Complaint\_ID: BYXCO\_014 Reporting\_Date: 1/10/2017 Reporting\_Time: 3:00 AM Incident\_Date: 1/12/2017 Incident\_Time: 1:30 AM Name: vccn Topic: Gambling Act Location: Nature\_of\_Incident: Details\_of\_Incident: Motive\_of\_Incident: Previous\_Issue: Full\_Name: Phone\_no\_: Mobile: 65695 Email: g@rg.crkg Street\_Address\_1: etw Street\_Address\_2: hd City: dgh State: Zip\_Code: 5454

Comments: