



VILLAGE OF ARLINGTON HEIGHTS

33 S. Arlington Heights Road
Arlington Heights, IL 60005

FREEDOM OF INFORMATION ACT, 5 ILCS 140/1 et seq., REQUEST FORM

The Dana Point Condominiums, Lisette Ray, AS AGENT,
Name and Business (if applicable)

1519 E. Central Rd. Arlington Heights, IL 60005
Address

RECEIVED

Telephone Number: 847-228-5176

APR - 8 2013

If you are willing to have records sent electronically when possible please provide an email address:

LRay@LMSnet.com

LEGAL DEPARTMENT

Records Requested:

All records, files, investigations, communications, notes, reports, findings, or other records relating to any violations or claims of violations by or at the Association within the past 3 years.

Check whether request to: Inspect Receive a Copy Receive Certified Copy

Commercial Purpose - Will the information requested be used, in any form, for sale, resale, or solicitation or advertisement for sales or services?

 Yes No

Date Received: 4/8/13

OFFICE USE ONLY

Response Due: Non-Commercial 5 business days after receipt:

4/15/13

Commercial 21 business days after receipt:

Employee/Department accepting request:

Legal

Routed To:	Bld Insp / Fire Insp	Eng	Fin	Fire Dept.	Health	HR	Legal	Plng	Police	Clerk	PW	Mgr	Myr	Trst
Initials														
Date Received														
Records Provided: Yes or No	NO								NO YES					
Date of Response														

Village's Response: Date of response

4/19/13

 Granted Denied Granted in Part/Denied in Part No Records

Additional Time Requested:

4/22/13

VILLAGE OF ARLINGTON HEIGHTS FREEDOM OF INFORMATION ACT REQUEST FOR MORE TIME

TO: Lisette Ray
Requestor's Name

Date of Response 04/15/13

Dana Point Condominiums
Address

Lisa A. Farrington
Employee(s) Responding

1519 E Central Rd

Legal
Department(s)

Arlington Heights IL 60005

The Village received your request for information dated 04/08/13. Under the Freedom of Information Act, a public body may extend the time to respond to a FOIA request by up to 5 business days for a limited number of reasons. 5 ILCS 140/3(e). We will respond as soon as possible but in any event no later than 04/22/13 for the following reason:

- We store the requested records in whole or in part at another location(s).
- Responding to the request requires that we collect a substantial number of specified records.
- The request is couched in categorical terms and requires that we conduct an extensive search for the records responsive to it.
- In order to determine whether the requested records are exempt under Section 7 of FOIA or must be redacted in part before they are disclosed, we must have the documents reviewed by _____.

X We cannot comply with the request for records within the 5 business day time limit without unduly burdening or interfering with our operations.

Before we can determine whether to provide the documents in response to your FOIA request, we must consult with _____ which has a substantial interest in the determination of how to respond to this request because _____.

Before we can determine whether to provide the documents in response to your FOIA request, we must consult with _____ to determine how to respond to this request because _____.

Lisa A. Farrington
FOIA Officer
Legal Department
33 South Arlington Heights Road
Arlington Heights IL 60005
847-368-5700



VILLAGE OF ARLINGTON HEIGHTS
33 S. Arlington Heights Road
Arlington Heights, IL 60005

12-B457

FREEDOM OF INFORMATION ACT, 5 ILCS 140/1 et seq., REQUEST FORM

The Dana Point Condominiums, Lisette Ray as AGENT,
Name and Business (if applicable)

1519 E. Central Rd. Arlington Heights, IL 60005
Address

RECEIVED

Telephone Number: 847-228-5176

APR - 8 2013

If you are willing to have records sent electronically when possible please provide an email address:

LRay@LMS.net.com

LEGAL DEPARTMENT

Records Requested:

All records, files, investigations, communications, notes, reports, findings, or other records relating to any violations or claims of violations by or at the Association within the past 3 years.

Check whether request to: Inspect Receive a Copy Receive Certified Copy

Commercial Purpose - Will the information requested be used, in any form, for sale, resale, or solicitation or advertisement for sales or services?

