	Action 1 to Premises
Action 2 to Premises	Action 3 to Premises
	Action 1 on Victim
Action 2 on Victim	Action 3 on Victim
	Other Action 1
Other Action 2	Other Action 3
	Solicited Offered 1
Solicited Offered 2	Solicited Offered 3
	Weapon 1 Handgun
Weapon 1 Auto	Weapon 2 Weapon 2 Auto
	Weapon 3 Arson
Weapon 3	Weapon 3 Auto



# Incident Report

Case Number [REDACTED]	CAD Incident # [REDACTED]
Report Type Incident Report	Page 2 of 7
Date / Time Occurred 09/11/2015 20:38 to	Date / Time Reported 09/11/2015 20:38

Precipitating Circumstance	Instrument Used
Unusual Actions and Statements of Suspect	

SUSPECT  Known  Unknown  Arrested

Name (Last, First Middle)  
[REDACTED]

Suffix	Nickname	Race	Gender	SSN	Date of Birth	Age	Age Range to
Height	Weight	Driver's License #	DL State	Local ID	SID		
FBI #	SBI #		Place of Birth			Citizenship	
Ethnicity	Marital Status						
Preferred	Contact #1 000-000-0000	Contact #2	Email Address				

Suspect Home Address

Street Address  
[REDACTED]

City [REDACTED] State [REDACTED] Zip [REDACTED]

Suspect Employment Information

Student  Employer / School  Occupation

Street Address

City [REDACTED] State [REDACTED] Zip [REDACTED] Work Phone [REDACTED] Hours of Employment [REDACTED]

Details

Hair Color	Hair Length	<input type="checkbox"/> Glasses	Eye Color	Build	Facial Hair	Facial Hair Color
Voice	Complexion	Hand Preference				

Clothing Description

Trademarks of Suspect

Injury 1 [REDACTED] Injury 2 [REDACTED] Injury 3 [REDACTED] Injury 4 [REDACTED] Injury 5 [REDACTED]

Hospitalized  Hospital Facility [REDACTED] Resident [REDACTED]

MO Panel	Entry Type	Entry Area	Entry Method
	Entry Point	Exit Point	Target Area
	Property Target 1	Property Target 2	Property Target 3
	Victim Target	Time of Day	Victim Activity
	Action 1 on Victim	Action 2 on Victim	Action 3 on Victim
	Action 1 to Premises	Action 2 to Premises	Action 3 to Premises
	Other Action 1	Other Action 2	Other Action 3
	Solicited Offered 1	Solicited Offered 2	Solicited Offered 3
	Weapon 1	Weapon 2	Weapon 3
	Weapon 1 Type	Weapon 2 Type	Weapon 3 Type
	Weapon 1 Caliber	Weapon 2 Caliber	Weapon 3 Caliber



# Incident Report

Case Number [REDACTED]	CAD Incident # [REDACTED]
Report Type Incident Report	Page 3 of 7
Date / Time Occurred [REDACTED] to [REDACTED]	Date / Time Reported [REDACTED]

Weapon 1 Color	Weapon 2 Color	Weapon 3 Color
Arson	Precipitating Circumstance	Instrument Used
Comments		

**Associated Offenses**

Offense  
**WEAPON - FIREARM - CARRYING / POSSESSING, ETC**  Associated With Suspect

**ARREST**

Arrested As <input checked="" type="checkbox"/> Adult <input type="checkbox"/> Juvenile	Arrest Number [REDACTED]	RICI Booking Num [REDACTED]	Arrest Action Arrested
Disposition	Arrest Date/Time [REDACTED]	Booking District DISTRICT B3	<input type="checkbox"/> Arrested on Scene

**Arrest Address**

Street Address  
[REDACTED]

City  
[REDACTED] State  
[REDACTED] Zip  
[REDACTED]

Test Given	Test Date/Time	Test Results	Test Administered By
Test Given	Test Date/Time	Test Results	Test Administered By

Arresting Officer BURROWS, JOHN G. 099722	Transporting Officer
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Weapon 1 Handgun	Automatic Weapon 1	Weapon 2
Automatic Weapon 2	Multiple Clearance NOT APPLICABLE	Juvenile Disposition
Warrant Number	Warrant Signed By	<input type="checkbox"/> OUI Alcohol Arrest

**DUI/OUI Information**

Public Way	Observed Driving	Glassy Eyes	PBT
Unsteady on Feet	Bloodshot Eyes	Crash	Offered Test
Slurred Speech	Odor		
Other Grounds			

**Associated Charges**

Charge  
Robbery - Armed, Chain Store  Felony  Misdemeanor

Counts Ball  
1

**Statement of Probable Cause**

see narrative

**SUSPECT**  Known  Unknown  Arrested

Name (Last, First Middle)  
[REDACTED]

Suffix	Nickname	Race	Gender	SSN	Date of Birth	Age	Age Range to
Height	Weight	Driver's License #	DL State	Local ID	SID		
FBI #		SBI #		Place of Birth			Citizenship



# Incident Report

Case Number [REDACTED]	CAD Incident # [REDACTED]
Report Type Incident Report	Page 4 of 7
Date / Time Occurred [REDACTED] to [REDACTED]	Date / Time Reported [REDACTED]

Ethnicity [REDACTED]	Marital Status [REDACTED]		
Preferred [REDACTED]	Contact #1 [REDACTED]	Contact #2 [REDACTED]	Email Address [REDACTED]

Suspect Home Address			
Street Address [REDACTED]			
City [REDACTED]	State [REDACTED]	Zip [REDACTED]	

Suspect Employment Information				
<input type="checkbox"/> Student	Employer / School [REDACTED]	Occupation NA		
Street Address [REDACTED]				
City [REDACTED]	State [REDACTED]	Zip [REDACTED]	Work Phone [REDACTED]	Hours of Employment [REDACTED]

Details						
Hair Color [REDACTED]	Hair Length [REDACTED]	<input type="checkbox"/> Glasses	Eye Color [REDACTED]	Build [REDACTED]	Facial Hair [REDACTED]	Facial Hair Color [REDACTED]
Voice [REDACTED]	Complexion [REDACTED]	Hand Preference [REDACTED]				

Clothing Description [REDACTED]				
Trademarks of Suspect [REDACTED]				
Injury 1 [REDACTED]	Injury 2 [REDACTED]	Injury 3 [REDACTED]	Injury 4 [REDACTED]	Injury 5 [REDACTED]
<input type="checkbox"/> Hospitalized	Hospital Facility [REDACTED]	Resident [REDACTED]		

MO Panel	Entry Type	Entry Area	Entry Method
Entry Point	Exit Point	Target Area	
Property Target 1	Property Target 2	Property Target 3	
Victim Target	Time of Day	Victim Activity	
Action 1 on Victim	Action 2 on Victim	Action 3 on Victim	
Action 1 to Premises	Action 2 to Premises	Action 3 to Premises	
Other Action 1	Other Action 2	Other Action 3	
Solicited Offered 1	Solicited Offered 2	Solicited Offered 3	
Weapon 1	Weapon 2	Weapon 3	
Weapon 1 Type	Weapon 2 Type	Weapon 3 Type	
Weapon 1 Caliber	Weapon 2 Caliber	Weapon 3 Caliber	
Weapon 1 Color	Weapon 2 Color	Weapon 3 Color	
Arson	Precipitating Circumstance	Instrument Used	

Comments [REDACTED]	
Associated Offenses	

Offense WEAPON - FIREARM - CARRYING / POSSESSING, ETC	<input type="checkbox"/> Associated With Suspect
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ARREST			
Arrested As <input checked="" type="checkbox"/> Adult <input type="checkbox"/> Juvenile	Arrest Number [REDACTED]	RIC1 Booking Num [REDACTED]	Arrest Action Arrested
Disposition [REDACTED]	Arrest Date/Time [REDACTED]	Booking District [REDACTED]	<input type="checkbox"/> Arrested on Scene



