



State of Connecticut  
Department of Public Safety  
Division of State Police

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

### CRIMINAL INFORMATION SUMMARY

ADDITIONAL PAGES

TROOP / UNIT: Western District Major Crime Squad	OTHER INVOLVED AGENCY: <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES,
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DATE: 10/14/2004	TIME: 1000	INVESTIGATING TROOPER / OFFICER: Det. Melfi #1246	DPS CASE NUMBER: DPS-04-032409
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LOCATION OF INCIDENT (STREET NAME AND CITY/TOWN ONLY):  
Rt. 15 Westbound Mobil Rest Area in Fairfield

SUMMARY OF INCIDENT OR AFFIDAVIT:  ARREST MADE  UNDER INVESTIGATION  
 On 06/30/04 at 0223 hours the Mobil rest area in Fairfield on Rt. 15 westbound was robbed by a black male armed with a handgun. The suspect took cash, lottery tickets and a pack of cigarettes before fleeing in a light colored sedan. This suspect matched the description of the suspect in several other armed robberies occurring around the same time along several shoreline communities. He was identified and arrested on other charges on 07/07/04, at which time he confessed to committing numerous robberies, including this one. A warrant was subsequently issued for his arrest in this case.

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: <input type="checkbox"/> M <input type="checkbox"/> F Exxon/Mobil Corporation	ADDRESS: (TOWN/CITY&STATE ONLY) Merritt Parkway Westbound, Fairfield, CT	JUVENILE: <input type="checkbox"/> YES AGE: <input checked="" type="checkbox"/> NO	INJURED: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
NAME / BUSINESS / AGENCY: <input type="checkbox"/> M <input type="checkbox"/> F	ADDRESS: (TOWN/CITY&STATE ONLY)	JUVENILE: <input type="checkbox"/> YES AGE: <input type="checkbox"/> NO	INJURED: <input type="checkbox"/> YES <input type="checkbox"/> NO
NAME / BUSINESS / AGENCY: <input type="checkbox"/> M <input type="checkbox"/> F	ADDRESS: (TOWN/CITY&STATE ONLY)	JUVENILE: <input type="checkbox"/> YES AGE: <input type="checkbox"/> NO	INJURED: <input type="checkbox"/> YES <input type="checkbox"/> NO

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

NAME: <input checked="" type="checkbox"/> M <input type="checkbox"/> F BRYANT, John	DOB: 03/05/72	ADDRESS: 86 Catherine Street Bridgeport, CT
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CHARGES: 1. Robbery 1st Degree, 53a-134 2. Criminal Use of a Firearm, 53a-216 3. Larceny 5th Degree, 53a-125a 4.	COURT: GA: 02  TOWN: Bridgeport  DATE: 10/14/04	BOND: <input type="checkbox"/> CASH <input type="checkbox"/> SURETY <input type="checkbox"/> NON-SURETY <input type="checkbox"/> WPTA AMOUNT \$: 200,000 <input checked="" type="checkbox"/> TO BE PRESENTED AT COURT <input type="checkbox"/> TRANS TO DEPT OF CORRECTIONS @:	INJURED: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO AMBULANCE: <input type="checkbox"/> YES <input type="checkbox"/> NO HOSPITAL:
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NAME: <input type="checkbox"/> M <input type="checkbox"/> F	DOB:	ADDRESS:
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CHARGES: 1. 2. 3. 4.	COURT: GA:  TOWN:  DATE:	BOND: <input type="checkbox"/> CASH <input type="checkbox"/> SURETY <input type="checkbox"/> NON-SURETY <input type="checkbox"/> WPTA AMOUNT \$: <input type="checkbox"/> TO BE PRESENTED AT COURT <input type="checkbox"/> TRANS TO DEPT OF CORRECTIONS @:	INJURED: <input type="checkbox"/> YES <input type="checkbox"/> NO AMBULANCE: <input type="checkbox"/> YES <input type="checkbox"/> NO HOSPITAL:
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SUPERVISOR'S APPROVAL REQUIRED: INITIALS: *[Signature]* ID #: 305 DATE: 10/14/04

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