

GREECE POLICE DEPARTMENT FIELD CASE REPORT

CR#

DETAIL	INCIDENT TYPE Animal Complaint	REPORT DATE AND TIME 4/16/2022 2:57 PM	DATE AND TIME FROM 04/16/2022 14:57	DATE AND TIME TO 04/16/2022 14:57
	INCIDENT LOCATION 271 GREECE RIDGE CENTER DR ROCHESTER, NY 14615			

OFFENSES	STATUTE -	ATTEMPT/COMMIT -	COUNTS -
	DESC -		
	STATUTE -	ATTEMPT/COMMIT -	COUNTS -
	DESC -		
	STATUTE -	ATTEMPT/COMMIT -	COUNTS -
	DESC -		

SUBJECT	SUBJECT TYPE Adult	NAME (LAST, FIRST, MIDDLE SUFFIX) RAUSE, NATALIE, M	<input type="checkbox"/> VICTIM IS ALSO COMPLAINANT	
	Reporting Person		PHONE 1 Cell Phone	
	ADDRESS			PHONE 2
	DOB	AGE	SEX RACE F White	ETHNICITY Not-Hispanic/Latino
	HEIGHT	WEIGHT	HAIR COLOR	GLASSES ALIAS
	SCHOOL OR EMPLOYER NAME AND ADDRESS		PHONE -	SCARS MARKS TATTOOS (CODE-TYPE-LOCATION-DESC)

SUBJECT	SUBJECT TYPE Adult	NAME (LAST, FIRST, MIDDLE SUFFIX) REIS, MATHEW, A	<input type="checkbox"/> VICTIM IS ALSO COMPLAINANT	
	Person With Knowledge		PHONE 1 Cell Phone	
	ADDRESS			PHONE 2
	DOB	AGE	SEX RACE M White	ETHNICITY Not-Hispanic/Latino
	HEIGHT	WEIGHT	HAIR COLOR	GLASSES ALIAS
	SCHOOL OR EMPLOYER NAME AND ADDRESS		PHONE -	SCARS MARKS TATTOOS (CODE-TYPE-LOCATION-DESC)

SUBJECT	SUBJECT TYPE Adult	NAME (LAST, FIRST, MIDDLE SUFFIX)	<input type="checkbox"/> VICTIM IS ALSO COMPLAINANT	
	Witness		PHONE 1 Cell Phone	
	ADDRESS			PHONE 2
	DOB	AGE	SEX RACE M White	ETHNICITY Not-Hispanic/Latino
	HEIGHT	WEIGHT	HAIR COLOR	GLASSES ALIAS
	SCHOOL OR EMPLOYER NAME AND ADDRESS		PHONE -	SCARS MARKS TATTOOS (CODE-TYPE-LOCATION-DESC)

CASE STATUS Closed	EXCEPTIONAL CLEARANCE	
REPORTING OFFICER (LAST, FIRST, BADGE) Hopper, Joseph GRE1627	DATE 04/16/2022	REVIEWED BY (LAST, FIRST, BADGE) DATE Ritchie, Kathryn 04/16/2022

GREECE POLICE DEPARTMENT FIELD CASE REPORT

CR #

ADDITIONAL SUBJECTS

SUBJECT	SUBJECT TYPE Adult		NAME (LAST, FIRST, MIDDLE SUFFIX)		<input type="checkbox"/> VICTIM IS ALSO COMPLAINANT	
	Witness					
	ADDRESS					
	DOB	AGE	SEX F	RACE Black/African-American	ETHNICITY Not-Hispanic/Latino	PHONE 1
	HEIGHT	WEIGHT	HAIR COLOR	EYE COLOR	GLASSES	PHONE 2
SCHOOL OR EMPLOYER NAME AND ADDRESS				PHONE -	SCARS MARKS TATTOOS (CODE-TYPE-LOCATION-DESC)	

SUBJECT	SUBJECT TYPE Adult		NAME (LAST, FIRST, MIDDLE SUFFIX)		<input type="checkbox"/> VICTIM IS ALSO COMPLAINANT	
	Witness					
	ADDRESS					
	DOB	AGE	SEX M	RACE White	ETHNICITY Not-Hispanic/Latino	PHONE 1 Cell Phone
	HEIGHT	WEIGHT	HAIR COLOR	EYE COLOR	GLASSES	PHONE 2
SCHOOL OR EMPLOYER NAME AND ADDRESS				PHONE -	SCARS MARKS TATTOOS (CODE-TYPE-LOCATION-DESC)	

SUBJECT	SUBJECT TYPE		NAME (LAST, FIRST, MIDDLE SUFFIX)		<input type="checkbox"/> VICTIM IS ALSO COMPLAINANT	
	ADDRESS					
	DOB	AGE	SEX	RACE	ETHNICITY	PHONE 1
	HEIGHT	WEIGHT	HAIR COLOR	EYE COLOR	GLASSES	PHONE 2
	SCHOOL OR EMPLOYER NAME AND ADDRESS				PHONE -	SCARS MARKS TATTOOS (CODE-TYPE-LOCATION-DESC)

SUBJECT	SUBJECT TYPE		NAME (LAST, FIRST, MIDDLE SUFFIX)		<input type="checkbox"/> VICTIM IS ALSO COMPLAINANT	
	ADDRESS					
	DOB	AGE	SEX	RACE	ETHNICITY	PHONE 1
	HEIGHT	WEIGHT	HAIR COLOR	EYE COLOR	GLASSES	PHONE 2
	SCHOOL OR EMPLOYER NAME AND ADDRESS				PHONE -	SCARS MARKS TATTOOS (CODE-TYPE-LOCATION-DESC)

GREECE POLICE DEPARTMENT FIELD CASE REPORT

CR #

PROPERTY

PROPERTY VEHICLE

PROPERTY VEHICLE	VEHICLE STATUS CODE(S)				VALUE
	PLATE NUMBER AND STATE	<input type="checkbox"/> FULL <input type="checkbox"/> PARTIAL	YEAR	MAKE	MODEL CODE
	VIN #		STYLE		MODEL DESC.
	ADDITIONAL DESCRIPTION				RECOVERY DATE
	TOWED BY		TOWED TO		

OTHER INVOLVED VEHICLE

CASE VEHICLE	INVOLVED VEHICLE ROLE Other Vehicle			
	PLATE NUMBER AND STATE	<input type="checkbox"/> FULL <input type="checkbox"/> PARTIAL	YEAR	MAKE
	VIN #		STYLE	
	ADDITIONAL DESCRIPTION Vehicle: [REDACTED]			
	TOWED BY		TOWED TO	

GENERAL ITEMS

GENERAL ITEMS	PROPERTY CODE(S)			VALUE
	PROPERTY TYPE	SERIAL NUMBER		
	QUANTITY / UNIT OF MEASURE	MEASUREMENT TYPE		SUSPECTED DRUG TYPE
	ITEM TYPE DESCRIPTION			

GENERAL ITEMS	PROPERTY CODE(S)			VALUE
	PROPERTY TYPE	SERIAL NUMBER		
	QUANTITY / UNIT OF MEASURE	MEASUREMENT TYPE		SUSPECTED DRUG TYPE
	ITEM TYPE DESCRIPTION			

GENERAL ITEMS	PROPERTY CODE(S)			VALUE
	PROPERTY TYPE	SERIAL NUMBER		
	QUANTITY / UNIT OF MEASURE	MEASUREMENT TYPE		SUSPECTED DRUG TYPE
	ITEM TYPE DESCRIPTION			

FIREARMS

FIREARM	FIREARM PROPERTY CODE(S)		SERIAL NUMBER	VALUE
	MAKE	MODEL	CALIBER	
	ADDITIONAL DESCRIPTION			RECOVERY DATE

REPORTING OFFICER (LAST, FIRST, BADGE) Hopper, Joseph GRE1627	DATE 04/16/2022	REVIEWED BY (LAST, FIRST, BADGE) Ritchie, Kathryn
		DATE 04/16/2022

GREECE POLICE DEPARTMENT
FIELD CASE REPORT

CR# [REDACTED]

NARRATIVE

RO was dispatched to the listed address for the animal complaint.

Upon arrival, RO met with the complainant, Natalie Rause (R). (R) stated while she was driving in the mall parking lot with her boyfriend, Mathew Reis (PK), another vehicle cut her vehicle off (NY Reg: [REDACTED], a blue sedan). (R) stated this made (PK) agitated. (R) stated she followed the blue sedan to the parking lot in front of Body Fuel. (R) stated both (PK) and the driver of the blue sedan exited their vehicles and were yelling at each other in the parking lot. (R) stated the next thing she knew, (PK) got bit by a dog from the inside the blue sedan. (R) stated nothing got physical between (PK) and the other male.

Ofc. Dutton spoke with (PK). (PK) stated he and another unknown male got into an argument in the parking lot of the mall. (PK) stated when he approached the unknown male, the male ordered his dog to attack him. (PK) stated the dog did bite onto his arm. (PK) was transported to Unity Hospital to have his dog bite checked out.

RO spoke with [REDACTED] (W1), [REDACTED] (W2), and [REDACTED] (W3). All witnesses stated they observed (PK) and the driver of the blue sedan get into an altercation in front of Body Fuel. The witnesses stated (PK) was the primary aggressor in the incident. The witnesses stated they observed (PK) keep yelling at the unknown male and go up to the blue sedan. All witnesses stated the windows to the blue sedan were already down and when (PK) approached the vehicle, the dog bit (PK's) arm. All witnesses stated nothing got physical between (PK) and the other male. All witnesses stated the blue sedan left mall property and was last seen driving towards W Ridge Rd.