# Incident Report

Case Number [REDACTED]	CAD Incident # [REDACTED]
Report Type Incident Report	Page 5 of 7
Date / Time Occurred [REDACTED] to [REDACTED]	Date / Time Reported [REDACTED]

**Street Address**      **Arrest Address**

[REDACTED]

City [REDACTED]	State [REDACTED]	Zip [REDACTED]
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Test Given	Test Date/Time	Test Results	Test Administered By
Test Given	Test Date/Time	Test Results	Test Administered By

Arresting Officer DELAHANTY, BRIAN R	Transporting Officer
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Weapon 1 Handgun	Automatic Weapon 1	Weapon 2
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Automatic Weapon 2	Multiple Clearance NOT APPLICABLE	Juvenile Disposition	Card Number
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Warrant Number	Warrant Signed By	<input type="checkbox"/> OUI Alcohol Arrest
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**DUI/OUI Information**

Public Way	Observed Driving	Glassy Eyes	PBT
Unsteady on Feet	Bloodshot Eyes	Crash	Offered Test
Slurred Speech	Odor		

Other Grounds

**Associated Charges**

Charge Robbery - Armed, Variety Store Counts      Bail	<input type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor
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**Statement of Probable Cause**

see narrative

<b>VICTIM</b>	Victim Type Society						
Name (Last, First Middle) COMMONWEALTH OF MASSACHUSETTS							
Suffix	Nickname	Race	Gender	SSN	Date of Birth	Age	Age Range to
Infant Type	Height	Weight	Driver's License #	DL State			
Place of Birth		Citizenship					
Ethnicity		Marital Status					
Preferred	Contact #1	Contact #2	Email Address				
<b>Victim Home Address</b>							
Street Address							
City		State	Zip				
<b>Employment Information</b>							
<input type="checkbox"/> Student	Employer / School			Occupation			
College Name		<input type="checkbox"/> On Campus <input type="checkbox"/> Yes <input type="checkbox"/> No					
Street Address							
City		State	Zip	Work Phone	Hours of Employment		



# Incident Report

Case Number [REDACTED]	CAD Incident # [REDACTED]
Report Type Incident Report	Page 6 of 7
Date / Time Occurred [REDACTED] to [REDACTED]	Date / Time Reported [REDACTED]

Details			
Hair Color	Eye Color	Build	Resident
Injury 1		Injury Description	
Injury 2	Injury 3	Injury 4	Injury 5
Victim Condition		Victim-Offender	
<b>A. Assault/Homicide</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	A. Assault/Homicide Circumstance 1		A. Assault/Homicide Circumstance 2
<b>Justifiable Homicide</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	Justifiable Homicide Circumstance		
<input type="checkbox"/> Victim Hospitalized	Hospital Facility		Hospital Description
<input type="checkbox"/> Under Influence Alcohol? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	<input type="checkbox"/> Under Influence Drugs? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	<input type="checkbox"/> Domestic Disturbance	<input type="checkbox"/> Domestic Violence Victim Transported <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Violation of Protective Order <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Cohabitant <input type="checkbox"/> Yes <input type="checkbox"/> No		

Associated Offenses										
Offense WEAPON - FIREARM - CARRYING / POSSESSING, ETC									<input checked="" type="checkbox"/> Associated With Victim	
<b>VEHICLE</b>	Vehicle Year	Make	Model	VIN	<input type="checkbox"/> VIN Validation Off		Tag Number			
State	Plate Type	Tag Month	Exp. Year	Body Style	Top Color	Bottom Color				
Vehicle Type				Status			OTHER			
Decal #	NIC									
Other Identifiers										

Registered Owner Info					
Registered Owner Name (Last, First, MI) <input type="checkbox"/> Business			Gender	Race	DOB
Street Address					
City		State	Zip		
Insurance Company	Policy Number	Insurance Expiration	Financed By/Titleholder		

