

MIAMI-DADE POLICE DEPARTMENT

Agency Report Number **PD070117030397**

Original Day Reported **Wed 01-17-07** Time (Min) **0715** Time Dispatched (Min) **0830** Time Arrived (Min) **1100** Time Completed (Min) **1100**

Incident Type 3. Misdemeanor 4. Traffic 5. Ordinance 6. Other 7. Felony 8. Traffic 9. Other 10. Traffic Felony Misdemeanor
 Incident: Day **Wed** Date **01-17-07** Time (Min) **0715** To Day Date Time (Min)

OFFINC #1 Type **1** Description **Found Property** A - Attempted C - Committed **C** Statute Violation Number **7** NOI/UCR Code

Incident Location (Street, Apt. Number) **M.I.A. Concourse "G", TSA screening point** City **Miami** Zip **7** District **7** Grid **1154** Area Zone

Business Name/Area Identifier **M.I.A. Concourse "G", TSA screening point** Forced Entry 0. N/A 1. Yes 2. No 3. Other **0**

Location Type 01. Residence-Single 02. Apartment/Condo 03. Residence-Other 04. Hotel/Motel 05. Convience Store 06. Gas Station 07. Liquor Sales 08. Bar/Nightclub 09. Supermarket 10. Dept./Discount Store 11. Specialty Store 12. Drug Store/Hospital 13. Bank/Financial Inst. 14. Commercial/Office Bldg. 15. Industrial/Mfg. 16. Storage 17. Gov't/Public Bldg. 18. School/University 19. Jail/Prison 20. Religious Bldg. 21. Airport 22. Bus/Rail Terminal 23. Construction Site 24. Other Structure 25. Parking Lot/Garage 26. Highway/Roadway 27. Park/Woodlands/Field 28. Lake/Waterway 29. Motor Vehicle 30. Other Mobile 99. Other **21**

OFFINC # Victims # Offenders # Prim. Off. # Veh. Status Type Weapon 00. N/A 01. Handgun 02. Rifle 03. Shotgun 04. Firearm 05. Knife/Cutting Instrument 06. Blunt Object 07. Hands/Fist/Foot 08. Poison 09. Explosives 10. Fire/Incendiary 11. Threat/Intimidation 12. Simulated Weapon 13. Drugs 14. Unknown 15. Other **00**

VW Code V - Victim W - Witness C - Reporting Person P - Proprietor Z - Other Victim Type 0. N/A 1. Juvenile 2. L. & Officer 3. Adult 4. Business 5. Government 6. Church 9. Other Race N-NA W-White B-Black I-American Indian O-Oriental/Asian U-Unknown Sex M-Male F-Female U-Unknown Residence Type 0. N/A 1. City 2. County 3. Florida 4. Out-of-State Residence Status 0. N/A 1. Full Year 2. Part Year 3. Non-Resident Extent of Injury 0. None 1. Minor 2. Serious 3. Fatal

Injury Type 00. N/A 01. Gunshot 02. Stabbed 03. Laceration 04. Unconscious 05. Poss. Broken Bones 06. Loss of Teeth 07. Burns 08. Abrasions/Bruiases 09. Other Victim Relationship To Offender 00. N/A 01. Undetermined 02. Stranger 03. Spouse 04. Ex-Spouse 05. Co-Habitant 06. Parent 07. Brother/Sister 08. Child 09. Step-Parent 10. Step-Child 11. In-Law 12. Other Family Friend 13. Student 14. Teacher 15. Child of Boy/Girl 16. Boy/Girl Friend 17. Friend 18. Neighbor 19. Sitter/Day Care 20. Employee 21. Employer 22. Landlord/Tenant 23. Acquaintance 99. Other Known

OFFINC Indicator 1. #1 2. #2 **1** VW Code **W 01** V. Type **3** Name (Last, First, Middle or Business) **Joseph, Gertrude** Residence Phone

Address (Street, Apt. Number) **Miami** State **FL** Zip **33172** Business Phone **TSA Screener who discovered hidden compartment**

Other Contact Info. (Time Available, Interpreter, etc.) **TSA Screener who discovered hidden compartment** Synopsis of Involvement

VW Code V, W, or P **B** Race **F** Sex **F** Date of Birth or Age **25** Res. Type **01** Res. Status **01** Extent of Injury **00** Injury Type(s) **00** Relationship **01** Ethnicity **01** Will Victim prefer charges? Yes No

OFFINC Indicator 1. #1 2. #2 **1** VW Code **W 02** V. Type **03** Name (Last, First, Middle or Business) **Rodriguez, Hector** Residence Phone

Address (Street, Apt. Number) **Miami** State **FL** Zip **33172** Business Phone **"G" Supervisor**

Other Contact Info. (Time Available, Interpreter, etc.) **"G" Supervisor** Synopsis of Involvement

VW Code V, W, or P **W** Race **M** Sex **M** Date of Birth or Age **30** Res. Type **01** Res. Status **01** Extent of Injury **00** Injury Type(s) **00** Relationship **01** Ethnicity **01** Will Victim prefer charges? Yes No

OFFINC Indicator 1. #1 2. #2 **1** Suspect Code **S 01** Juvenile Name (Last, First, Middle or Business) **Vick, Michael** Residence Phone

Maiden Name Nickname/Street Name Place of Birth Residence Phone
 Last Known Address (Street, Apt. Number) City State Zip Business Phone
 Occupation Employer/School Address Social Security Number
 Driver's License State/Number Immigration and Naturalization Number Other LD. Number OBTS Number (Arrested) FCIC/MCIC
 Clothing (Describe) Scars/Marks/Tattoos (Location/Describe)

R **B** S **M** Date of Birth or Age Height Weight Eye Color Hair Color Hair Length Hair Style
 Complexion Build Facial Hair Teeth Speech/Voice Special Identifiers

See Narrative

Person/Unit Notified **Det. Kevin C. Kozak** Time **2268** Related Report Number(s) **A6222** Unit **01-17-07**

Officer (s) Reporting **Det. Kevin C. Kozak** ID. Number **2268** Routed To **Kozak** Referred To **Lageyre** Assigned To **01-17-07**

Case Status **O/P** Clearance Type 1. Arrest 2. Exceptional 3. Unfounded 4. Open Panel A - Adult J - Juvenile Date Cleared Jail Number Number Arrested **1** of **1**

Exception Type 1. Extradition Declined 2. Arrest on Primary Offense Secondary Offense Without Prosecution 3. Death of Offender 4. V/W Refused to Cooperate 5. Prosecution Declined 6. Juvenile / No Custody Page **1** of **1**

Date of Supplement	MIAMI-DADE POLICE DEPARTMENT	Agency Report Number PD070117030397
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Original Date Reported 01-17-07	Primary Offense Description Found Property	Victim #1 Name State of FL
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Type Theft 00. N/A 01. Burglary	02. Robbery 03. Shoplifting	04. Postal Pick-up 05. Purses/Watchings	06. Embezzlement 07. From Cash Oper. Machine	08. From Public Access Sign	09. From Vehicle 10. Station	11. By Computer 12. Fraud	99. Other	00
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Person Code Victim 1- Suspect	Offense Code A- Arson Z- Other	Status Code 1. Stolen 2. Recovered	3. Status and Recovered 4. Recovered for Other Jurisdiction	5. Lost 6. Found 7. Seizure	8. Evidence/Seized 9. Other	Damage Code 0. N/A 1. ARMED	2. Criminal Misdemeanor 3. During Other Offense 9. Other
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Property Type A. Auto Accessory/Part B. Bicycle C. Camera/Photo Equipment D. Drug E. Equipment/Tool	F. Food/Vapor G. Gun H. Household Appliance/Goodie I. Jewelry/Personal Metal	K. Clothing/Fur L. Livestock M. Musical Instruments N. Construction Equipment O. Office Equipment	P. Art/Collection Q. Computer Equipment R. Radio/Stereo S. Sports Equipment T. TV/VCR/VCR	U. Currency/Vegetable V. Credit Card/Non-Negotiable W. Boat Motor X. Structure Y. Farm Equipment Z. Miscellaneous
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Person V01	Code # \$ 01	Item # 1	Status 08	Damage 00	Property Type Z	Quantity 1	Name Water bottle	Brand Aquafina	Model Name/Number
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Serial Number	Owner Applied Number	Description (Size, Color, Caliber, Barrel Length, Etc.) Clear with hidden compartment
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Value \$	1.00	Value Recovered \$	Date Recovered 01-17-07	FCIC/NCIC
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Person	Code #	Item #	Status	Damage	Property Type	Quantity	Name	Brand	Model Name/Number
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Serial Number	Owner Applied Number	Description (Size, Color, Caliber, Barrel Length, Etc.)
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Value \$	Value Recovered \$	Date Recovered	FCIC/NCIC
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Value \$	Value Recovered \$	Date Recovered	FCIC/NCIC
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Property Discard Value \$	Change in Property Status Value \$	Property Recovered Value \$	Change in Property Recovered Value \$
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Activity P. Possession C. Sell B. Buy T. Traffic R. Seizure	D. Deliver E. Use K. Disposal/Disburse M. Manufacture/Production/Culture	Z. Other	A. Amphetamine B. Barbiturate C. Cocaine E. Heroin H. Marijuana	M. Marijuana O. Opium/Opium Derivative P. Paraphernalia/Equipment S. Synthetic	U. Unknown Z. Other	Unit 1. Gram 2. Milligram 3. Kilogram 4. Ounce 5. Pound	G. Ton Y. Liter S. Millimeter Q. Other Unit/Item
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Activity	Type	Description	Quantity	Unit	Estimated Street Value \$.00
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Activity	Type	Description	Quantity	Unit	Estimated Street Value \$.00
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Officer (s) Reporting Kevin C. Kozak	ID. Number(s)/Locator Code 2268	Unit A6222	Date 01-17-07
Officer Reviewing (If Applicable)	ID. Number	Routed To	Date
		Assigned To Kozak	By Lageyre
			Date 01-17-07