Yes No

Date Received: 4/8/13

OFFICE USE ONLY

Response Due: Non-Commercial 5 business days after receipt:

4/15/13

Commercial 21 business days after receipt:

Employee/Department accepting request:

Legal

MS

Routed To:	Bld Insp / Fire Insp	Eng	Fin	Fire Dept.	Health	HR	Legal	Plng	Police	Clerk	PW	Mgr	Myr	Trst
Initials														
Date Received														
Records Provided: Yes or No														
Date of Response														

Village's Response: Date of response

4/19/13

Granted

Denied

Granted in Part/Denied in Part

No Records

Additional Time Requested:

1



Arlington Heights PD
200 E. Sigwalt St.
Arlington Heights, IL 60005
Tel: 847.368.5300 Fax: 847.368.5970

Case / Report No. **12-22874**CAD / CDC No. **12-22874**Occurred From Date: **10-18-2012** Time: **07:00**Occurred To Date: **11-19-2012** Time: **12:10**Reported Date: **11-19-2012** Time: **12:10****INCIDENT / OFFENSE REPORT**

ADMINISTRATIVE	UCR / Classification / Type Public Complaint: Abandoned Vehicle				UCR Code 7340	Attempted or Completed Completed				
	Location (Number, Street Name, Intersection) 1519 E Central Rd				Location Name		Location Code APARTMENT PARKING LOT			
	Beat 1112	Sub Beat 1220	Geo Code		Latitude 42.0663745	Longitude -87.963644				
	Response REPORT WITH NO ARREST		Shift B	Weather Conditions Cloudy			Lighting Conditions Daylight			
	Status ADMINISTRATELY CLOSED		<input type="checkbox"/> Arrest(s) Made		<input type="checkbox"/> Evidence Collected		<input type="checkbox"/> Gang Related	<input type="checkbox"/> Photo(s) Taken		
	Source 911	Hate Bias NO BIAS / NOT APPLICABLE	Clearance			Clearance Date	Cleared By			
	Follow-up Assignment		Assignment Date			Related Case Nos				
	Victim (Last, First Middle - Business)		Address					Telephone	Mobile	
	Victim Type		Employer / Occupation		Address				Work	Fax
	DOB / Age	Sex	Race	Height	Weight	Hair	Eyes	Ethnicity	DL# / ID#	State
<input type="checkbox"/> Injured	Description of Injuries					Treated by		Transported to		
<input type="checkbox"/> Discovered Crime	<input type="checkbox"/> Can ID Suspect(s)	Circumstances			Assignment		Victim / Suspect Relationship	Resident Status		
Notes / Remarks										
LEADS Entry Date/Time/Number		NCIC Entry Date/Time/Number			LEADS Cancellation Date/Time/Number			NCIC Cancellation Date/Time/Number		
Name (Last, First Middle) COSTA, JANICE		Address 1519 E Central Rd Arlington Heights IL 60005							Telephone	Mobile
Person Type COMPLAINANT, EMPLOYEE OR	Employer / Occupation		Address						Work	Fax
DOB / Age	Sex	Race	Height	Weight	Hair	Eyes	Ethnicity	DL# / ID#	State	
<input type="checkbox"/> Injured	Description of Injuries					Treated by		Transported to		
<input checked="" type="checkbox"/> Discovered Crime	<input type="checkbox"/> Can ID Suspect(s)	Notes / Remarks								
LEADS Entry Date/Time/Number		NCIC Entry Date/Time/Number			LEADS Cancellation Date/Time/Number			NCIC Cancellation Date/Time/Number		
Name (Last, First Middle)		Address							Telephone	Mobile
Suspect / Arrestee Type		Employer / Occupation		Address					Work	Fax
DOB / Age	Sex	Race	Height	Weight	Hair	Eyes	Ethnicity	DL# / ID#	State	
Place of Birth (City, State, Country)				Alias / Nickname					Alias DOB	SSN
Gang Affiliation	Scars / Marks / Tattoos / Other					Clothing Description				
Hair Style	Facial Hair		Physical		Build	Complexion		Speech	Handed	
<input type="checkbox"/> Injured	Description of Injuries					Treated by		Transported to		
<input type="checkbox"/> Charge(s) Filed	<input type="checkbox"/> Charge(s) Pending	<input type="checkbox"/> Photo(s) Taken	<input type="checkbox"/> Prints Taken	Bail / Bond Information						
Arrest Date / Time	Arrest Location (Location Name, No., Street Name, City, State, Zip)					Arrest Type		Arrest Disposition		
ILCS or UCR Code	ILCS or UCR Description				Citation #	Warrant #		Warrant ORI / Name		
Mirandized Date / Time	Mirandized Location				Court Name		Court Date	Cautions		
Booking #	Jail ID	State ID#		FBI#	Chicago IR#			ISPERNS / LEADS #		
ADMINISTRATIVE REVIEW										
Completed by SWANSON, MICHAEL J		Date 11-19-2012	Investigations Review					Date / Time		
Watch Review by MACK, STEPHANIE		Date / Time 11-19-2012 14:08	Records Review					Date / Time		
Additional Supplements: <input type="checkbox"/> Victim <input type="checkbox"/> Person <input type="checkbox"/> Arrestee <input type="checkbox"/> Vehicle <input type="checkbox"/> Property <input type="checkbox"/> Narrative										

12-22874

IL CFS SUMMARY

PAGE 1 OF 1

Arlington Heights PD

	CDC# 11-09406	RECEIVED DATE / TIME 05-19-2011 09:46	CD Cal Type SUSPICIOUS VEHICLE					
DESCRIPTIVES	UCR Code 7330 - Suspicious Auto	Primary Officer 197 - REGAS, THOMAS J						
	Place 096 - APARTMENT PARKING LOT	Beat 1112 - 1112						
	Officer Response 03 - SITUATION RESOLVED NO REPORT	Sub Beat 1220 - 1220						
	Reviewed By	Shift B	Source 9 - 911					
	UCR 2		Status 9 - ADMINISTRATELY CLOSED					
LOCATION	Name DANA POINT CONDOS							
	Address 1605 E CENTRAL RD, ARLINGTON HEIGHTS, IL 60005							
CALLER	Location 1605 E CENTRAL RD ,AH (DANA POINT CONDOS)	Phone						
	Name COSTA, JANICE	Call Back 847-228-5176	Phone 847-228-5176					
OFFICER COMMENTS	Address CLUBHOUSE, No State,							
	THE CAR REGISTERED TO A WILLIAM MCCALL. COMP. PROPERTY MGR JANICE COSTA SAID SHE RECOGNIZED THE VEHICLE OWNER NAME. NFA							
CALL DESCRIPTION	05/19/2011 09:46:36 WHI SATURN, [REDACTED] BEEN THERE FOR A WEEK, NO DANA POINT STICKER, EXPIRED PLATE, FLAT TIRES. UNK WHO IT BELONGS TO, OR IF POSS ABAN.							
	DETAILS TO FOLLOW							
	1125B (P O/1197 REGAS, THOMAS) \$AHP11009406							
	1125B							
	M/0719476303 .LZV5.LIC/Y144972.LIS/IL.LIT/PC.							
	Remote Message: #41204090							
	Remote Message: #41204091							
	Remote Message: #41204092							
	Remote Message: #41204093							
	Remote Message: #41204094							
1125B,STA/EXPIRED VAL/05012009 TTL/T1136665274 Y144972 042010 ORIG PLT LIC STX/0D7520109 MCCALL								
WILLIAM [REDACTED]								
SATURN 4 DOOR STATUS UNAVAILABLE REF PLT/Y144972 EXP/042009 (command: M)								
1125B, TIMER CLEARED								
1125B,IUCR:7330 PLACE:096 RESPONSE:03 STATUS:09 COMMENT:THE CAR REGISTERED TO A WILLIAM MCCALL. COMP. PROPERTY MGR JANICE COSTA SAID SHE RECOGNIZED THE VEHICLE OWNER NAME. NFA (command: M)								
1125B								
ContactMethod:SEE								
DISPATCHED UNITS	AGENCY	UNIT	OFFICER	DISP.	ENROUTE	ARRIVE	CLEAR	TOTAL MINS
	IL0160200	197	REGAS, THOMAS J	09:47		09:53	10:04	17



Arlington Heights PD
200 E. Sigwalt St.
Arlington Heights, IL 60005
Tel: 847.368.5300 Fax: 847.368.5970

Case / Report No.	12-24520	
CAD / CDC No.	12-24520	
Occurred From Date:	12-15-2012	Time: 08:00
Occurred To Date:	12-16-2012	Time: 12:00
Reported Date:	12-17-2012	Time: 11:33

INCIDENT / OFFENSE REPORT

ADMINISTRATIVE	UCR / Classification / Type Criminal Damage & Trespass to Property: Criminal Damage to Property	UCR Code 1310	Attempted or Completed Completed						
	Location (Number, Street Name, Intersection) 1519 E Central Rd	Location Name	Location Code PARKING LOT-BUSINESS						
	Beat 1112	Sub Beat 1220	Geo Code	Latitude 42.0663745	Longitude -87.963644				
	Response REPORT WITH NO ARREST	Shift B	Weather Conditions	Lighting Conditions					
	Status ADMINISTRATELY CLOSED	<input type="checkbox"/> Arrest(s) Made <input type="checkbox"/> Evidence Collected <input type="checkbox"/> Gang Related <input type="checkbox"/> Photo(s) Taken							
	Source 911	Hate Bias NO BIAS / NOT APPLICABLE	Clearance	Clearance Date	Cleared By				
	Follow-up Assignment	Assignment Date	Related Case No.						
	Victim (Last, First Middle - Business)	Address				Telephone	Mobile		
	Victim Type	Employer / Occupation	Address				Work	Fax	
	DOB / Age	Sex	Race	Height	Weight	Hair	Eyes	Ethnicity	DL# / ID#
<input type="checkbox"/> Injured		Description of Injuries				Treated by	Transported to		
<input type="checkbox"/> Discovered Crime <input type="checkbox"/> Can ID Suspect(s)		Circumstances		Assignment		Victim / Suspect Relationship		Resident Status	
Notes / Remarks									
LEADS Entry Date/Time/Number	NCIC Entry Date/Time/Number	LEADS Cancellation Date/Time/Number			NCIC Cancellation Date/Time/Number				
Name (Last, First Middle) COSTA, JANICE	Address 1519 E Central Rd Arlington Heights IL 60005				Telephone	Mobile			
Person Type COMPLAINANT, EMPLOYEE OR	Employer / Occupation	Address				Work	Fax		
DOB	Sex	Race	Height	Weight	Hair	Eyes	Ethnicity	DL# / ID#	State
<input type="checkbox"/> Injured		Description of Injuries				Treated by	Transported to		
<input type="checkbox"/> Discovered Crime <input type="checkbox"/> Can ID Suspect(s)		Notes / Remarks							
LEADS Entry Date/Time/Number	NCIC Entry Date/Time/Number	LEADS Cancellation Date/Time/Number			NCIC Cancellation Date/Time/Number				
Name (Last, First Middle)	Address				Telephone	Mobile			
Suspect / Arrestee Type	Employer / Occupation	Address				Work	Fax		
DOB / Age	Sex	Race	Height	Weight	Hair	Eyes	Ethnicity	DL# / ID#	State
Place of Birth (City, State, Country)	Alias / Nickname				Alias DOB		SSN		
Gang Affiliation	Scars / Marks / Tattoos / Other				Clothing Description				
Hair Style	Facial Hair	Physical	Build	Complexion		Speech	Handed		
<input type="checkbox"/> Injured		Description of Injuries				Treated by	Transported to		
<input type="checkbox"/> Charge(s) Filed <input type="checkbox"/> Charge(s) Pending <input type="checkbox"/> Photo(s) Taken <input type="checkbox"/> Prints Taken		Bail / Bond Information							
Arrest Date / Time	Arrest Location (Location Name, No., Street Name, City, State, Zip)				Arrest Type		Arrest Disposition		
ILCS or UCR Code	ILCS or UCR Description			Citation #	Warrant #		Warrant ORI / Name		
Mirandized Date / Time	Mirandized Location			Court Name		Court Date	Cautions		
Booking #	Jail ID	State ID#		FBM	Chicago IR#		ISPERNS / LEADS #		
ADMINISTRATIVE REVIEW									
Completed by CONIGLIO, ROBERT J	Date 12-17-2012	Investigations Review HAYES, NATHAN			Date / Time 12-17-2012 18:40				
Watch Review by MACK, STEPHANIE	Date / Time 12-17-2012 13:47	Records Review			Date / Time				
Additional Supplements: <input type="checkbox"/> Victim <input type="checkbox"/> Person <input type="checkbox"/> Arrestee <input type="checkbox"/> Vehicle <input checked="" type="checkbox"/> Property <input type="checkbox"/> Narrative									

12-24520



Arlington Heights PD
200 E. Sigwalt St.
Arlington Heights, IL 60005
Tel: 847.368.5300 Fax: 847.368.5970

Case / Report No. 12-24520

CAD / CDC No. 12-24520

Occurred From Date: 12-15-2012 Time: 08:00

Occurred To Date: 12-16-2012 Time: 12:00

Reported Date: 12-17-2012 Time: 11:33

PROPERTY 2 PROPERTY SUPPLEMENT

Quantity 2	Description WHITE LIGHTED REINDEER DECO		Make / Brand Name Reindeer	Model	Color WHITE	Serial Number / OAN		
Value \$100.00	Drug Quantity	Drug Measurement	Drug Type Suspected	Victim Link		Suspect(s) / Arrestee(s) Link		
Owner Name (Last, First Middle)			Address		Telephone	Mobile		
Recovered Date	Time	Recovered by	Recovered Location		Stored at			
Released Date	Time	Released by	Released Location					
Loss Type DESTROYED/DAMAGED/VANDALIZED	Property Type			OTHER				

Notes / Remarks

LEADS Entry Date/Time/Number	NCIC Entry Date/Time/Number	LEADS Cancellation Date/Time/Number	NCIC Cancellation Date/Time/Number
Quantity 3	Description MULTI COLORED LIGHTED PRES		Make / Brand Name PRESENTS
Value \$150.00	Drug Quantity	Drug Measurement	Model MULTI COLORED
Owner Name (Last, First Middle)			Color
Recovered Date	Time	Recovered by	Address
Released Date	Time	Released by	Recovered Location
Recovered Date	Time	Recovered by	Released Location
Loss Type DESTROYED/DAMAGED/VANDALIZED	Property Type		

Notes / Remarks

LEADS Entry Date/Time/Number	NCIC Entry Date/Time/Number	LEADS Cancellation Date/Time/Number	NCIC Cancellation Date/Time/Number
Quantity	Description		Make / Brand Name
Value	Drug Quantity	Drug Measurement	Model
Owner Name (Last, First Middle)			Color
Recovered Date	Time	Recovered by	Address
Released Date	Time	Released by	Recovered Location
Recovered Date	Time	Recovered by	Released Location
Loss Type	Property Type		

Notes / Remarks

LEADS Entry Date/Time/Number	NCIC Entry Date/Time/Number	LEADS Cancellation Date/Time/Number	NCIC Cancellation Date/Time/Number
Quantity	Description		Make / Brand Name
Value	Drug Quantity	Drug Measurement	Model
Owner Name (Last, First Middle)			Color
Recovered Date	Time	Recovered by	Address
Released Date	Time	Released by	Recovered Location
Released Date	Time	Released by	Released Location
Loss Type	Property Type		

Notes / Remarks

LEADS Entry Date/Time/Number	NCIC Entry Date/Time/Number	LEADS Cancellation Date/Time/Number	NCIC Cancellation Date/Time/Number
Quantity	Description		Make / Brand Name
Value	Drug Quantity	Drug Measurement	Model
Owner Name (Last, First Middle)			Color
Recovered Date	Time	Recovered by	Address
Released Date	Time	Released by	Recovered Location
Released Date	Time	Released by	Released Location
Loss Type	Property Type		

Notes / Remarks

LEADS Entry Date/Time/Number	NCIC Entry Date/Time/Number	LEADS Cancellation Date/Time/Number	NCIC Cancellation Date/Time/Number
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Arlington Heights PD
200 E. Sigwalt St.
Arlington Heights, IL 60005
Tel: 847.368.5300 Fax: 847.368.5970

Case / Report No. **12-00310**

CAD / CDC No.

Occurred From Date: **11-24-2011** Time: **12:00**

Occurred To Date: **01-06-2012** Time: **12:38**

Reported Date: **01-07-2012** Time: **06:59**

INCIDENT / OFFENSE REPORT

UCR / Classification / Type

Disorderly Conduct: Disorderly Conduct - Other (Not Drunkenness)

Location (Number, Street Name, Intersection)

1519 E. Central Rd.

UCR Code

2890

Attempted or Completed
Completed

Location Name
DANA POINT CONDOMINIUMS

Location Code
APARTMENT-COMMON AREA

Latitude

Longitude

Shift

B

Weather Conditions

Lighting Conditions

Beat

1112

Sub Beat

1220

Geo Code

Source

911

Date Bias

NO BIAS / NOT APPLICABLE

Clearance

Clearance Date

Cleared By

Status

ADMINISTRATELY CLOSED

Arrest(s) Made

Evidence Collected

Gang Related

Photo(s) Taken

Follow-up Assignment

Assignment Date

Related Case Nos

Victim (Last, First Middle - Business)

Address

Telephone

Mobile

Victim Type

Employer / Occupation

Address

Work

Fax

DOB / Age

Sex

Race

Height

Weight

Hair

Eyes

Ethnicity

DL# / ID#

State

Injured

Description of Injuries

Treated by

Transported to

Discovered Crime

Can ID Suspect(s)

Circumstances

Assignment

Victim / Suspect Relationship

Resident Status

Notes / Remarks

LEADS Entry Date/Time/Number

NCIC Entry Date/Time/Number

LEADS Cancellation Date/Time/Number

NCIC Cancellation Date/Time/Number

Name (Last, First Middle)

COSTA, JANICE L.

Address

1519 E. Central Rd. Arlington Heights IL 60005

Telephone

Mobile

Person Type

Employer / Occupation

Address

DANA POINT CONDOMI

1519 E. Central Rd. Arlington Heights IL 60005

Work

(847) 228-5176

DOB / Age

Sex

Race

Height

Weight

Hair

Eyes

Ethnicity

DL# / ID#

State

Injured

Description of Injuries

Treated by

Transported to

Discovered Crime

Can ID Suspect(s)

Notes / Remarks

LEADS Entry Date/Time/Number

NCIC Entry Date/Time/Number

LEADS Cancellation Date/Time/Number

NCIC Cancellation Date/Time/Number

Name (Last, First Middle)

COSTA, JANICE L.

Address

Telephone

Mobile

Suspect / Arrestee Type

Employer / Occupation

Address

Work

Fax

DOB / Age

Sex

Race

Height

Weight

Hair

Eyes

Ethnicity

DL# / ID#

State

Place of Birth (City, State, Country)

Alias / Nickname

Alias DOB

SSN

Gang Affiliation

Scars / Marks / Tattoos / Other

Clothing Description

Hair Style

Facial Hair

Physical

Build

Complexion

Speech

Handed

Injured

Description of Injuries

Treated by

Transported to

Charge(s) Filed

Charge(s) Pending

Photo(s) Taken

Prints Taken

Bail / Bond Information

Arrest Date / Time

Arrest Location (Location Name, No., Street Name, City, State, Zip)

Arrest Type

Arrest Disposition

ILCS or UCR Code

ILCS or UCR Description

Citation #

Warrant #

Warrant ORI / Name

Mirandized Date / Time

Mirandized Location

Court Name

Court Date

Cautions

Booking #

Jail ID

State ID#

FBI#

Chicago IR#

ISPERNS / LEADS #

Additional Supplements:

Victim

Person

Arrestee

Vehicle

Property

Narrative

12-00310

Occurred From: 11-24-2011			Time: 1200		Case / Report No. 12-00310			
Occurred To: 01-06-2012			Time: 1238		Reported: 01-07-2012			Time: 0659
Victim:					Offense: Disorderly Conduct: Disorderly Conduct - Other (Not Drunk)			
Year	Make	Model	Style	Color	Registration	State	VIN	
Value	Type	Vehicle - Victim Link			Vehicle - Person Link		Vehicle - Suspect / Arrestee Link	
Owner (Last, First Middle - Business)			Address				Telephone	Mobile
Towed by		Stored at		Tow Reason			Ownership Verified by	
Recovered Date		Time	Recovered Location		Released Date	Time	Released by	
Insurance Company			Address				Telephone	
<input type="checkbox"/> Damage to Vehicle <input type="checkbox"/> Theft from Vehicle <input type="checkbox"/> Registration Current <input type="checkbox"/> Doors Locked <input type="checkbox"/> Keys in Vehicle <input type="checkbox"/> Hold Vehicle <input type="checkbox"/> Release Contents								
Notes / Remarks								
LEADS Entry Date/Time/Number			NCIC Entry Date/Time/Number		LEADS Cancellation Date/Time/Number		NCIC Cancellation Date/Time/Number	
Quantity	Description		Make / Brand Name	Model	Color	Serial Number / OAN		
Value	Drug Quantity	Drug Measurement	Drug Type Suspected	Victim Link			Suspect(s) / Arrestee(s) Link	
Owner Name (Last, First Middle)			Address				Telephone	Mobile
Recovered Date	Time	Recovered by	Recovered Location			Stored at		
Released Date	Time	Released by	Released Location					
Loss Type			Property Type					
Notes / Remarks								
LEADS Entry Date/Time/Number			NCIC Entry Date/Time/Number		LEADS Cancellation Date/Time/Number		NCIC Cancellation Date/Time/Number	
** 01-07-2012 07:34 - KALTER, TIMOTHY J. ** <p>In summary: Complainant called 911 today to report unknown suspects are entering the different buildings in the Dana Point Condominium Complex and disturbing the peace. In particular the buildings at 1405 E. Central Rd., 1415 E. Central Rd., 1515 E. Central Rd., and 1615 E. Central Rd. The suspects have entered the different buildings and torn down all the bulletins posted on the information boards, located in the main lobby's, shredding those bulletins and strewn the paper throughout the lobby's. They have also emptied the salt buckets, kept in the buildings lobby's, and strewn the salt throughout the lobby and stairwells. And, allegedly, the suspects have taken some of the UPS packages dropped off by the lobby mailboxes, illegally opened them and sometimes stolen the contents of those packages. Complainant did not know the names of the residents whose packages were damaged or stolen. Complainant also told me the suspects have stolen ornaments off the Christmas Trees decorating the building lobby's during this Holiday Season. Complainant said this has been going on since approximately Thanksgiving Day 2011. Complainant was unable to provide me specific dates or times of each incident. Complainant could not explain why this report was delayed. Complainant stated that none of the buildings have video surveillance. Complainant has no idea who may be doing this but she suspects the perpetrators are residents because they were able to enter the security locked buildings without damaging the entryways. Complainant wishes a report only at this time and requests an extra patrol of the area. Complainant was provided this case report number and advised to immediately call 911 the next time a similar incident occurs. NFA.</p>								