State of Connecticut
Department of Public Safety
Division of State Police

DPS-90-C (Rev. 04/'03)

# CRIMINAL INFORMATION SUMMARY

☐ ADDITIONAL PAGES

| TROOP / UNIT: F | | OTHER INVOLVED AGENCY: ☒ NO YES, | |
|---|---|---|---|
| DATE: 1-30-04 | TIME: 1430 | INVESTIGATING TROOPER / OFFICER: TPC GARY W. INGLIS #424 | DPS CASE NUMBER: DPS-04-037836 |

LOCATION OF INCIDENT (STREET NAME AND CITY/TOWN ONLY):
43 SOUTH END AVE. DURHAM, CT.

SUMMARY OF INCIDENT OR AFFIDAVIT: ☒ ARREST MADE ☐ UNDER INVESTIGATION

DURING THE COURSE OF A DOMESTIC VIOLENCE INCIDENT, THE ACCUSED SHOWED UP AT THE VICTIM'S RESIDENCE. ACCUSED FAILED TO COMPLY W/ VERBAL DIRECTIVES AND FLED IN HIS VEHICLE. A PURSUIT RESULTED AND AFTER APPROX. 8-10 MI., THE ACCUSED WAS TAKEN INTO COSTODY W/O FURTHER INCIDENT WHEN HE STOPPED IN FRONT OF A RESIDENCE IN WALLINGFORD.
NO INJURIES AND NO MORE VEHICLE COLLISION OCCURRED.

VICTIM: (DO NOT IDENTIFY ANY JUVENILE BY NAME OR ADDRESS - IF JUVENILE, WRITE "JUVENILE" IN THE NAME FIELD & "AGE" IN DOB FIELD)

| NAME / BUSINESS / AGENCY: | ADDRESS: (TOWN/CITY&STATE ONLY) | JUVENILE: | INJURED: |
|---|---|---|---|
| ☐ M ☒ F<br>FAGAN, CYNTHIA | 43 SOUTH END AVE. DURHAM CT | ☐ YES<br>AGE: | ☐ YES<br>☒ NO |
| NAME / BUSINESS / AGENCY: ☐ M ☐ F | ADDRESS: (TOWN/CITY&STATE ONLY) | JUVENILE: ☐ YES<br>AGE: | INJURED: ☐ YES ☐ NO |
| NAME / BUSINESS / AGENCY: ☐ M ☐ F | ADDRESS: (TOWN/CITY&STATE ONLY) | JUVENILE: ☐ YES<br>AGE: | INJURED: ☐ YES ☐ NO |

ARRESTED: (DO NOT IDENTIFY ANY JUVENILE BY NAME OR ADDRESS- IF JUVENILE, WRITE "JUVENILE" IN THE NAME FIELD & "AGE" IN DOB FIELD)

| NAME: | DOB: | ADDRESS: |
|---|---|---|
| ☒ M ☐ F<br>SALA, THOMAS P | 2-15-47 | 89R MOUNTAIN RD. DURHAM |

| CHARGES: | COURT: | BOND: | INJURED: |
|---|---|---|---|
| 1. VIOL. OF CRIMINAL REST. ORDER<br>2. VIOL. OF PROTECTIVE ORDER<br>3. HARASSMENT 2ND DEGREE<br>4. INTERFERING W/ POLICE | GA: 9<br>TOWN: MIDDLETOWN<br>DATE: 8-2-04 | BOND: $250,000.00<br>☒ CASH ☒ SURETY<br>☐ NON-SURETY ☐ WPTA<br>AMOUNT $:<br>☐ TO BE PRESENTED AT COURT<br>☒ TRANS TO DEPT OF CORRECTIONS @: CONNIGAN C.C. | ☐ YES ☒ NO<br>AMBULANCE:<br>☐ YES ☒ NO<br>HOSPITAL: |

| NAME: | DOB: | ADDRESS: |
|---|---|---|
| ☐ M ☐ F | | |

| CHARGES: | COURT: | BOND: | INJURED: |
|---|---|---|---|
| 5. ENGAGING IN PURSUIT<br>6. RECKLESS DRIVING<br>3.<br>4. | GA:<br>TOWN:<br>DATE: | ☐ CASH ☐ SURETY<br>☐ NON-SURETY ☐ WPTA<br>AMOUNT $:<br>☐ TO BE PRESENTED AT COURT<br>☐ TRANS TO DEPT OF CORRECTIONS @: | ☐ YES ☐ NO<br>AMBULANCE:<br>☐ YES ☐ NO<br>HOSPITAL: |

| NAME: | DOB: | ADDRESS: |
|---|---|---|
| ☐ M ☐ F | | |

| CHARGES: | COURT: | BOND: | INJURED: |
|---|---|---|---|
| 1.<br>2.<br>3.<br>4. | GA:<br>TOWN:<br>DATE: | ☐ CASH ☐ SURETY<br>☐ NON-SURETY ☐ WPTA<br>AMOUNT $:<br>☐ TO BE PRESENTED AT COURT<br>☐ TRANS TO DEPT OF CORRECTIONS @: | ☐ YES ☐ NO<br>AMBULANCE:<br>☐ YES ☐ NO<br>HOSPITAL: |

| NAME: | DOB: | ADDRESS: |
|---|---|---|
| ☐ M ☐ F | | |

| CHARGES: | COURT: | BOND: | INJURED: |
|---|---|---|---|
| 1.<br>2.<br>3.<br>4. | GA:<br>TOWN:<br>DATE: | ☐ CASH ☐ SURETY<br>☐ NON-SURETY ☐ WPTA<br>AMOUNT $:<br>☐ TO BE PRESENTED AT COURT<br>☐ TRANS TO DEPT OF CORRECTIONS @: | ☐ YES ☐ NO<br>AMBULANCE:<br>☐ YES ☐ NO<br>HOSPITAL: |

SUPERVISOR'S APPROVAL REQUIRED: INITIALS: WC ID #: 223 DATE: 07/30/04

THIS INFORMATION IS BEING RELEASED TO THE PUBLIC IN COMPLIANCE WITH THE *FREEDOM OF INFORMATION LAWS.*
FOR ADDITIONAL INFORMATION ON MAJOR CRIMES OR ARRESTS, CONTACT THE CONNECTICUT STATE POLICE PUBLIC INFORMATION OFFICE.
PHONE: 860-685-8230 FAX: 860-685-8301 TO BE