

INCIDENT DETAILS		CRIME INFORMATION REPORT				N.S.W. POLICE DEPARTMENT P40	
1. SUBMITTING STATION MT DRUITT		2. PATROL WHERE OCCURRED/SECTOR MT DRUITT		3. ALLOCATING STATION MT DRUITT		4. STATION INDEX No. 93	
5. NEAR ROAD WATCH AREA		7. VICTIM AS ORIGINALLY REPORTED		8. ORIGINAL ALLOC. STATION		9. ORIGINAL INDEX No.	
11. AS ORIGINALLY REPORTED OR ALTERED TO OFFENSIVE CONDUCT OFFENSIVE LANGUAGE COMMITMENT WARRANTS		12. EXACT ADDRESS OF INCIDENT LOCATION, POSTCODE, PHONE No. Mt Druitt Railway Station MT DRUITT. 2770				13. W/M No. AND DATE	
16. CRIMES ACT CODE FOR THIS INCIDENT		17. TIME, DAY, DATE OF INCIDENT 6pm Thursday 30/12/93		18. PROPERTY VALUE S		19. PROPERTY RECOVERED <input type="checkbox"/> 1. YES <input type="checkbox"/> 3. PART <input type="checkbox"/> 2. I. J. <input type="checkbox"/> S.	
21. VICTIM/OWNER/OCCUPIER/FINDER (BUSINESS NAME, IF BUSINESS) REGINA		22. VICTIM OCCUPATION		23. SEX		24. AGE	
27. RESIDENTIAL ADDRESS & POSTCODE		28. BUSINESS ADDRESS & POSTCODE		29. FIRST LANGUAGE SPOKEN AT HOME		25. NATURE OF INJURY OR CONDITION - NAME OF HOSPITAL IF ADMITTED.	
30. REPORTED BY CST BUGDEN AND GRADY		31. ADDRESS & POSTCODE c/o Mt Druitt Police Station		32. TIME, DAY, DATE REPORTED 6pm Thursday 30/12/93		33. WITNESSES	
35. DESCRIBE PREMISES/VEHICLE OR AREA WHERE OCCURRED Railway Station in residential area		36. DESCRIBE WEAPON, INSTRUMENT, TRICK OR DEVICE & METHOD OF ENTRY					
37. BY WHOM COMMITTED OR CHARACTER ASSUMED, CONVERSATION USED OR UNUSUAL ACTS		38. ENTRY POINT <input type="checkbox"/> 1. GROUND FLOOR <input type="checkbox"/> 2. FIRST FLOOR <input type="checkbox"/> 3. ABOVE		39. <input type="checkbox"/> 1. FRONT <input type="checkbox"/> 2. SIDE <input type="checkbox"/> 3. REAR		40. <input type="checkbox"/> 1. GATE/DOOR <input type="checkbox"/> 2. WINDOW <input type="checkbox"/> 3. CEILING/ROOF <input type="checkbox"/> 4. FLOOR <input type="checkbox"/> 5. WALL <input type="checkbox"/> 6. BALCONY	
45. STATE OF REGN.		46. REGN No.		47. YEAR		48. TYPE	
49. MAKE		50. MODEL		51. COLOURS		43. CHASSIS No.	
44. ENGINE No.		42. VIN. No.		41. STATUS <input type="checkbox"/> 1. STOLEN <input type="checkbox"/> 2. SUSPECTED <input type="checkbox"/> 3. RECOVERED <input type="checkbox"/> 4. NOT KNOWN		40. NOT STOLEN <input type="checkbox"/> 1. NOT STOLEN <input type="checkbox"/> 2. SUSPECT OF OFFENCE <input type="checkbox"/> 3. NOT KNOWN	
PERSON OF INTEREST 1		1. ARRESTED		2. SUSPECT		3. WANTED	
52. 1		4. ESCAPEE		5. CHILD CHARGED		6. CHILD ESCAPEE	
53. CM No.		54. PHOTO REFERENCE		55. No. OF POL		56. DATE ARRESTED 30/12/93	
57. STATION CHARGED MT DRUITT		58. ALIAS/NICKNAME		59. ALIAS/NICKNAME		60. RESIDENTIAL ADDRESS & POSTCODE DOONSIDE.	
61. BUSINESS ADDRESS & POSTCODE		62. F.A.C.S. OFFICE USE		63. OCCUPATION Unemployed		64. SEX male	
65. DOB /75		66. AGE 18		67. HEIGHT 176cm		68. TOWN & COUNTRY OF BIRTH Sydney NSW AUSTRALIA	
69. BUILD 2		70. COMPLEXION 2		71. EYES 2		72. HAIR 2	
73. RACIAL APPEARANCE 2		74. HAS THE P.O.I. BEEN FINGERPRINTED FOR THIS INCIDENT 1		75. FIRST LANGUAGE SPOKEN AT HOME		76. IS THIS INCIDENT 2	
77. ACTUAL KNOWN PLACES/PREMISES FREQUENTED (HOTELS, TABS etc.)		78. ASSOCIATES (NOT CO-OFFENDERS) INCLUDE D.O.B.		79. PECULIARITIES - IDENTIFYING CHARACTERISTICS (UNRECORDED TATTOOS, SCARS etc.)		80. Warnings <input type="checkbox"/> 1. MAY BE ARMED <input type="checkbox"/> 2. MAY ASSAULT POLICE <input type="checkbox"/> 3. MAY BE SUICIDAL <input type="checkbox"/> 4. MAY TRY TO ESCAPE	
81. ASSESSMENT BY DUTY INSP. CLASSIFICATION & WARNINGS REQUIRED FOR CIRCULATION		82. REPORTING OFFICERS REC. <input type="checkbox"/> 1. CAUTION <input type="checkbox"/> 2. CHARGE <input type="checkbox"/> 3. SUMMONS		83. AUTH. OFFICER RECOM. <input type="checkbox"/> 1. CAUTION <input type="checkbox"/> 2. CHARGE <input type="checkbox"/> 3. SUMMONS		84. REASON FOR PROSECUTION (AUTHORISING OFFICER) <input type="checkbox"/> 1. INDISTINGUISHABLE <input type="checkbox"/> 2. DOUBT ADMISSIONS <input type="checkbox"/> 3. STOLEN M.V. <input type="checkbox"/> 4. OFFENCE DENIED <input type="checkbox"/> 5. REFUSE CAUTION <input type="checkbox"/> 6. SERIOUS NATURE	
85. SIGNATURE (AUTHORISING OFFICER)		86. NAME & RANK (AUTH OFFICER)		87. STATION & DATE		88. AUTH. OFFICER <input type="checkbox"/> 1. IN ATTEND <input type="checkbox"/> 2. BY PHONE	
89. IF MULT. VICTIMS REPEAT BOXES 21 TO 26, 29 & 97 IN NARRATIVE		90. IS AN APPREHENDED DOMESTIC VIOLENCE ORDER IN FORCE? <input type="checkbox"/> 1. BY POLICE <input type="checkbox"/> 2. BY VICTIM <input type="checkbox"/> 3. NEITHER <input type="checkbox"/> 4. EXPIRY DATE ()		91. IS AN A.D.V.O. APPLIED FOR <input type="checkbox"/> 1. BY POLICE <input type="checkbox"/> 2. BY VICTIM <input type="checkbox"/> 3. NEITHER		92. IF NO ACTION (D.V.) STATE REASON	
93. ARE CHILDREN/FAMILY MEMBERS AFFECTED BY THE VIOLENCE? <input type="checkbox"/> 1. YES <input type="checkbox"/> 2. NO		94. No. & AGES OF CHILDREN OF HOUSEHOLD		95. LOCATION OF CHILDRENS SCHOOLS/CHILDCARE		96. VICTIM RELATIONSHIP TO OFFENDER	
98. TYPE		99. QUANTITY		100. VALUE S		101. METHOD OF CONCEALMENT	
102. PREVIOUS DRUG OFFENCES OF P.O.I? <input type="checkbox"/> 1. YES <input type="checkbox"/> 2. NO		103. CASH/DOCUMENTS/WEAPONS SEIZED		104. NARRATIVE About 6pm on Thursday 30th December 1993, Police attended the Mt Druitt Railway in relation to persons fighting there, with iron bars. Police attended and heard the above POI swearing at a female. Police then approached the POI who said to Police, 'What do you cunts want.' The POI then started to become violent. Police restrained the POI who then said, 'Fuck off cunt, I haven't done anything. He was restrained. There were several other persons on the Railway Station who could hear the POI swearing and being offensive. The POI was then placed under arrest and conveyed to Mt Druitt Police Station and charged with above.		105. IS THIS INCIDENT <input type="checkbox"/> 1. ACCEPTED <input type="checkbox"/> 2. REJECTED <input type="checkbox"/> 3. DOUBTFUL	
106. SIGNATURE & DATE Grady 30/12/93		107. TYPE G		108. NAME, RANK OF REPORTING OFFICER GRADY CST THE O/S/C		109. CHECKING OFFICER	
110. IS THIS INCIDENT <input type="checkbox"/> 1. YES <input type="checkbox"/> 2. NO		111. ATTACHMENTS <input type="checkbox"/> 1. YES <input type="checkbox"/> 2. NO					