Mall Security stated due to the location of the incident, they were unable to get any video footage. Animal Control will attempt to do a follow up on the blue sedan to verify the dog is up to date on its shots.

NARRATIVE

REPORTING OFFICER (LAST, FIRST, BADGE)
Hopper, Joseph GRE1627

DATE
04/16/2022

REVIEWED BY (LAST, FIRST, BADGE)
Ritchie, Kathryn

DATE
04/16/2022

GREECE POLICE DEPARTMENT FIELD CASE SUPPLEMENT REPORT

CR # [REDACTED]

DETAIL
ORIGINAL REPORT DATE AND TIME
04/16/2022 14:57

LOCATION
**271 Greece Ridge Center DR
GREECE, NY 14615**

OFFENSES

STATUTE -	ATTEMPT/COMMIT -	COUNTS -
DESC -		
STATUTE -	ATTEMPT/COMMIT -	COUNTS -
DESC -		
STATUTE -	ATTEMPT/COMMIT -	COUNTS -
DESC -		
STATUTE -	ATTEMPT/COMMIT -	COUNTS -
DESC -		
STATUTE -	ATTEMPT/COMMIT -	COUNTS -
DESC -		

SUBJECT

SUBJECT TYPE **Adult** NAME (LAST, FIRST, MIDDLE SUFFIX) [REDACTED] VICTIM IS ALSO COMPLAINANT

Not Interviewed [REDACTED]

[REDACTED] PHONE 1 **Cell Phone**

DOB [REDACTED] AGE [REDACTED] SEX **M** RACE **WHITE** ETHNICITY **Not-Hispanic/Latino** PHONE 2

HEIGHT [REDACTED] WEIGHT [REDACTED] HAIR COLOR [REDACTED] EYE COLOR [REDACTED] GLASSES [REDACTED] ALIAS

SCHOOL OR EMPLOYER NAME AND ADDRESS [REDACTED] PHONE - SCARS MARKS TATTOOS (CODE-TYPE-LOCATION-DESC)

SUBJECT

SUBJECT TYPE NAME (LAST, FIRST, MIDDLE SUFFIX) VICTIM IS ALSO COMPLAINANT

ADDRESS PHONE 1

DOB AGE SEX RACE ETHNICITY PHONE 2

HEIGHT WEIGHT HAIR COLOR EYE COLOR GLASSES ALIAS

SCHOOL OR EMPLOYER NAME AND ADDRESS PHONE - SCARS MARKS TATTOOS (CODE-TYPE-LOCATION-DESC)

SUBJECT

SUBJECT TYPE NAME (LAST, FIRST, MIDDLE SUFFIX) VICTIM IS ALSO COMPLAINANT

ADDRESS PHONE 1

DOB AGE SEX RACE ETHNICITY PHONE 2

HEIGHT WEIGHT HAIR COLOR EYE COLOR GLASSES ALIAS

SCHOOL OR EMPLOYER NAME AND ADDRESS PHONE - SCARS MARKS TATTOOS (CODE-TYPE-LOCATION-DESC)

CASE STATUS EXCEPTIONAL CLEARANCE

REPORTING OFFICER (LAST, FIRST, BADGE) **Hondorf, Brian GRE1401** DATE **04/26/2022** REVIEWED BY (LAST, FIRST, BADGE) **Rene, Jared** DATE **05/10/2022**

GREECE POLICE DEPARTMENT
FIELD CASE SUPPLEMENT REPORT

CR#

[REDACTED]

Page 2 of 2

NARRATIVE

(RO) received a dog bite report from ofc. Hooper. In reading the report the person bit(PK) was involved in a road rage incident. According to witnesses (PK) was the aggressor yelling and trying to open (NI)'s vehicle door. (PK) was bitten by (NI)'s dog(Pit Bull) at that time on the arm. (RO) left two messages(4-19-22 @ 1750hrs, 4-23-22 @ 0900hrs) for (PK) to contact (RO). (PK) has not contacted (RO).

(RO) ran the license plate from incident and it came back to (NI). (RO) has dealt with (NI) in the past for other dog issues. (NI) is difficult to deal with and has never been cooperative with (RO). (RO) knows (NI) to own a Pit Bull Terrier named "[REDACTED]". (RO) looked up (NI)'s dogs info in BAS; Lic# [REDACTED] exp: 11/20, Rabies exp: 1/23.

Health Department notified.

NARRATIVE

REPORTING OFFICER (LAST, FIRST, BADGE)

Hondorf, Brian GRE1401

DATE

04/26/2022

REVIEWED BY (LAST, FIRST, BADGE)

Rene, Jared

DATE

05/10/2022