CI/209

Case Number <u>H99030</u>

Name <u>SAAD UL-H</u>	AY CHAUDRY		ATION SHI		e	_
Race P S	ex M A	ıge	D.O.I	3		_
Height	Wei	.ght		Complexi	on	
Address_				SS#_		
Home Phone	_ [ate and	time of	intervie	w <u>3-16-99 1835</u>	_
Parent's name_			Ad	dress		_
Boy/girlfriend	ls name			Address_		
Last School At	tended_MOUNT	r HEBRON	HIGH	Gr	ade_12	_
Employer			Ad	dress		
Employers Phon	ıe		Hour	s of empl	.oyment	
	ATIVES IN BA				WITNESS	_
Address			Ph	one		
Name			Relat	ionship		
Address			Pho	one		
Read and Write	Yes_X	XXXXX	No			
Under the infl	uence of dru	ıgs Yes	S	No_XXX	XXXX	
If yes explain						
Alcohol Check	One Sober XX		een Drin	king	Intoxicated	
torn etc.)	·				in bloodstaine	_
Note any injur	ies					_
Meals Provided	lDate	Tir	me	Date	Time	_
Detective MACO	ILLIVARY		_ Detect	ive_RITZ_		