

1. Agency Bethlehem		2. Division/Protocol ACO		3. New York State INCIDENT REPORT		4. Off Cntr NY 0015100 □ Supp		5. Case No. 12-02308		6. Incident No.			
7. Report Day SAT	8. Date May 09, 12	9. Report Time 1030	10. Day SAT 02	11. Date PPY	12. Time 12 0955	13. Day SAT	14. Date 02 07	15. Time 1020					
16. Incident Type: Dog Attack Livestock		17. Business Name		18. Weapon(s)		19. City, State, Zip		20. Location Code					
21. Off. No.		22. Card No.	23. Section	24. Sub-Sec.	25. GLC	26. Date	27. Degree	28. Status	29. Name or Offense	30. OTB	31. No. of Victims		
1	TWN	01/1	5(A)	U	V	0	C	Permit Dog to Run			G		
2	TWN	01/1	5(F)	U	V	0	C	Present - TRESPASS / Cause Damage			D		
3	AFTM	123	7	-	-	-	-	Dangerous Dog			46		
25. Person Type: CO - Commandant, CO - Captain, CO - Lieutenant, CO - Major, CO - Captain Reporting, WF - Witness, NS - Non-Resident, VTC - Victim, 26. Victim also complainant <input type="checkbox"/> Y <input checked="" type="checkbox"/> N													
TYPE/NO.		NAME (LAST, FIRST, MIDDLE INITIAL)		DATE BORN		STREET/NO STREET NAME/BLDG. NO./APT. NO./CITY/STATE ZIP		TELEPHONE NO.					
PR	Bruno, Joseph, F.		123147		[REDACTED]		12161		BUSINESS		R		
VI	Bruno, Karen, Lynn		071964		[REDACTED]		South Bethlehem NY		RESIDENCE		G		
					[REDACTED]		12161		BUSINESS		H		
					[REDACTED]		South Bethlehem NY		RESIDENCE		I		
					[REDACTED]		[REDACTED]		RESIDENCE		J		
27. Date of Birth 1971-05-07	28. Age 44	29. Sex M	30. Race White	31. Ethnicity Hispanic	32. Handicap Yes	33. Residence Status Resident	34. Temp. Res.- Foreign Nat. Non-Hispanic	35. Resident No	36. Tourist Non-Hispanic	37. Student Non-Hispanic	38. Other Non-Hispanic		
39. Victim DIO receive information on Victim's Rights and Services pursuant to New York State Law: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO											K		
40. Type/No. TABLE D	41. Name (Last, First, Middle) Decker, Jordan D		42. Alias/Nickname/Maiden Name (Last, First, Middle)		43. Apparent Condition Impaired Drugs		44. Occupation TABLE P					L	
45. Address (Street No., Street Name, Bldg. No., Apt. No., City, State, Zip) Southville N.Y. 12159	46. Phone No. (C) <input type="checkbox"/>		47. Home Work		48. Social Security No.		49. Employee/School		50. Address			M	
40. Data of Birth 1971-05-07	41. Age 44	42. Sex M	43. Race White	44. Ethnicity Non-Hispanic	45. Handicap Yes	46. Residence Status Resident	47. Temp. Res.- Foreign Nat. Non-Hispanic	48. Resident No	49. Tourist Non-Hispanic	50. Student Non-Hispanic	51. Other Non-Hispanic	N	
52. Height 5'10"	53. Weight 160	54. Hair TABLE Q	55. Eyes TABLE R	56. Glasses Yes	57. Build Medium	58. Employer/School X	59. Address INC					O	
50. Weight 160	51. Hair TABLE Q	52. Eyes TABLE R	53. Glasses Yes	54. Build Medium	55. Employer/School X	56. Address INC					P		
57. Scars/Marks/Tattoos (Describe)											58. Misc.	Q	
TABLE S TABLE T TABLE U TABLE V												59. Misc.	R
60. Vehicle Serial TABLE P	61. License Plate No. [REDACTED]	62. State NY	63. Exp. Yr. 2014	64. Plate Type PAS	65. Value X	TOTAL						S	
66. Ven. Yr. 2003	67. Make FORD	68. Model XPL	69. Year LL	70. VIN [REDACTED]								T	
71. Color(s) Gray	72. Towed By To:	73. Vehicle Notes X										U	
74. ACO Watt responded to a call for a dog attacking livestock at the above location. The livestock was known to be goats and requested a police officer as well and OF G. Trans (342) also was responding. Upon arrival a husky could be seen chasing horses on the left side of a barn. Karen Bruno with a rifle said that she had the goats secured in the barn. She also requested the dog not be shot if possible and be careful of the horses. ACO Watt went through the barn to a gate on the back left. There were two horses and a husky with no collar attacking one biting at the rear legs. That horse was running.												V	
75. Animals (Check all that apply)		76. NYSPIN Missing No.		77. Complainant Signature		78. Supervisor Signature (Include Rank)		79. ID No.		80. Status Data		W	
<input type="checkbox"/> DMV	<input type="checkbox"/> Warmblood	<input type="checkbox"/> Scotish	[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		X
<input type="checkbox"/> Chm/Happy	<input type="checkbox"/> Stable/Prom	<input type="checkbox"/> Old	[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		Y
7A. Previous Offender (Initials and Rank) ACO Richard C. Abbott												Z	
7B. Status Open		7C. Status Closed (If Closed, check box below)		7D. Unounded		7E. Victim Related to Crime Armed		7F. Status Data 12 17 12		7G. Notified/TOT		AA	

Bethlehem		A CO		INCIDENT REPORT																											
7. Report Day MON	8. Date 02/19/12	9. Report Time 1600	10. Occurred On/Off Premises On Premises	10. Day SAT	11. Date 02/19/12	12. Time 02:55	13. Day SAT																								
10. Incident Type Dog Attack Livestock	17. Business Name [Redacted]	14. Date 02/19/12	15. Time 1020	18. Weapon(s)																											
19. Address [Redacted] Apt. No. [Redacted]	20. City, State, Zip South Bethlehem N.Y. 12161	21. Location Code 0151																													
22. Suburb [Redacted]	23. Name of Defense [Redacted]	24. CTS# [Redacted]	25. No. of Victims 1	26. No. of Suspects 1	27. Location Code 0151																										
28. Victim Type - CO - Civilian/Min. City Officer/POLICE Officer/Police Person In Uniform/Officer W/ Gun/Officer Not In Uniform/VI - Victim TYPE/CO: NAME (LAST, FIRST, MIDDLE INITIAL) D.O.B. STREET/NO. STREET/NAME BADGE NO./APR. NO./CITY/STATE/ZIP TELEPHONE NO.	29. Victim also complainant <input type="checkbox"/> Y <input type="checkbox"/> N	30. BUSINESS [Redacted]	31. RESIDENCE [Redacted]	32. BUSINESS [Redacted]	33. RESIDENCE [Redacted]	34. Jimp. Res. Foreign Nat. <input type="checkbox"/> Yes <input type="checkbox"/> No	35. Other <input type="checkbox"/> Commuter <input type="checkbox"/> Military <input type="checkbox"/> Homeless <input type="checkbox"/> Unk.																								
PJ, Bruno, Karen, Lynn 071964 VI BSNY	36. Name (Last, First, Middle) TABLE O	37. Alias/Nickname/Maiden Name (Last, First, Middle) TABLE P	38. Apparent Condition <input type="checkbox"/> Impaired Drugs <input type="checkbox"/> Mental Dis. <input type="checkbox"/> Unit <input type="checkbox"/> Impaired Alco. <input type="checkbox"/> Inf. Ill. <input type="checkbox"/> App Norm.	39. Address (Street No., Street Name, Bldg. No., Apt. No., City, State, Zip) TABLE Q	40. Phone No. [Redacted]	41. Social Security No. [Redacted]	42. Height In. <input type="checkbox"/> 56. Weight Lb. TABLE R	43. Age Mo. <input type="checkbox"/> Day <input type="checkbox"/> Yr. TABLE S	44. Sex M <input type="checkbox"/> F <input type="checkbox"/> U	45. Race White <input type="checkbox"/> Black <input type="checkbox"/> Other Indian <input type="checkbox"/> Asian <input type="checkbox"/> Unk.	46. Ethnicity Hispanic <input type="checkbox"/> Non-Hispanic <input type="checkbox"/> Unk.	47. Skin Light <input type="checkbox"/> Dark <input type="checkbox"/> Other Medium <input type="checkbox"/>	48. Occupation TABLE P	49. Build Small <input type="checkbox"/> Large <input type="checkbox"/> Medium <input type="checkbox"/>	50. Employee/School TABLE R	51. Hair TABLE S	52. Eyes TABLE T	53. Glasses Yes <input type="checkbox"/> Contact <input type="checkbox"/> No	54. Hair TABLE U	55. Address TABLE V	56. Marital Status TABLE W	57. Scars/Marks/Tattoos (Describe)	58. VIN TABLE X	59. Vehicle Status TABLE Y	60. License Plate No. TABLE Z	61. State Full <input type="checkbox"/> Partial <input type="checkbox"/> TABLE A	62. Exp. Yr. TABLE B	63. Plate Type TABLE C	64. Value TABLE D	65. VIN TABLE E	TOTAL TABLE F
66. Model TABLE G	67. Make TABLE H	68. Style TABLE I	69. VIN TABLE J	70. VIN TABLE K	71. Color(s) TABLE L	72. Toward By To: [Redacted]	73. Vehicle Notes [Redacted]	74. [Redacted] Mike BSNY VT Supply Change Karen Bruno from VI to PJ and	75. Injuries (Check all that apply) <input type="checkbox"/> DMV <input type="checkbox"/> Warrant Issued <input type="checkbox"/> Stolen Property <input type="checkbox"/> Other <input type="checkbox"/> Crim. History <input type="checkbox"/> Stolen Property <input type="checkbox"/> Other	76. NYSPIN Message No.	77. Complainant Signature Aeo Richard L. White	78. Reporting Officer Signature (Include Rank) Aeo Richard L. White	79. ID No. 390	80. Supervisor's Signature (Include Rank) Robert L. White	81. ID No. 390	82. Status Open <input type="checkbox"/> Closed <input type="checkbox"/> (If Closed, check last Active) <input type="checkbox"/> Unhandled <input type="checkbox"/> Victim Refused to Coop. <input type="checkbox"/> Arrested <input type="checkbox"/> Status Date 02/19/12	83. Status Open <input type="checkbox"/> Closed <input type="checkbox"/> (If Closed, check last Active) <input type="checkbox"/> Unhandled <input type="checkbox"/> Victim Refused to Coop. <input type="checkbox"/> Arrested <input type="checkbox"/> Status Date 02/19/12	84. Notify/TOT 02/19/12	85. Page of 1/1												