

POLICE DEPARTMENT - FORM 11 - SUPPLEMENT

18. DIV. 3 21. PC. 3 25. C.C. NUMBER 990131074

4s. OFFENSE/INCIDENT *Missing Person* 5s. VICTIM/FIRM NAME LAST, FIRST, MIDDLE *Lee, Hae Min* 6s. DATE-ORIGINAL REPORT *1/13/99*

7s. SUPPLEMENT STATUS: CON'T.  FOLLOW-UP  8s. IF MULTIPLE CLEARANCE, LIST C.C. NUMBERS *None*

**NARRATIVE:** DO NOT REPEAT RESULTS OF PRELIMINARY INVESTIGATION. CLARIFY DATA, SCREENING FACTORS, PROBABLE CAUSE, ETC. ENTER ANY ADDITIONAL INFORMATION. DO NOT SUMMARIZE UNLESS NECESSARY.

AGE NO. *N/A* 10s. ARREST DATA { NAME (LAST, FIRST, MIDDLE) D.O.B. BCI NUMBER, ARREST NUMBER, MISC. INFO.

11s. BLOCK NO. 12s. [REDACTED]

*On 1/16/99 at 1040 hrs, etc. Felver spoke with complainant Lee who advised that he had not heard from his sister since he reported her missing.*

SCREENING FACTORS						14s. CASE CONTINUANCE		15s. CASE STATUS		25s. C.C. NUMBER <b>990131074</b>
INITIAL REVISIED OTAL						C/O		OPEN <input checked="" type="checkbox"/>		
TOTAL FACTORS						-		EX. CLEAR <input type="checkbox"/>		
17s. Distribution:		18s. INVESTIGATING OFFICER		19s. APPROVAL		20s. DATE		SUSP. <input type="checkbox"/>		
Cent. Rec. _____ Juv. _____		<i>Felver 3965</i>		<i>Cpl. Haumb #3702</i>		<i>1-16-99</i>		CLOSED <input type="checkbox"/>		
Detective _____ Intel. _____		21s. REPORT REVIEW		22s. REPORTING AREA		23s. REC'D - CENT. REC.		24s. TELETYPE NUMBER		
Other _____				<i>032160</i>						