

EVENT REPORT
 Montgomery County, Maryland
 Department of Police

205-030-3990

1. VICTIM (PERSON, FIRM, AGENCY) COLLINS, RON SGT.				2. DST-CR NUMBER R05 052288			
3. ADDRESS 7300 CALHOUN PL., #300, ROCKVILLE, MD 20855				4. R.V.G. CODE NA		5A. CLASSIFICATION 2938	
6A. VICTIM'S PLACE OF EMPLOYMENT OR SCHOOL MONTGOMERY COUNTY POLICE				7. RACE - SEX - D.O.B. W M - -		8. PHONE RES. BUS 240-773-5440	
6B. ADDRESS S/A #3				9. CRIME/INCIDENT POLICE INFORMATION		10. CONN. CR. NO. <input type="checkbox"/> MASTER <input type="checkbox"/>	
12. NATURE OF INJURIES AND LOCATION ON BODY NONE				13. LOCATION OF CRIME OR INCIDENT S/A #3		14. SOCIAL SECURITY NUMBER REFUSED	
15. VICTIM TREATED <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> RELEASED				16. WHEN OCCURRED MO - DAY - YR 09 - 27 - 05 TO - - -		17. WHEN REPORTED MO - DAY - YR 09 - 27 - 05	
17. UNIT NOTIFIED <input type="checkbox"/> NAME:				18A. COMPLAINANT'S NAME (LAST, FIRST, MIDDLE) S/A #1		18B. RACE - SEX - AGE W M	
19. TSS NOTIFIED <input type="checkbox"/> LATENTS <input type="checkbox"/> PHOTOS <input type="checkbox"/> NAME:				18B. COMPLAINANT'S ADDRESS S/A #3		18C. CITY-STATE-ZIP S/A #8	
20. NAME: W - WITNESS; P - PARENT; G - GUARDIAN; O - OTHER RELATIVE							
21. TYPE OF DOCUMENT		DATE OF DOCUMENT		DOCUMENT NO.		NAME ON DOCUMENT	
NAME OF ISSUER		ADDRESS		MADE PAYABLE TO		SIGNATURE ON FACE	
REASON NOT HONORED		TYPE OF TRANSACTION		TYPE OF PROPERTY OR SERVICE OBTAINED		AMOUNT OF DOCUMENT	
CASH RECEIVED		22. DESCRIBE TYPE OF AREA OR PREMISES POLICE INFORMATION					
23. MEANS - TOOL, WEAPON USED IN CRIME S/A #22				24. METHOD - HOW CRIME WAS COMMITTED S/A #22			
25. POINT OF ENTRY				26. TRADEMARKS OF SUSPECT(S) (ACTION OR CONVERSATION DISTINGUISHING THE SUSPECT)			
27A. SUSPECT <input type="checkbox"/> ARRESTED <input type="checkbox"/> WARRANT/DCS ON FILE <input type="checkbox"/> WARRANT DCS SERVED <input type="checkbox"/>				MCP I.D. #		ARMED WITH	
RACE	SEX	AGE	D.O.B.	HEIGHT	WEIGHT	EYES	LENGTH - COLOR OF HAIR
SUSPECT/DEFENDANT PHYSICAL AND CLOTHING DESCRIPTIONS				ADDRESS OR POSSIBLE LOCATION			
27B. SUSPECT <input type="checkbox"/> ARRESTED <input type="checkbox"/> WARRANT/DCS ON FILE <input type="checkbox"/> WARRANT DCS SERVED <input type="checkbox"/>				MCP I.D. #		ARMED WITH	
RACE	SEX	AGE	D.O.B.	HEIGHT	WEIGHT	EYES	LENGTH - COLOR OF HAIR
SUSPECT/DEFENDANT PHYSICAL AND CLOTHING DESCRIPTIONS				ADDRESS OR POSSIBLE LOCATION			
28. VEHICLE USED IN CRIME <input type="checkbox"/> KNOWN TO OPERATE <input type="checkbox"/>		YEAR	MAKE	MODEL	BODY STYLE	COLOR(S)	TAG NO.
29. RADIO LOOK OUT <input type="checkbox"/> LOOK OUT CANCELLED <input type="checkbox"/>		WANT INDEX <input type="checkbox"/> WANT INDEX CANCELLED <input type="checkbox"/>		E.C.C. OP. #		30. TOTAL VALUE STOLEN	
31. TOTAL VALUE RECOVERED		32. DRUG RELATED <input type="checkbox"/> ALCOHOL RELATED <input type="checkbox"/>					
33. HATE VIOLENCE RACIAL <input type="checkbox"/> ETHNIC <input type="checkbox"/> RELIGIOUS <input type="checkbox"/> SEX ORIENT <input type="checkbox"/> DISAB. <input type="checkbox"/>				34. STATUS: <input type="checkbox"/> OPEN <input type="checkbox"/> CLOSED BY: <input type="checkbox"/> ARREST <input checked="" type="checkbox"/> EXCEPTION <input type="checkbox"/> UNFOUNDED			
Item No.		DOCKET #/STATE TRACKING#/CITATION #				PROPERTY VALUE	
STL		REC.		UCR CLASS		205-052-288	
VICTIMS: 1) [redacted], W/M, [redacted]-60							
2) [redacted], W/F							
SUSPECT: FATHER JAMES POWDERLY							
DISTRIBUTION: GA - SA - YD CAP - CP - FM SID OTHER:		INVESTIGATING OFFICER (PRINT) SGT. R. COLLINS		NO. # 0824		CAR # 9Y40	
INVESTIGATING OFFICER (PRINT)		I.D.#		DATE MO - DAY - YR 09 - 27 - 05		APPROVED BY (PRINT) SGT. R. COLLINS	
DATA SYSTEMS		I.D.#		CAR #		CASE TALLY	
ADULT <input type="checkbox"/> JUVENILE <input type="checkbox"/>		I.D. #					

M.C.P. FORM 100

Records

Investigative

District

