## **HURON POLICE**

TERRY GRAHAM

**Reviewing Supervisor:** 

**Incident Number** 

20-190812

417 MAIN ST HURON, OHIO 419-433-4114		Inc	Incident / Offense Report			20-190812		
Incident	Method Received T	Time Received 13:20:00	Time Dispatched 13:24:00	Time Arri 13:29:		Cleared:		
R	eport Date / Time	Incident	Occurred From		Incident Occ	ured To		
	Date Time	Date	Time		Date	Time		
Tuesda	ny 07/02/2019 13:43:57	7		Tuesd	lay 07/02/2019	13:33:00		
I ocation of the Incide	nt (Street #, Street, Apt. #,	City State 7in)					Zone	
313 WILLIAMS ST		City, State, Zip)					NW	
Persons: GIOVAN	NI ORLANDO DELMO	NICO JAMES - SUB	Property:					
Involved: SAMUEI	JOHN DANILO - WIT							
-			Amount:					
-								
-								
-			Type:					
Units: O	fficers:							
1st: <b>931</b> C	urt T Fleming							
2nd: <b>891 T</b>	erry E Graham							
3rd: <b>251 N</b>	latthew A Jacobs							
4th:								
5th:			Phot	os:				
		OFFEN	ICEC					
	Codes: Descriptions: OFFENSES							
8977 PERS	ONAL WELFARE							
337 17 1			T 1 M 1				Hate Bias	
Weapons Used:			Trade Marks:				nate bias	
Entry:		Location Type: Single Family Home						
				Single Fan	nily Home			
Refer to Arrest:	Incident #:	Tow#:	Dispatch	ner: <b>2200</b>	Officer in Charge	891 Entry	Id: <b>931</b>	
			1			•		
Case Status:		Cleared Date: 07/0	2/2019		Cleared B	y: <b>931</b>		
Narrative: 2	0-190812 Pag	e: 1						
On 02 II II 2010	13:24 Houre Dienstah a	dvised of a request for	a welfare check on	a mala cub	iect. The male	described as w		
On 02 JUL 2019 13:24 Hours, Dispatch advised of a request for a welfare check on a male subject. The male, described as wearing a red shirt, had walked into Family Eye Care and told staff he had injured his hand. The male asked if he should go to the hospital to								
have the injury treated. The staff advised he should and the male stated that he was going to go next door to a friend's house. While								
	he male passed out for t		_					
car.	1	•			2			
	ed in the parking lot, an							
	Williams Street, and wa							
top of his right han	d, which was swollen. Ja	ames auviseu ne nau in	jureu uie nanu punc	ınıng a Wall	i yesieruay. Afte	а сошинии W	/1 <b>U</b> I	

**Bureau Supervisor:** 

Ofc. Curt T Fleming

Officer:

Narrative:	20-190812	Page: 2	
ambulance resp	ond to check him out	supposed to be at the residence, James was ask James declined and advised his mother was go anged his mind about having an ambulance disp	oing to be taking him to the Emergency Room.
		·	
TERRY GRAHAI Reviewing Supe		Bureau Supervisor:	Ofc. Curt T Fleming Officer:

## **HURON POLICE**

**Incident Number** 

20-190812

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**Persons Involved with Incident** 

Incident #: Relation: Arrest #: CAD #: Date of Contact: Phone:

20190812 SUB

07/02/2019 419-357-1498

First Name: Middle Last Name: Til: DOB: SSN: Pager:

GIOVANNI ORLANDO JAMES 05/31/1996

Street #: Street Name: Apt: City: St: Zip: Cell Phone: Employee Phone:

2708 HIGHLAND DR SANDUSKY OH 44870

Hgt: Wgt: Hair: Eyes: Race: Sex: Physical Marks:

506 142 BRO BRO W M

Offenses: 8977 PERSONAL WELFARE

Resident Class: Suspected of using: Victim Type:

Other /

Incident #: Relation: Arrest #: CAD #: Date of Contact: Phone:

20190812 WIT 07/02/2019

First Name: Middle Last Name: Til: DOB: SSN: Pager:

SAMUEL JOHN DANILO 09/15/1994

Street #: Street Name: Apt: City: St: Zip: Cell Phone: Employee Phone:

313 WILLIAMS ST HURON OH 44839

Hgt: Wgt: Hair: Eyes: Race: Sex: Physical Marks:

508 170 BRO BRO W M

**Reviewing Supervisor:** 

Offenses: 8977 PERSONAL WELFARE

Resident Class: Suspected of using: Victim Type:

Resident / /

Ofc. Curt T Fleming

Bureau Supervisor: Officer: