Police Department Baltimore, Maryland

CI/209

Case Number <u>H99030</u>

INFORMATION SHEET

Name MS. MI	JSE			Nickname	<u> </u>
Race_W	Sex_F	Age	D.O.E	3	
Height		Weight_		Complexi	on
Address_			·····	SS#_	
Home Phone		Date	and time of	intervie	w <u>3-22-99 1500</u>
Parent's na	ame		Add	dress	
Boy/girlfr	iends name_			Address_	
Last Schoo	l Attended			Gr	ade
Employer W	OODLAWN HIG	GH SCHOOL	Add	dress <u>170</u>	0 WOODLAWN
Employers	Phone		Hours	s of empl	oyment
RELATIVES IN BALTIMORE NOT LIVING WITH WITNESS Name Relationship					
Address			Pho	one	
Name	eRelationship				
Address			Pho	one	
Read and W	rite	YesX	No		
Under the	influence d	of drugs	Yes	No_X	
If yes exp	lain				
Alcohol Check One Sober_X Had Been Drinking Intoxicated					
torn etc.)					in bloodstained
Meals Prov	idedI	Date	Time	Date	Time
Detective_	MACGILLIVA	RY	Detect:	ive <u>RITZ</u>	