NARRATIVE CONTINUATION

CIRCLE ONE
 White
 Black
 Yellow
 Other

Juvenile
 In Report

1. Original
 2. Supplement

2

MIAMI-DADE POLICE DEPARTMENT

Agency Report Number

PD070117-030397

DATE

Date of Supplement	Original Primary Offense Description Found Property	Victim #1 Name State of Fl.	Original NCIC/UCR Code
Original Date Reported 01-17-07	Primary Offense Changed To	A - Attempted C - Committed	New NCIC/UCR Code

I was contacted by **Det. Sgt. R. Lageyre** at approx. 0845 hrs. He advised me that a water bottle with a hidden compartment had been found at Concourse "G" screening point and had been taken to the TSA Operations Center at Miami International Airport. He asked that I impound the bottle and initiate an investigation. Upon arrival at the Ops. Center I made contact with TSA screener **M. Salazar** who signed a property receipt for the bottle. The bottle was a 20 oz. "Aquafina" water bottle. The bottle's label concealed a seam which separated the top and the bottom of the bottle. Both ends were sealed by clear partitions and what appeared to be silicone sealant. The concealed compartment contained a small amount of dark particulate and a pungent aroma closely associated with Marijuana. The lower half of the bottle was almost completely full of a clear liquid. The top half contained a small amount of clear liquid. When held upright the bottle appeared to be half full of water.

I next made contact with TSA screening Supervisor for Concourse "G". **Mr. Hector Rodriguez** advised me that a B/M "AirTran" airlines passenger had been reluctant to turn over his water bottle during the screening process. Subsequently he surrendered the bottle which was placed in the recycle bin by TSA screener **Gertrude Joseph**. The passenger completed his screening through Concourse "G" and was allowed to go to his gate. The passenger's reluctance to relinquish a simple water bottle aroused the suspicions of TSA screener **Gertrude Joseph**. **Joseph** retrieved the bottle and upon further investigation found the concealed compartment. She notified her supervisor, **Mr. Rodriguez**. The bottle was taken to the TSA Ops center by **M. Salazar**.

I received the written statements from **Joseph** and **Rodriguez** by FAX at approx. 1035 hrs. At approx. 1130 hrs I returned to the "G" Screening point and met with **Joseph**. I asked her specifically how she would have known that the bottle belonged to **Michael Vick**. She advised me that **Mr. Bernard Lee**, another TSA screener had identified the B/M as **Vick**, a Professional football player for the **Atlanta Falcons**. Further, she stated that the "Aquafina" bottle was the only item in the recycle bin. I also obtained a written statement from **Mr. Bernard Lee** stating that he had recognized **Vick** as a professional football player. Refer to his written statement for details.

I obtained flight reservation information which indicated that a **Mr. Michael Vick** was a passenger on AirTran fit. 338 to Atlanta, GA.

I later reviewed digital surveillance video of the incident which substantiated the incident as reported by **Rodriguez** and **Joseph**. The bottle will be transported to **MDPD** lab for analysis.

JUVENILE SUSPECT

Suspect Code 8 - Suspect A - Arrestee	Code #	Offense Indicator 1 #1 3 Both 2 #2	Residence Type 1 City 3 Florida 2 County 4 Out of State	Citizenship	Drug Indication 1 Yes 3 Unknown 2 No	Alcohol Indication 1 Yes 3 Unknown 2 No				
Drug Activity N N/A P Possess	S Sell B Buy T Traffic	R Smuggle D Deliver E Use	K Dispense/ Distribute	M Manufacture/ Produce/ Cultivate	Z Other	Drug Type N N/A A Amphetamine	B Barbiturate C Cocaine E Heroin	H Hallucinogen M Marijuana Q Cocaine/Dry	P Paraphernalia/ Equipment S Synthetic	U Unknown Z Other
Name of Parent or Custodian (Last, First, Middle)							Residence Phone			
Address (Street, Apt. Number)							Business Phone			
Notified By: (Name)			Date	Time	Juvenile Disposition 1. Handled/Processed Within Dept. and Released 2. Turned Over to DYS/CYF 3. Incarcerated (County Jail)					
Released To: (Name)			Relationship	Date	Time					
Person/Unit Notified			Time				Related Report Number(s)			
Officer (s) Reporting Det. Kevin C. Kozak			ID. Number(s)/Locator Code 2268		Unit A2622	Date 01-17-07				
Officer Reviewing (If Applicable)			ID. Number	Routed To	Referred To	Assigned To Kozak	By Lageyre	Date 01-17-07		
Case Status	Clearance Type 1. Arrest 2. Exceptional 3. Unfounded 4. Open Pend.		A - Adult J - Juvenile	Date Cleared	Jail Number	Number Arrested				
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JUVENILE STATUS