COHOES PO	LICE D	EPARTMEN'	Γ		/Precinct		NCII	DENT R	EPORT	3. ORI NY0010200	5. Case No. 24-082949	12339	No. 90
7,8,9. Date Reported (Day, Date, Time) 10,11,12. (TUESDAY 04/16/2024 14:43					ccurred On/From (Day, Date, Time) 13,14,15. Occurred To (Day, Date, Time)								
		04/16/2024 1	.4:43			TUES	SDAY	04/16/2024					
16. Incident THARASSME		RASSMENT							isiness Name E AVENUE S				
19. Incident			ıe. Bld:	z. No., A	nt. No.)			TAIG	L A VEIVOL	SCHOOL			
21 PAGE AV		(,,	, , .									
20. City/State	e/Zip												
COHOES NE	W YOR	K 12047											
21. Location	•	,				23. No	o. of Vi	ictims	24. No. of S	Suspects	26. Victim also C	omplainant?	
COHOES CI	Γ Y 0102	!					1			1	Yes		
Location Typ	e												
SCHOOL													
18. Weapon(s) Used												
PERSONAL	WEAPC	NS (EG, HA	NDS, F	EET, T	EETH, ET	(C)							
22.OFF. No.	LAW	SECTION	SUB	CL	CAT	DEG	ATT			NAME OF	OFFENSE		CT
,	DI	240.26	01		1.	_	-	TABAGG	A CENTE ON TO	NINKSIGAT GO	TTT A CITE		٠,
1. 2.	PL PL	240.26 120.00	01	A	V M	3	C	 		PHYSICAL CO	NTACT ENT TO CAUSE PHY	CICAL INITIDA	1 Y 1
۷.	FL	120.00	VI	A							avi 10 cause Fifi	SICAL INJUKT	
						ASS(OCL	ATED 1	PERSON	IS			
25. TYPE		Name (Last	t, First,	Middle	e, Title)		DOI	3	t Name ., Apt.No., Ci	ty, State, Zip		Res Pho Bus Pho	
SUSPECT		STAPLETO	N, JAN	MES C									
						_		—					
VICTIM/CON ANT		MARTINE	LLI, DA	ANIEL I)								
LAW		MURPHY,	OFFIC	ER								\neg	
ENFORCE													
OFFICER LAW KELLY, OFFIC		FFICER	1										
ENFORCE		, , , , ,											
OFFICI	eR.	•				•							
							•	VICTI	N				
			27. D	OR	28. Age	29 Ge	nder	30. R	ace	31. Ethnicity	32. Handicap	33. Residence S	Statu
Na	ime		27.10	OD	Lo. Age	27. 00		20.20		or zumien	DZ: Hinning	33. Residence	
N: MARTINELI		TEL D	27. D	ОВ	20. Age	25. 00		50.20		21. Z.L	52. IIIIIIII	33. Residence	

□ No

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Victim DID receive information on Victim's Rights and Services pursuant to New York State Law $\;\boxtimes\;$ Yes

SUSPECT

Person ID # 34. Type/No.	35. Name (Last, First, Middle)						
37. Apparent Condition 39a. Home Phone 39b. Work Phone 4	0. Social Security 41. DUB 42. Age 43. Gender 44. Kace						
45. Ethnicity 46. Skin	47. Occupation						
49. Weight 50	J. Hair 51. Eyes 52. Glasses 53. Build 55. Employer Address						
_	"						
36. Alias/Nickname/Maiden Name							
Last Name Fi	rst Name Middle Name						

NARRATIVE

Date of Action	Date Written	Officer Name & Rank
04/16/2024	04/16/2024	MURPHY, JOSEPH (PTLM)
Narrative		

On the listed date and time, officers were dispatched to the listed location for a report of an assault that had just occurred. Upon arrival LE1 Officer Murphy and LE2 Officer Kelly spoke with the listed victim/complainant (V1 Martinelli), who stated that he had a heated discussion with the listed suspect (S1 Stapleton) and per V1, S1 did punch V1 with a closed fist and then shove V1. V1 reported that he had pain and discomfort to the left side of his face, but refused medical attention. S1 stated that V1 came into S1's office and was highly aggitated. S1 then admitted that he took V1's glasses off of V1's face and proceeded to shove V1. S1 did not state that V1 put his hands on S1 or got physical with S1 in any way. S1 was escorted off of the property without further incident. V1 did sign a complaint checklist as well as the listed charge. Criminal summons applied for, and all information forwarded to court/records. No further details at this time.

BC #'s

Murphy - 3

Kelly - 10

Date of Action	Date Written	Officer Name & Rank				
04/19/2024	04/19/2024	MURPHY, JOSEPH (PTLM)				

Narrative

On 04/19/2024, V1 did walk into the Cohoes Police Station with medical paperwork from being evaluated at the Emergent Care Center in Clifton Park on 04/17/2024, as well as photographs of the bruising. V1 stated that he had bruising to his back and right arm, as well as pain to his lower back and the left side of his face. A deposition was taken V1 and based upon the information and paperwork provided by V1, the assault charge was completed and signed by V1. All information forwarded to court/records. Photographs and paperwork were tagged and processed as evidence. No further details at this time.

	_		03/03/2024	SOURCE, SOURCE III (1 TEM)
Date of Action Date Written Officer Name & Rank	05	5/09/2024	05/09/2024	SOREL, JOSEPH (PTLM)
D . A	D	ate of Action	Date Written	Officer Name & Rank

Narrative

On the above listed date patrol was dispatched to the Cohoes Police Station for a male party that needed to be processed on a criminal summons. Upon arrival, patrol identified the male as the listed suspect (S1,Satpleton). S1 was placed in custody at approximately 0925 hours. S1 was booked, processed, and turned over to court for arraignment. All information forwarded to COURT/RECORDS.

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ADMINISTRATIVE

74. Inquiries	75. NYSPIN Message No.		76. Complainant Signature			
DMV CH WW SCL						
77. Reporting Officer Sign	ature (Include Rank)	78. ID No.	79. Supervisor Signature (Include Rank)	80. ID		
		CH1550		CH1532		
PTLM JOSEPH SOREL			PTL LT KEVIN REITER			
81. Status	82. Status I	Date	83. Notified/TOT	•		
ARREST - ADULT	05/09/2024		COURT/RECORDS			

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