Vehicle Elements																			
<input type="checkbox"/> Stolen <input type="checkbox"/> Recovered		Keys In Ignition <input type="checkbox"/> Yes <input type="checkbox"/> No		Doors Locked <input type="checkbox"/> Yes <input type="checkbox"/> No		Windows Closed <input type="checkbox"/> Yes <input type="checkbox"/> No		Ignition Locked <input type="checkbox"/> Yes <input type="checkbox"/> No		Trunk Locked <input type="checkbox"/> Yes <input type="checkbox"/> No		Radio In Car <input type="checkbox"/> Yes <input type="checkbox"/> No		Repo. Check <input type="checkbox"/> Yes <input type="checkbox"/> No		Tow List Check <input type="checkbox"/> Yes <input type="checkbox"/> No		Stolen Value	
How Vehicle Entered					How Vehicle Taken														
Recovered By			Recovery Date		Recovered Value			Recovery Code											

Recovery Address										
Street Address										
City			State			Zip				
<input type="checkbox"/> Impounded <input type="checkbox"/> Towed	Tow Report Number			Wrecker Service			Date Wrecker Arrived		Time Wrecker Arrived	
Location Towed From			Location Towed To			Impounded By			Mileage	





# Incident Report

Case Number [REDACTED]	CAD Incident # [REDACTED]
Report Type Incident Report	Page 7 of 7
Date / Time Occurred [REDACTED]	Date / Time Reported [REDACTED]

Wrecker Driver Name	Tow Truck Operator Signature
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Associated Persons	
Related Person	Involvement Operator

Comment
OPERATOR WAS [REDACTED] DOB [REDACTED] OF [REDACTED]

Public Narrative  
As a result of an investigation by District 11 detectives into the armed robbery (firearm) of the [REDACTED] at [REDACTED] that occurred on [REDACTED] an arrest warrant was issued for [REDACTED] DOB [REDACTED] (Dorchester docket # [REDACTED] Armed Robbery/ Assault by Means Dangerous Weapon). A second subsequent investigation of an armed robbery (firearm) in [REDACTED] led to the positive identification of [REDACTED] and further investigation of this robbery led to probable cause being established to arrest [REDACTED] accomplice in this crime, [REDACTED] (DOB [REDACTED])

In an attempt to apprehend these individuals, members of the Boston Police Special Investigations Unit (SIU) were able to locate both suspects at the corner of [REDACTED] and [REDACTED] [REDACTED]

As Officers Burrows and Delahanty turned onto [REDACTED] from [REDACTED] they observed [REDACTED] and [REDACTED] leaning into a [REDACTED] [REDACTED]. Officers pulled next to the vehicle and exited their unmarked cruiser with their badges clearly displayed. Fearing the suspects may be armed, Officers drew their department issued firearms and ordered [REDACTED] and [REDACTED] to the ground. The suspects complied and were placed into handcuffs. While conducting a pat frisk of [REDACTED], Officer Delahanty felt what he immediately believed to be a firearm in [REDACTED] right pant pocket. Officer Delahanty alerted the other Officers to the presence of a firearm and removed the firearm. Officer Delahanty read [REDACTED] his Miranda Rights from a printed card then demand to see his license to carry a firearm. [REDACTED] failed to produce one. The operator on the [REDACTED] (DOB [REDACTED]) was ordered from the vehicle and was temporarily detained. [REDACTED] was eventually FIO'd and released.

The firearm, a Bryco 38 loaded with seven rounds of ammunition, was fumed and processed by Detectives Merced and Higgins of the Youth Violence Strike Force. [REDACTED] black Alcatel One Touch cell phone (model 7040N) and [REDACTED] black Kyrocera cell phone (model 51360) were seized by Brookline Detective [REDACTED]

[REDACTED] was charged with Unlawful Possession of a Firearm, Unlawful Possession of Ammunition, Carrying a Loaded Firearm and Armed Robbery (on probable cause out of Brookline). [REDACTED] was arrested on an Armed Robbery warrant cleared under [REDACTED]

On scene from SIU were the following: Lt Det. Cullity (VA3), Sgt. Det. Perkins (V931), Sgt. Det. Murphy (V932), Det. Brown (V859), Det Henriquez (VD02), ATF SA Higgins (VD150), Det. Fratalia (VD10), Officer Brito (VD10), Det. Boyle (V875).