

ASF

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on

Adult <input checked="" type="checkbox"/> Juvenile <input type="checkbox"/>		Agency <b>CSPD</b>		CUSTODY REPORT				CSPD No. <b>549 713</b>	
Custody Date <b>8-23-01</b>		Custody Time <b>18 13</b>		Custody Location [REDACTED]		Zone <b>4</b>	Sector <b>7</b>	Booking No. <b>200113944A</b>	
Subjects Name (Last, First Middle) <b>TUILE THUGA, MATTHEW FERNANDO</b>					Alias/Maiden Name <b>LILLIAN HUSK</b>			Offense No. <b>01-28315</b>	
Res. Add [REDACTED]					Telephone <b>01-23417</b>			[REDACTED]	
City & State <b>C/S CO</b>					M.O.			[REDACTED]	
Scars/Marks/Tattoos <b>L. ARM, BELLY, L. HAND</b>									
DOB [REDACTED]	Race <b>P.I.</b>	Sex <b>M</b>	Age <b>24</b>	Ht <b>6-0</b>	Wt <b>160</b>	Hair <b>BLK</b>	Eyes <b>BRO</b>	Drivers License No. <b>-</b>	
State <b>CO</b>	POB <b>C/S CO</b>				Occupation <b>CUSTOMER SERVICE</b>			Subjects Actions <input type="checkbox"/> Resisted <input type="checkbox"/> Armed	
Employers Name (Firm) <b>MCI</b>				Employers Address <b>CORPERATE DR</b>					
CODES:    A - Accomplice    S - Spouse    M - Mother    F - Father    SM - Stepmother    SF - Stepfather									
code	Name (Last, First Middle)			CSPD No.		Address		Telephone	
Injury/Illness <b>NO SC</b>	Treated: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Refused			Treated By:		<input type="checkbox"/> Injury Result of Police Action <input type="checkbox"/> Injured Prior to Police Contact <input type="checkbox"/> Injured/Became Ill While in Police Custody			
Where Treated	Date/Time Treated		Visible Injury						
CJS Number	Statute Number Ordinance Number	CHARGES			INT	DISPO	Common Code	Warrant Number	Summons Number
A	ORI 18-5-113 FIN	FRAUD - IMPERSONATION			N	HCD	X	01-28315 01CR3190	-
B	ORI 18-5-113 FIN	FRAUD - IMPERSONATION			N	HCD	X/2604M	01-28321 01-3210	-
C	ORI 18-5-113 FIN	FRAUD - IMPERSONATION			N	HCD	X	01-23417 01-3200	-
D	ORI FIN								
DISPOSITION CODES						RELEASED TO			
HLD - Held in Custody		FAC - Filed as Charged		ROR - Released on Own Recognizance		Agency _____			
NFC - No Formal Charge		ROB - Released on Bond		TOT - Turned over to Another Agency		Officer _____			
DBP - Charges Dropped by Police		DEC - Deceased		Date & Time _____					
Date/Time of Final Disposition			Officer Making Final Disposition			Filing DDA			
Veh Yr	Veh Make	Model	Style	Color	Veh License No.		State	Location of Vehicle	
Narrative <b>D WAS CONTACTED DURING A SEARCH WARRANT AT [REDACTED] D HAD 3 WARRANTS FOR HIS ARREST</b>								RIGHT INDEX <b>PPL</b>	
Officer Name <b>M. ALLEN</b>		ID No. <b>1428P</b>	Officer Name		ID No.	Supervisor	Page ( of )		