

THEFT ONLY

MOTOR VEHICLE THEFT REPORT



REPORTING AGENCY Washington State Patrol		REPORTING AGENCY CASE NUMBER	DATE OF THEFT 6-16-2018	TIME OF THEFT	
ESTIMATED VALUE 55,000	LOCATION OF THEFT Enumclaw				
VEHICLE INFORMATION					
YEAR 2006	MAKE International	MODEL 1ht	STYLE Utility	COLOR Red	
VIN [REDACTED] 5186		LICENSE NUMBER [REDACTED] H2	STATE TN		
INSURANCE COMPANY (Agent, Phone) State Farm		LIEN HOLDER/PHONE NUMBER [REDACTED]			
IDENTIFYING CHARACTERISTICS (Damage, special equipment, other ID numbers, other points of identity) Four Doors, No Signs, Diamond Aluminum Dual Fuel Tanks and Trim, Fifth Wheel Hookup				FUEL INVENTORY	
VEHICLE CONTENTS/SERIAL NUMBERS (attach separate sheet, if necessary)					
Keys in Vehicle Damaged Driveable	<input type="checkbox"/> Yes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> No <input type="checkbox"/> No	Doors Locked Payments Overdue/Default Divorce or Sep. in Progress	<input type="checkbox"/> Yes <input type="checkbox"/> Yes <input type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> No
Vehicle Loaned Rented	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> No	NOTE: If vehicle was loaned or rented, describe to whom and by whom, terms of agreement (verbal or written and length) under STATEMENT OF REPORTING PARTY below.		
DATE OF PURCHASE January 5, 2018	DATE OF LAST PMT [REDACTED]	DATE OF SALE	HAS TITLE BEEN TRANSFERRED? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	LOCATION OF DUPLICATE KEYS none	
VICTIMS/SUSPECT/WITNESS					
THEFT REPORTED BY [REDACTED] Susan	DOB 03/24/1957	RESIDENCE PHONE [REDACTED]	BUSINESS PHONE 86-[REDACTED]	CELL PHONE 8-[REDACTED]	
ADDRESS [REDACTED]					
REGISTERED OWNER Shooting for Women Alliance	DOB	RESIDENCE PHONE	BUSINESS PHONE 865-329-3293	CELL PHONE	
ADDRESS [REDACTED]					
LEGAL OWNER Shooting for Women Alliance	DOB	RESIDENCE PHONE	BUSINESS PHONE 865-329-3293	CELL PHONE	
ADDRESS [REDACTED]					
SUSPECT'S NAME Paige Michael Summers	DOB 1/15/1963	PHYSICAL DESCRIPTION: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female			
ADDRESS transient		Age: 55	Wgt: 190	Hgt: 5-10	
		Race: W	Eye: Blue	DOB: 01/15/63	
WITNESS NAME	DOB	ADDRESS	PHONE NUMBER		
STATEMENT OF REPORTING PARTY (Describe Circumstances of Theft): (If additional space is needed use plain 8.5 x 11 paper for page 2.) On 6/11/18 Summers was in Enumclaw, WA at the Enumclaw Expo Center RV Park when he received verbal and then written notice via text message from the President of SFWA, that he no longer had any authority to inhabit, possess, occupy, operate, or move the truck from the Expo property due to discovery that he had purchased and used \$1,400 of chrystal meth and was drinking while occupying/operating the vehicle. Summers received similar notices on the 12 th , 13 th , 14 th , 15 th , and 16 th when he was also provided perfected notice by SGT Tony Ryan of the Enumclaw PD that SFWA was pursuing him for return of the truck. Summers contacted a lady in WA to help him hide the vehicle, which she refused. Summers fled and is presumed to be in Pagosa Springs CO or Tererro, NM where he advertised for sale SFWA's trailer (vin: 5WKBE2024J1051269, also stolen). Summers has refused to return the vehicle and the trailer and will not reveal his whereabouts. Summers is a convicted felon & presumed to be armed with a stolen handgun.					
I, THE UNDERSIGNED, HEREBY DECLARE THIS INFORMATION TO BE TRUE AND CORRECT: I DID NOT GIVE ANYONE PERMISSION TO TAKE OR USE THE DESCRIBED VEHICLE (EXCEPT AS DESCRIBED ABOVE); I AM THE OWNER OR PERSON WHO WAS LEGALLY IN POSSESSION OF THE DESCRIBED VEHICLE AND WILL TESTIFY IN COURT, UNDER OATH, TO THE FACTS HEREIN. I UNDERSTAND THAT I MAY BE CHARGED WITH VIOLATING RCW 9A.72.030, "PERJURY IN THE SECOND DEGREE," BY FILING A FALSE REPORT. IF I REGAIN POSSESSION OF THIS VEHICLE, I UNDERSTAND THAT I MUST NOTIFY THIS POLICE AGENCY IMMEDIATELY OF THE RECOVERY.					
July 19, 2018		6:57 PM EST		Digitally signed by Susan Carrichner DN: cn=Susan Carrichner, o.ou, email=susan@dragonflyemail.com, c=US Date: 2018.07.19 19:09:30 -0400	
DATE	TIME	SIGNATURE [REDACTED]			
SOBRIETY OF COMPLAINANT	PROOF OF OWNERSHIP SHOWN BY <input type="checkbox"/> REG <input type="checkbox"/> TITLE <input type="checkbox"/> NONE	ENTERED INTO WACIC: DATE: TIME:			
REPORT TAKEN BY	PERS. NO.	DATE	DIST.	DET.	