

1. Agency		2. Division/Precinct		New York State INCIDENT REPORT				3. ORI		4. <input checked="" type="checkbox"/> Orig <input type="checkbox"/> Supp		5. Case No.		6. Incident No.							
Saratoga Springs Police		206						NY0450100				SS-02788-16		SS-020205-16							
7. Report Day		8. Date		9. Report Time		10. Day		11. Date		12. Time		13. Day		14. Date							
Thu		Aug 11 2016		21:00		Mon		Aug 8 2016		21:00		Mon		Aug 8 2016							
16. Incident Type				17. Business Name				18. Weapon(s)				A. 14									
DISPUTE				FASIG TIPTON				PERSONAL WEAPONS													
19. Incident Address(Street No.,Street Name,Bldg. No.,Apt. No.)								20. City,State,Zip( <input checked="" type="checkbox"/> C <input type="checkbox"/> T <input type="checkbox"/> V)				21. Location Code		B. 77							
153 GEORGE ST								SARATOGA SPRINGS				4601									
22. OFF. NO.		LAW		SECTION		SUB		CL		CAT		DEG		ATT		NAME OF OFFENSE		CTS		23. No. of Victims	
1		PL		120.00		-1		A		M		3		O		ASSAULT IN THE THIRD DEGREE//INTENT		1		1	
2																				24. No. of Suspects	
3																				1	
25. Person Type:CO=Complainant OT=Other PI=Person Interviewed PR=Person Reporting WI=Witness NI=Not Interviewed VI=Victim											26. Victim also complainant <input type="checkbox"/> Y <input checked="" type="checkbox"/> N					E.					
Type/No		NAME(LAST, FIRST, MIDDLE, TITLE)				Date of Birth		STREET NO., STREET NAME, BLDG. NO., APT. NO., CITY, STATE, ZIP						Telephone No.							
CA		SESSELMAN, JOHN						[REDACTED]						BUS		F. 01					
OF		VIOLA, VINCENT J				02/12/1956		[REDACTED]						BUS		G. -					
VI														BUS		H. I					
														BUS		I. 3					
27. Date of Birth		28. Age		29. Sex		30. Race		31. Ethnic		32. Handicap		33. Residence Status		Temp. Res.-Foreign Nat.		J. 07					
[REDACTED]		66		<input checked="" type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> U		<input checked="" type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Indian <input type="checkbox"/> Asian <input type="checkbox"/> Unk.		<input type="checkbox"/> Hispanic <input type="checkbox"/> Unk. <input checked="" type="checkbox"/> Non-Hispanic		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Resident <input type="checkbox"/> Tourist <input type="checkbox"/> Commuter <input type="checkbox"/> Military		<input type="checkbox"/> Student <input checked="" type="checkbox"/> Other <input type="checkbox"/> Homeless <input type="checkbox"/> Unk/Not Indicated							
34. Victim DID receive information on Victim's Rights and Services pursuant to New York State Law <input type="checkbox"/> Yes <input type="checkbox"/> No																K. 3					
35. Type/No		36. Name(Last, First, Middle)				37. Alias/Nickname/Maiden Name(Last, First, Middle)						38. Apparent Condition				L. 41					
												<input type="checkbox"/> Impaired Drugs <input type="checkbox"/> Mental Dis <input type="checkbox"/> Unk. <input type="checkbox"/> Impaired Alco <input type="checkbox"/> Inj/ill <input type="checkbox"/> App Norm.									
39. Address(Street No., Street Name, Bldg. No., City, State, Zip)								40. Phone Res:				41. Social Security No.				M. -					
42. Date of Birth		43. Age		44. Sex		45. Race		46. Ethnic		47. Skm		48. Occupation				N. -					
				<input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> U		<input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Indian <input type="checkbox"/> Asian <input type="checkbox"/> Unk.		<input type="checkbox"/> Hispanic <input type="checkbox"/> Unk. <input type="checkbox"/> Non-Hispanic		<input type="checkbox"/> Light <input type="checkbox"/> Dark <input type="checkbox"/> Unk. <input type="checkbox"/> Medium <input type="checkbox"/> Other											
49. Height		50. Weight		51. Hair		52. Eyes		53. Glasses		54. Build		55. Employer/School		56. Address							
								<input type="checkbox"/> Yes <input type="checkbox"/> Contacts <input type="checkbox"/> No		<input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large											
57. Scars/Marks/Tattoos(Describe)								58. Misc.								X					
59. Victim or Suspect No.		Property Status		Property Type		Quantity/Measure		Make or Drug Type		Model		Serial No.		Description		Value		X			
																		X			
V		60. Vehicle Status		61. License Plate No		Full <input type="checkbox"/> Partial <input type="checkbox"/>		62. State		63. Exp. Yr.		64. Plate Type		65. Value				X			
66. Veh. Yr.		67. Make		68. Model		69. Style		70. VIN.										X			
71. Color(s)		72. Towed By:		To:		73. Vehicle Notes												X			
74. 2872:08/11/2016 12:26 - I was flagged down at about 9pm outside the Fasig Tipton horse sales pavillion by an unknown patron. The subject advised that there was a verbal dispute in progress between two male subjects on the second floor inside the pavillion. I responded to that location and requested both subjects to calm down and separate from one another. I initially spoke with Vincent Viola and requested he come down to the first floor because it was loud upstairs and very difficult to hear. Vincent advised that prior to the incident occurring, he was notified by his wife, Theresa that a man who worked for the food service at the horse sales had pushed her after she tried to get some water from the kitchen area for a woman who had just fainted in the building. Vincent states about 45 minutes after the incident occurred, Theresa located the subject who																X					
																X					
																X					
																11					
																12					
																13					
																3					
75. Inquiries(Check all that apply).								76. NYS PIN Message No.				77. Complainant Signature				B use cover sheet					
<input type="checkbox"/> DMV. <input checked="" type="checkbox"/> Want/Warrant. <input type="checkbox"/> Scooplaw <input type="checkbox"/> Crim. History <input type="checkbox"/> Stolen Property <input type="checkbox"/> Other																					
78. Reporting Officer Signature(Include Rank)								79. ID No				80. Supervisor's Signature(include Rank)				81. ID No Approved By		85. 1			
2872 PTL SESSELMAN																1829 SGT CADORET		Page of 2			
82. Status <input type="checkbox"/> Open <input checked="" type="checkbox"/> Closed(if Closed, check box below). <input type="checkbox"/> Unfounded <input checked="" type="checkbox"/> Vict. Refused to Coop. <input type="checkbox"/> Arrest <input type="checkbox"/> Pros. Declined <input type="checkbox"/> Warrant Advised <input type="checkbox"/> CBI <input type="checkbox"/> Juv. - No Custody <input type="checkbox"/> Arrest-Juv. <input type="checkbox"/> Offender Dead. <input type="checkbox"/> Extrad. Declin <input type="checkbox"/> Unknown								83. Status Date				84. Notified/TOT				86. 2					
								Aug 15 2016								Pages					

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INCIDENT No.: SS-02788-16

BLOTTER/CC No.: SS-020205-16

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ADDITIONAL NARRATIVE

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had pushed her and then pointed him out to Vincent. Vincent then reportedly confronted the subject, e two subjects then engaged in a verbal dispute. states the argument escalated with Viola punching him just prior to my arrival on scene. sustained a swollen, bloody lip as a result of the alleged punch. Both subjects involved had calmed down after being interviewed by police and requested no further police assistance in the matter. Upon conclusion of the incident, was advised by Mazzone Catering Security Supervisor Chris Cole to go home for the rest of his shift. complied and there were no further problems that evening at the horse sales.

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