

<input type="checkbox"/> Do not disclose <input type="checkbox"/> Domestic violence involved		W.S.C.J.T.C. Incident Report					Incident Number					
Victim follow-up left by Officer							Dispatch Time 1400	Arrival Time 1430				
Reported on	Month 09	Day 06	Year 14	DOW SAT	Time 1430	Type of Incident THEFT 3 RD /SHOPLIFT						
Occurred on or between	Month 09	Day 06	Year 14	DOW SAT	Time 1300	Address/Location of Incident						
	Month 09	Day 06	Year 14	DOW SA	Time 1330	Business/Apartment Name Harvey's Lakeside Grocery Store		Business is a victim <input checked="" type="checkbox"/> Yes				
V	Name (Last, First, Middle) Harvey, Larry J.			Information provided		Residence Phone	Business Phone					
Residence Address			City	State	Zip	Occupation Owner	Race	Sex M				
W	Name (Last, First, Middle) Burns, Brian R.			Information provided		Residence Phone	Business Phone					
Residence Address			City	State	Zip	Occupation Sec. Ofc.	Race	Sex M				
	Name (Last, First, Middle)			Information provided		Residence Phone	Business Phone					
Residence Address			City	State	Zip	Occupation	Race	Sex DOB				
	Name (Last, First, Middle)			Information provided		Residence Phone	Business Phone					
Residence Address			City	State	Zip	Occupation	Race	Sex DOB				
S-1	Name (Last, First, Middle) Karns, Karen			Sex F	Race W	Date of Birth 10-10-1968	Height 5'8	Weight 100	Hair BRN	Eyes BLUE		
Residence Address 123 Elm Street			City Burien	State WA	Zip 98188	Residence phone 206-111-1111	Business phone					
Employer/School Unemployed			Address		Alias Name(s)	Drivers license		State				
Clothing, tattoos scars, peculiar marks of identification print dress with cowboy boots				Social Security Number 111-11-1111		Charge(s) Investigation Theft 3			<input type="checkbox"/> Booked <input checked="" type="checkbox"/> Cited			
S-2	Name (Last, First, Middle)			Sex	Race	Date of Birth	Height	Weight	Hair	Eyes		
Residence Address			City	State	Zip	Residence phone	Business phone					
Employer/School			Address		Alias Name(s)	Drivers license		State				
Clothing, tattoos scars, peculiar marks of identification				Social Security Number		Charge(s)			<input type="checkbox"/> Booked <input type="checkbox"/> Cited			
Trademarks of suspect(s) Hid bottle of vitamins in purse and left store without paying					Type of weapon, instrument of force physical			<input type="checkbox"/> Injury involved <input type="checkbox"/> Aid required				
Type of premises Grocery Store			<input type="checkbox"/> Premises locked <input type="checkbox"/> Occupant(s) present		Method to gain entry and point of entry Open to public			Total \$ Loss (approx) \$3.55				
<input type="checkbox"/> Suspect <input type="checkbox"/> Victim		<input type="checkbox"/> Stolen <input type="checkbox"/> Recovered		<input type="checkbox"/> Waiver <input type="checkbox"/> Impound		License No.	State	Year	Make	Model	Color	
Additional description or features								VIN				
Registered owner					Address			Legal owner		Address		
Vehicle disposition (If towed, list towing company, address and phone)								Hold <input type="checkbox"/> Yes		Reason for hold		
Stolen Vehicle		<input type="checkbox"/> Divorce or separation in progress <input type="checkbox"/> HBD Complainant		<input type="checkbox"/> Payments overdue <input type="checkbox"/> Doors unlocked		<input type="checkbox"/> Keys in ignition <input type="checkbox"/> Ignition unlocked		Estimated \$ Value	Radio routed	Clerk No.	Date/Time	
Recovered vehicle condition (damage, items stripped, etc.)				Other agency case number				Owner notified by				Date/Time
Follow-up recommended <input type="checkbox"/> Officer(s) reporting <input type="checkbox"/> Supervisor reviewing <input type="checkbox"/> CID Screener					CID Screener			Officer/Investigator assigned				
Officer(s) responding				Serial No.	Unit No.	Supervisor reviewing				Date		

W.S.C.J.T.C. Incident Report Narrative

Incident Number

(INTRODUCTION)

On 09-06-2014 at 1400 hrs. I was dispatched to this location for a shoplift, with a person in custody. I arrived at 1430 hours and I contacted W-Burns in the office of the store. Burns is the security officer for Harvey's Lakeside Grocery Store. In addition, a woman, later identified as S-Karns, was seated in the office, with handcuffs on her wrists.

(BODY)

Burns told me that he is working as the store security officer and watched Karns wandering around the store. He said that he watched her go to Aisle 9, where the vitamins and other medications are located. He continued watching Karns and clearly saw her place a bottle of Vitamin C inside her black leather purse. Burns said that Karns then walked to the front of the store, passing all cash registers.

Burns followed Karns as she exited through the main doors and headed west, towards the bus stop. Burns confronted Karns and told her that he saw her take the items and that she would need to return to the store. According to Burns, Karns began to cry and said that she was sorry, but really needed the vitamins, but was unable to pay for them.

Karns handed the bottle over to Burns and at that time Burns put handcuffs on her and escorted her back to the office and called 911.

I contacted Karns and advised her of her Miranda Warnings from my Department Issued Miranda Card. Karns said that she understood her rights and then told me that she had taken the vitamins without paying for them. Karns said that she was unable to pay for them, but was fighting a cold and really needed the vitamins.

I took a written statement from Burns. Burns stated that he is the representative for the owner, V-Harvey and that the store was willing to prosecute Karns for the shoplifting.

I asked Karns for a written statement but she refused.

(CLOSING)

I issued an investigation citation to Karns for Theft 3rd. I took the bottle of Vitamin C and entered it into evidence. Burns advised Karns that she was no longer welcome in the store, and presented her with the store's No Trespass Letter. I escorted Karns off of the store property.

Name:

Signature:

Date: