



Ohio Attorney General's Office  
Bureau of Criminal Investigation  
Investigative Report



2025-3739

Officer Involved Critical Incident – 4272 Cider Mill Drive,  
Cincinnati, OH 45245 (L)

**Investigative Activity:** Document Review, Records Received

**Involves:** Thomas Mitchell Noble (S)

**Date of Activity:** 12/05/2025

**Author:** SA Lauren Frazier, #129

**Narrative:**

On December 5, 2025, Ohio Bureau of Criminal Investigation (BCI) Special Agent Lauren Frazier (SA Frazier) compiled background information on Thomas Noble, the subject involved in the incident on November 17, 2025. The background information included researching past police reports involving the subject, searching criminal history records, open and closed-source database inquiries, and social media posts. The information gathered was obtained from BCI Criminal Intelligence Unit (CIU) Analyst Samantha Reeb and SA Frazier.

SA Frazier reviewed the information and noted the following:

**Prior Police Encounters:**

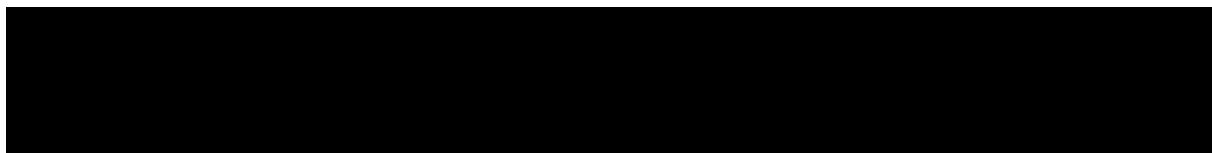
Over the past 25 years, Thomas Noble had approximately 45 interactions with the Union Township Police Department. A summarized list of police contact has been detailed below:

- 08-22-2000 – Field contact (juvenile)
- 02-08-2001 – Field contact (juvenile)
- 05-04-2001 – Arrest – Complicity and Inducing Panic (juvenile)
- 02-23-2003 – Report – Theft (juvenile)
- 07-10-2003 – Runaway/Missing Person (juvenile)
- 08-19-2003 – Report – Criminal Damaging (juvenile)
- 08-27-2003 – Report – Vandalism (juvenile)
- 08-29-2003 – Arrest – Vandalism (juvenile)
- 09-03-2003 – Arrest – Vandalism (juvenile)
- 09-04-2003 – Report – Criminal Damaging (juvenile)
- 10-10-2003 – Runaway/Missing Person (juvenile)
- 01-25-2004 – Runaway/Missing Person (juvenile)
- 01-26-2004 – Arrest – Theft, Domestic Violence, Receiving Stolen Property (juvenile)
- 03-05-2004 – Arrest – Criminal Trespass, Theft, Possessing Criminal Tools (juvenile)
- 04-17-2005 – Arrest – Offenses Involving Underage Persons (juvenile)

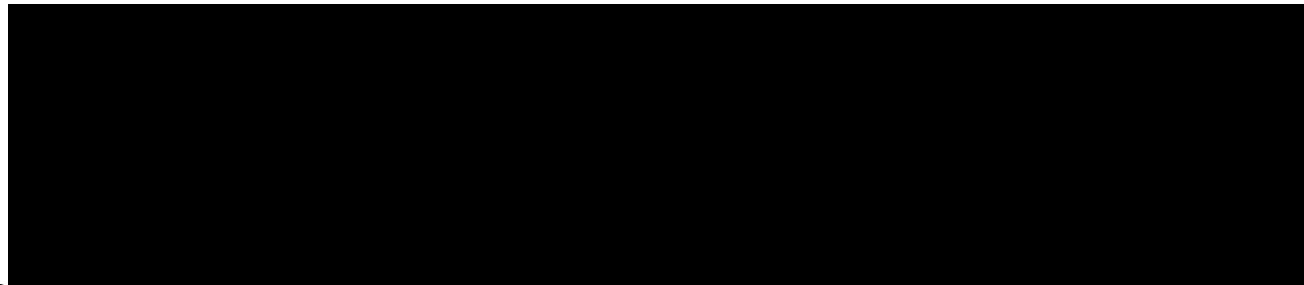
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- 01-20-2007 – Traffic – Crash cited for Failure to Control
- 04-17-2007 – Report – Theft & Forgery
- 07-02-2007 – Arrest – Bench Warrant
- 08-30-2007 – Arrest – Assault, Obstructing Official Business, Escape, Possessing Criminal Tools, and Burglary
- 05-18-2009 – Victim – Theft
- 06-15-2009 – Traffic – Cited for Speed
- 09-27-2009 – Traffic – Crash not cited
- 04-04-2011 – Traffic – Cited for Speed
- 08-19-2012 – Report – Burglary
- 10-03-2013 – Report – Suspicious Person
- 06-27-2014 – Report – Domestic Dispute
- 09-21-2014 – Traffic – Cited for DUS (driving under suspension), No Taillights/License Plate Light, License Forfeiture
- 10-21-2014 – Arrest – Warrant Service
- 11-03-2014 – Report – 911 Hangup
- 11-07-2014 – Arrest – Warrant Service
- 12-15-2014 – Arrest – Warrant Service
- 04-15-2015 – Report – Receiving Stolen Property
- 04-30-2015 – Arrest – Received Stolen Property & Misuse of Credit Card
- 05-01-2015 – Report – Theft
- 10-29-2016 – Report – Disturbance
- 04-25-2017 – Traffic – Cited for Fail to Obey Traffic Control Device
- 06-30-2017 – Report – Assault
- 04-04-2020 – Report – Disturbance/Field Contact
- 04-28-2020 – Report – Disturbance
- 05-24-2020 – Report – Domestic Dispute
- 08-09-2024 – Traffic – Cited for DUS/License Forfeiture
- 06-05-2025 – Report – Check the Welfare, Suicide Attempt, Field Contact
  - UTPD Incident Report# 25-8537 – Officers responded for a welfare check. A social worker called police due to Noble making comments about self-harm. Officers responded and advised the male was not suicidal.
- 07-31-2025 – Report – Cardiac Arrest, Drug Offense
  - UTPD Incident Report# 25-11664 – Officers responded to an overdose. Medical care was refused.
- 11-16-2025 – Report – Field Contact/Disturbance
  - UTPD Incident Report# 25-017889 – Officers responded for a complaint by Thomas Noble that his girlfriend, Ashleigh Remley, took his phone and possibly his medication. Noble located his phone and officers cleared the scene.
- 11-17-2025 – Report – 911 Hang-up – Officer Involved Critical Incident

Computerized Criminal History (CCH):



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### Database Searches:

- Numerous database searches confirmed the above listed criminal history. A summary of Clermont County court records are detailed below:

Case Number	Case Type	File Date	Initiating Action	Party/Company	Party Type	Date of Birth	Case Status
<a href="#">2007 CR.000755</a>	CR - Criminal	09/12/2007	Attempted Burglary	Noble, Thomas Mitchell	Defendant	xx/xx/1988	Closed
<a href="#">2007 CR.000846</a>	CR - Criminal	10/10/2007	Theft	Noble, Thomas Mitchell	Defendant	xx/xx/1988	Closed
<a href="#">2015 CR.000284</a>	CR - Criminal	05/21/2015	Receiving Stolen Property	Noble, Thomas Mitchell	Defendant	xx/xx/1988	Closed
<a href="#">2007 CR.000401</a>	CR - Criminal	05/16/2007	Receiving Stolen Property	Noble, Thomas R	Defendant	xx/xx/1967	Closed
<a href="#">2011 JUD.01787</a>	JUD - Certified Judgment	04/28/2011	Certified Judgment	Noble, Thomas R	Debtor		Open
<a href="#">2016 JUD.00026</a>	JUD - Certified Judgment	01/07/2016	Certified Judgment	Noble, Thomas R	Debtor		Open

Clermont County Common Pleas Court Filings (Noble)

Case Number	Case Type	File Date	Initiating Action	Party/Company	Party Type	Date of Birth	Affiliation	Disposition
<a href="#">2007 CRA.02635</a>	CR - Criminal	05/04/2007	Forgery - Forge any writing so that it purports to be genuine	Noble, Thomas M	Defendant	07/17/1988	(AJ) Assignment to Judge	
<a href="#">2007 CRA.05544</a>	CR - Criminal	08/30/2007	Felony assault	Noble, Thomas M	Defendant	07/17/1988	(AJ) Assignment to Judge	
<a href="#">2007 TR.D.01326</a>	TR - Traffic	01/21/2007	Operate w/o Reasonable Control	Noble, Thomas M	Defendant	07/17/1988	(AJ) Guilty, No Contest, Bound Ov - Crim & Traf	
<a href="#">2008 TR.D.19235</a>	TR - Traffic	10/16/2008	Seatbelt (Driver)	Noble, Thomas M	Defendant	07/17/1988	(AJ) Guilty, No Contest, Bound Ov - Crim & Traf	
<a href="#">2009 TR.D.11670</a>	TR - Traffic	06/17/2009	Speed	Noble, Thomas M	Defendant	07/17/1988	(AJ) Bond Forfeiture	
<a href="#">2011 TR.D.04998</a>	TR - Traffic	04/04/2011	Speed	Noble, Thomas M	Defendant	07/17/1988	(AJ) Bond Forfeiture	
<a href="#">2011 TR.D.09630</a>	TR - Traffic	06/28/2011	Speed	Noble, Thomas M	Defendant	07/17/1988	(AJ) Bond Forfeiture	
<a href="#">2013 TR.D.06110</a>	TR - Traffic	04/12/2013	Seatbelt (Driver)	Noble, Thomas M	Defendant	07/17/1988	(AJ) Bond Forfeiture	
<a href="#">2014 TR.D.17508</a>	TR - Traffic	09/23/2014	DUS - License Forfeiture or Child Support Suspension	Noble, Thomas M	Defendant	07/17/1988	(AJ) Guilty, No Contest, Bound Ov - Crim & Traf	
<a href="#">2015 CR.B.01625</a>	CR - Criminal	04/30/2015	Receiving Stolen Property	Noble, Thomas M	Defendant	07/17/1988	(AJ) Guilty, No Contest, Bound Ov - Crim & Traf	
<a href="#">2017 TR.D.04657</a>	TR - Traffic	03/30/2017	Seatbelt (Driver)	Noble, Thomas M	Defendant	07/17/1988	(AJ) Bond Forfeiture	
<a href="#">2020 TR.D.00402</a>	TR - Traffic	01/09/2020	Littering by operators vehicle	Noble, Thomas M	Defendant	07/17/1988	(AJ) Bond Forfeiture	
<a href="#">2024 TR.D.00634</a>	TR - Traffic	01/19/2024	Seatbelt (Driver)	Noble, Thomas M	Defendant	07/17/1988	(AJ) Magistrate - guilty, no contest Crim & Traf	
<a href="#">2024 TR.D.09503</a>	TR - Traffic	08/12/2024	DUS - License Forfeiture or Child Support Suspension	Noble, Thomas M	Defendant	07/17/1988	(AJ) Magistrate - guilty, no contest Crim & Traf	

Clermont County Municipal Court Filings (Noble)

Upon searching Hamilton County court records, the following court filings were located:

- 02-23-2009 – Traffic – Safety Restraint Violation – Paid out
- 09-18-2020 – Criminal – Inducing Panic and Disorderly Conduct – Charges dismissed

### Other:

- Noble was a 37 year old male, living at 4272 Cider Mill Drive in Union Township, Ohio
- Registered vehicle – 2008 tan Chevrolet Trail Blazer bearing OH plate# KGY4112

The documents received, relative to Noble, are attached to this report for further review, except for any prohibited LEADS/CCH reports, which were disposed of according to applicable policies and procedures.

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**References:**

No references.

**Attachments:**

Attachment # 01: BCI CIU Intel Subject Workup – Thomas NOBLE  
Attachment # 02: 2025-11-25 Prior Police Contacts (Noble)  
Attachment # 03: 2025-06-05 UTPD Incident Report 25-8537 – Welfare Check  
Attachment # 04: 2025-06-05 UTPD Incident Report 25-8537 – Welfare Check  
Attachment # 05: 2025-07-31 UTPD Incident Report 25-11664 – Drug Offense  
Attachment # 06: 2025-11-16 UTPD Incident Report 25-017889

**Ohio Bureau of Criminal Investigation**  
Criminal Intelligence Unit

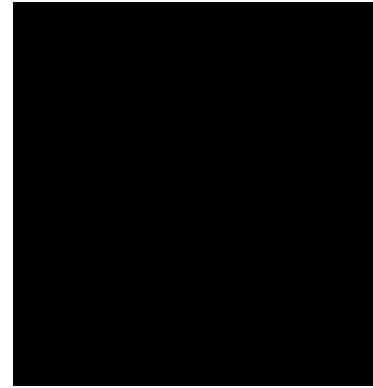
**Intelligence Summary Sheet**



[Print](#) [Email](#) [Reset](#)

**Case Number:** 2025-3739

**Subject Name:** Thomas Mitchell Noble **DOB:** 7/17/1988  
**Alias:** "Tommy" **SSN:** [REDACTED]  
**FBI:** [REDACTED] **DL#:** [REDACTED]  
**SID(s):** [REDACTED] **Height:** 5'7"  
**Misc:** **Weight:** 124 lbs



**Date of photo** 7/31/2023

**Felon**  **Active Warrant (See Notes)**  **NCIC**  
 **CCW**  **Approach With Caution** [REDACTED]

**ADDRESS(ES):**

Street Address	City	State	ZIP	Comments
[REDACTED]				(Source: Casefile, OHLEG, TLO, CLEAR)

**TELEPHONE(S):**

Phone Number	Type	Name Listed To	Carrier	Dates
(513) 882-9363	Cell	Thomas Noble	Verizon	Linked to CashApp Account, Acc, TLO
-Select-				

**EMAIL ADDRESS(ES):**

tommy788@gmail.com

**SOCIAL MEDIA ACCOUNT(S):**

Type	User Name	User ID#	Link
Cash App	Thomas Noble	[REDACTED]	Linked to Phone Number (513) 882-9363 (Created 9/2024)
Instagram	Tommy Noble	nightowl_1788	<a href="https://www.instagram.com/nightowl_1788/">https://www.instagram.com/nightowl_1788/</a> (Unconfirmed)
Facebook	Tommy Noble	tommy.noble.583	<a href="https://www.facebook.com/tommy.noble.583">https://www.facebook.com/tommy.noble.583</a>

**MOTOR VEHICLE(S):**

State	Plate	Year/Color/Make/Model	VIN	Registered Owner
Ohio	KGY4112	2008 Tan Chevrolet Trail Blazer	1GNDT13S882239699	Thomas Noble

**ARREST(S):**

Reason for Arrest	Date of Arrest	Arresting Agency	Case Number	Related Conviction
Receiving Stolen Property/Misuse of Credit Card	4/30/2015	Clermont County SO	OHIO	<input type="checkbox"/>
Theft, Att. Forgery, Att. Safecracking	10/11/2007	Clermont County SO	OHIO	<input type="checkbox"/>
Poss. Criminal Tools, Escape, Assault, Obstructing, Burglary	8/30/2007	Union Township PD	OHIO	<input type="checkbox"/>
Forgery & Theft	7/2/2007	Clermont County SO	OHIO	<input type="checkbox"/>
Theft	3/5/2004	Union Township PD	OHIO	<input type="checkbox"/>
Receiving Stolen Property, Domestic Violence	1/26/2004	Union Township PD	OHIO	<input type="checkbox"/>
Attempted Inducing Panic	6/22/2001	Clermont County SO	OHIO	<input type="checkbox"/>
Failure to Appear	12/27/2017	Fort Thomas PD	KENTUCKY	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

**ANALYST NOTES:****INTELLIGENCE QUERIES:**

Application/Database	Result	Date	Comments
OHLEG	[REDACTED]	11/24/2025	
CCH/NCIC/III	[REDACTED]	11/24/2025	
Accurint	[REDACTED]	11/24/2025	
CLEAR	[REDACTED]	11/24/2025	
TLO	[REDACTED]	11/24/2025	
Open Source/Social Media	[REDACTED]	11/24/2025	
LEADS	[REDACTED]	11/24/2025	[REDACTED]
-Select-	-Select-		

Prepared By: Samantha Reeb

Email: Samantha.reeb@ohioago.gov

Phone: 740-845-2078

Requested By: SA Lauren Frazier

Email: lauren.frazier@ohioago.gov

Phone: 614-619-2289

Date Completed: 11/24/2025

Office/Agency: Ohio Bureau of Criminal Investigation

 Check box if updated from previous summary

The above information provided by the BCI Criminal Intelligence Unit is unconfirmed and should be independently verified.

This information is considered Law Enforcement Sensitive and is not intended for release.



























































































































































































































































































































































































# Union Township Police Dept.

## INVOLVEMENT SHEET

11/25/2025 11:34 AM

**NOBLE, THOMAS MITCHELL**



**SID/TCN:**

**Address:** 4212 CIDER MILL DR CINCINNATI OHIO 45245

**Phone:** 513.356.5867

**SSN/ID:** [REDACTED]

**DOB:** 7/17/1988 **Age:** 37 to 37

**Height:** 507

**Weight:** 124

**Hair Color:** BRO

**Eye Color:** BRO

**Race:** White

**Sex:** Male

**Ethnicity:** Non-Hispanic

**Res. Status:** Resident

**Nationality:**

**Gang:**

**Tattoo:**

Source	Party Type	Incident Type	Incident No.	Date/Time	Incident Location	Arrested Offender
Reporting Officer		Arresting Officer		Arrest Location		
R	Involved Party	911 Hangup	[REDACTED]	11/17/2025 2042	4272 Cider Mill DR, Cincinnati, Ohio, 45245	0
E	Offender	Misc	[REDACTED]	11/17/2025 2042	4272 Cider Mill DR, Cincinnati, Ohio, 45245	1
Wilfert, Daniel						
E	Field Interview	Field Contact	1-25-00017889	11/16/2025 2258	4272 Cider Mill DR, Cincinnati, Ohio, 45245	0
FRIEDMAN, EVAN						
R	Involved Party	Disturbance	25-00052402	11/16/2025 2258	4272 Cider Mill DR, Cincinnati, Ohio, 45245	0
R	Involved Party	CARDIAC OR RESPIRATORY ARREST/DEATH	25-00034726	07/31/2025 0155	4272 Cider Mill DR, Cincinnati, Ohio, 45245	0
E	Offender	Drug Offense	1-25-00011664	07/31/2025 0155	4272 Cider Mill DR, Cincinnati, Ohio, 45245	1
GOSINK, ANDREW						
E	Property Owner	Drug Offense	1-25-00011664	07/31/2025 0155	4272 Cider Mill DR, Cincinnati, Ohio, 45245	0
GOSINK, ANDREW						
E	Field Interview	Check The Welfare	1-25-00008537	06/05/2025 1655	4272 Cider Mill DR, Cincinnati, Ohio, 45245	0
PARKER, MICHAEL						
R	Field Interview	Suicide Attempt	25-00025701	06/05/2025 1655	4272 Cider Mill DR, Cincinnati, Ohio, 45245	0
R	Field Interview	Traffic Crash-Non-Injury	25-00025697	06/05/2025 1630	644 CLOUGH PI, Cincinnati, Ohio, 45245	0
E	Field Interview	Field Contact	1-25-00008539	06/05/2025 1630	644 CLOUGH PI, Ohio, 45245	1
TOROK, DYLAN						
E	Offender	DUS	1-24-00012735	08/09/2024 2005	458 Ohio PI, UNION TOWNSHIP, Ohio, 45255	YES
WULKER, MATTHEW		WULKER, MATTHEW			458 Ohio PI, UNION TOWNSHIP, Ohio, 45255	1
Citation: 4510.111(A)	License Forfeiture		Traffic	Issue Date: 08/09/2024	Counts: 1	Disp: Offender
Citation: 4510.111(A)	License Forfeiture		Traffic	Issue Date: 08/09/2024	Counts: 1	Disp: Summons And Release
R	Cited Person	Traffic Stop	24-00038619	08/09/2024 2005	458 Ohio PI, Cincinnati, Ohio, 45255	0
R	Involved Party	Domestic Dispute/Violence	20-00014344	05/24/2020 1614	4272 Cider Mill DR, Cincinnati, Ohio, 45245	0
E	Domestic Dispute I	Domestic Dispute Field Contact	1-20-00003808	05/24/2020 1614	4272 Cider Mill DR, Cincinnati, Ohio, 45245	0
BOCK, BRANDON						
R	Involved Party	Disturbance	20-00011920	04/28/2020 0054	4272 Cider Mill DR, Cincinnati, Ohio, 45245	0
E	Field Interview	Field Contact	1-20-00002964	04/04/2020 1916	4272 Cider Mill DR, Cincinnati, Ohio, 45245	0
Hoess, William						
R	Involved Party	Disturbance	20-00010021	04/04/2020 1916	4272 Cider Mill DR, Cincinnati, Ohio, 45245	0
R	Involved Party	Assault	17-00027879	06/30/2017 0158	4272 Cider Mill DR, Cincinnati, Ohio, 45245	0

# Union Township Police Dept.

## INVOLVEMENT SHEET

11/25/2025 11:34 AM



**NOBLE, THOMAS MITCHELL**

**SID/TCN:**

**Address:** 4212 CIDER MILL DR CINCINNATI OHIO 45245

**Phone:** 513.356.5867

**SSN/ID:** [REDACTED]

**DOB:** 7/17/1988 **Age:** 37 to 37

**Height:** 507

**Weight:** 124

**Hair Color:** BRO

**Eye Color:** BRO

**Race:** White

**Sex:** Male

**Ethnicity:** Non-Hispanic

**Res. Status:** Resident

**Nationality:**

**Gang:**

**Tattoo:**

Source	Party Type	Incident Type	Incident No.	Date/Time	Incident Location		Arrested Offender
					Arresting Officer	Arrest Location	
E	Involved Party	<b>Assault</b>	1-17-00008450	06/30/2017 0158	4272 Cider Mill DR, Cincinnati, Ohio, 45245		0
	TOROK, DYLAN						
E	Cited Person	<b>Traffic Warning</b>	1-17-00005294	04/25/2017 0149	4279 Terrace DR, Cincinnati, Ohio, 45245		0
	TOROK, DYLAN						
Citation: 4511.12	Fail To Obey Traffic Control Device		Traffic	Issue Date: 04/25/2017	Counts: 1	Disp: Warning Citation	
R	Cited Person	<b>Traffic Stop</b>	17-00017141	04/25/2017 0149	4279 Terrace DR, Cincinnati, Ohio, 45245		0
R	Involved Party	<b>Disturbance</b>	16-00047037	10/29/2016 0142	4272 Cider Mill DR, Cincinnati, Ohio, 45245		0
E	Offender	<b>Theft / Related Offenses</b>	1-15-00004192	05/01/2015 0918	3897 Old Savannah DR 8, Cincinnati, Ohio, 45245		1
	SHAW, CAMERON						
E	Property Owner	<b>Theft / Related Offenses</b>	1-15-00004192	05/01/2015 0918	3897 Old Savannah DR 8, Cincinnati, Ohio, 45245		0
	SHAW, CAMERON						
E	Offender	<b>Warrant Service</b>	1-15-00004162	04/30/2015 1732	4578 Schoolhouse RD, Batavia, Ohio, 45103	YES	
	MARSHALL, SCOTT	MARSHALL, SCOTT			4578 Schoolhouse RD, Batavia, Ohio, 45103		1
Charge: WARRANT	Warrant Arrest		Criminal	Charge Date: 04/30/2015	Counts: 1	Disp: Incarcerated	
R	Offender	<b>Disturbance</b>	15-00016342	04/30/2015 1732	4578 Schoolhouse RD, Batavia, Ohio, 45103		0
R	Involved Party	<b>Theft / Related Offenses</b>	15-00016320	04/30/2015 1452	4272 Cider Mill DR, Cincinnati, Ohio, 45245		0
E	Offender	<b>Theft / Related Offenses</b>	1-15-00004152	04/30/2015 1452	4272 Cider Mill DR, Cincinnati, Ohio, 45245		1
	Koszo, Alexander						
Charge: 2913.51	Receiving Stolen Property		Criminal	Charge Date: 04/30/2015	Counts: 1	Disp: Warrant Filed- Adult	
Charge: 2913.21	Misuse of Credit Card		Criminal	Charge Date: 04/30/2015	Counts: 1	Disp: Warrant Filed- Adult	
E	Offender	<b>Theft / Related Offenses</b>	1-15-00003588	04/15/2015 0900	4578 Schoolhouse RD, Batavia, Ohio, 45103		1
	SHAW, CAMERON						
Charge: 2913.51	Receiving Stolen Property		Criminal	Charge Date: 04/15/2015	Counts: 1	Disp: Warrant Filed- Adult	
E	Offender	<b>Warrant Service</b>	1-14-00013268	12/15/2014 2055	3897 Old Savannah DR 8, Cincinnati, Ohio, 45245	YES	
	Williams, Erin	Williams, Erin			3897 Old Savannah DR 8, Cincinnati, Ohio, 45245		1
Charge: WARRANT	Warrant Arrest		Criminal	Charge Date: 12/15/2014	Counts: 1	Disp: No disposition entered	
R	Involved Party	<b>Warrant Service</b>	14-00051858	12/15/2014 2055	3897 Old Savannah DR 8, Cincinnati, Ohio, 45245		0
R	Offender	<b>Warrant Service</b>	14-00046109	11/07/2014 0746	3897 Old Savannah DR 8, Cincinnati, Ohio, 45245		0
E	Offender	<b>Warrant Service</b>	1-14-00011802	11/07/2014 0746	3897 Old Savannah DR 8, Cincinnati, Ohio, 45245	YES	
	Williams, Richard	Williams, Richard			3897 Old Savannah DR 8, Cincinnati, Ohio, 45245		1
Charge: WARRANT	Warrant Arrest		Criminal	Charge Date: 11/07/2014	Counts: 1	Disp: Summons And Release	
R	Involved Party	<b>911 Hangup</b>	14-00045677	11/03/2014 2250	4272 Cider Mill DR, Cincinnati, Ohio, 45245		0

# Union Township Police Dept.

## INVOLVEMENT SHEET

11/25/2025 11:34 AM



**NOBLE, THOMAS MITCHELL**

**SID/TCN:**

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**Race:** White

**Sex:** Male

**Ethnicity:** Non-Hispanic

**Res. Status:** Resident

**Nationality:**

**Gang:**

**Tattoo:**

<u>Source</u>	<u>Party Type</u>	<u>Incident Type</u>	<u>Incident No.</u>	<u>Date/Time</u>	<u>Incident Location</u>		<u>Arrested Offender</u>
<u>Reporting Officer</u>		<u>Arresting Officer</u>			<u>Arrest Location</u>		
R	Offender	<b>Warrant Service</b>	14-00043521	10/21/2014 1230	3897 Old Savannah DR 8, Cincinnati, Ohio, 45245		0
E	Offender	<b>Warrant Service</b>	1-14-00011148	10/21/2014 1230	3897 Old Savannah DR 8, Cincinnati, Ohio, 45245		YES
Bullock, Chad		Bullock, Chad		3897 Old Savannah DR 8, Cincinnati, Ohio, 45245			1
Charge: WARRANT		Warrant Arrest			Criminal	Charge Date: 10/21/2014	Counts: 1 Disp: Summons And Release
E	Offender	<b>DUS</b>	1-14-00010027	09/21/2014 0121	1065 Ohio PI, Amelia, Ohio, 45102		YES
Kresser, Terrence		Kresser, Terrence		1065 Ohio PI, Amelia, Ohio, 45102			1
Citation: 4513.05		No Tail Lights/License Plate Light			Traffic	Issue Date: 09/21/2014	Counts: 1 Disp: Citation Issued
Charge: 4510.111(A)		License Forfeiture			Criminal	Charge Date: 09/21/2014	Counts: 1 Disp: Summons And Release
R	Cited Person	<b>Traffic Stop</b>	14-00039113	09/21/2014 0121	1065 Ohio PI, Amelia, Ohio, 45102		0
R	Involved Party	<b>Domestic Dispute/Violence</b>	14-00026204	06/27/2014 1750	3897 Old Savannah DR 8, Cincinnati, Ohio, 45245		0
R	Involved Party	<b>Suspicious Person</b>	13-00040054	10/03/2013 2339	902 Ohio PI, Cincinnati, Ohio, 45245		0
R	Involved Party	<b>Burglary/B&amp;E</b>	12-00035835	08/19/2012 0534	4272 Cider Mill DR, Cincinnati, Ohio, 45245		0
E	Offender	<b>Burglary/B&amp;E</b>	1-12-00010060	08/19/2012 0500	4272 Cider Mill DR, Cincinnati, Ohio, 45245		1
Hathorn, Joshua							
E	Cited Person	<b>Traffic Citation</b>	1-11-00004198	04/04/2011 0058	1020 Ohio PI, Amelia, Ohio, 45102		0
Smith, Danielle							
Citation: 4511.21		Speed			Traffic	Issue Date: 04/04/2011	Counts: 1 Disp: Citation Issued
E	Accident Driver	<b>Traffic Crash/Non-Injury</b>	1-09-00011774	09/27/2009 1433	4321 Terrace DR, Union, Ohio		
Dunkman, William							1
E	Cited Person	<b>Traffic Citation</b>	1-09-00007440	06/15/2009 2338	Mt Carmel-tobasco RD, Cincinnati, Ohio		0
Hathorn, Joshua							
Citation: 4511.21		Speed			Traffic	Issue Date: 06/15/2009	Counts: Disp: No disposition entered
E	Victim	<b>Theft / Related Offenses</b>	1-09-00006004	05/18/2009 1058	572 Terrace View DR, Cincinnati, Ohio		
Williams, Erin							0
E	Offender	<b>Burglary/B&amp;E</b>	1-07-00010625	08/30/2007 1333	4320 Terrace DR, Cincinnati, Ohio		YES
Lutson, Chad		Lutson, Chad		4320 Terrace DR, Cincinnati, Ohio, 45245			1
Charge: 2903.13		Assault			Criminal	Charge Date: 09/01/8226	Counts: 1 Disp: No disposition entered
Charge: 2921.31		Obstructing Official Business			Criminal	Charge Date: 09/01/8226	Counts: 1 Disp: No disposition entered
Charge: 2921.34		Escape			Criminal	Charge Date: 09/01/8226	Counts: 1 Disp: No disposition entered
Charge: 2923.24		Possessing Criminal Tools			Criminal	Charge Date: 09/01/8226	Counts: 1 Disp: No disposition entered
Charge: 2911.12		Burglary			Criminal	Charge Date: 09/01/2007	Counts: 1 Disp: No disposition entered
E	Offender	<b>Warrant Service</b>	1-07-00007811	07/02/2007 0031	435 Ohio PI, Cincinnati, Ohio		YES
Perkins, David		Perkins, David		435 Ohio PI, Cincinnati, Ohio, 45245			1
Charge: BENCH		Bench Warrant			Criminal	Charge Date: 07/02/2007	Counts: 1 Disp: No disposition entered
E	Offender	<b>Theft / Related Offenses</b>	1-07-00004943	04/17/2007 0001	4272 Cider Mill DR, Cincinnati, Ohio		
Hathorn, Joshua							1

# Union Township Police Dept.



## INVOLVEMENT SHEET

11/25/2025 11:34 AM

**NOBLE, THOMAS MITCHELL**

**SID/TCN:**

**Address:** 4212 CIDER MILL DR CINCINNATI OHIO 45245

**Phone:** 513.356.5867

**SSN/ID:** [REDACTED]

**DOB:** 7/17/1988 **Age:** 37 to 37

**Height:** 507

**Weight:** 124

**Hair Color:** BRO

**Eye Color:** BRO

**Race:** White

**Sex:** Male

**Ethnicity:** Non-Hispanic

**Res. Status:** Resident

**Nationality:**

**Gang:**

**Tattoo:**

<u>Source</u>	<u>Party Type</u>	<u>Incident Type</u>	<u>Incident No.</u>	<u>Date/Time</u>	<u>Incident Location</u>	<u>Arrested Offender</u>
<u>Reporting Officer</u>		<u>Arresting Officer</u>	<u>Arrest Location</u>			
Charge: 2913.02		Theft	Criminal	Charge Date: 05/04/2007	Counts: 1	Disp: No disposition entered
Charge: 2913.31		Forgery	Criminal	Charge Date: 05/04/2007	Counts: 1	Disp: No disposition entered
E	Accident Driver	<b>Traffic Crash/Non-Injury</b>	1-07-00001007	01/20/2007 1436	1309 Binning RD, Batavia, Ohio	0
Minella, Dominic						
Citation: 4511.202		Failure To Control	Traffic	Issue Date: 01/20/2007	Counts:	Disp: No disposition entered
E	Offender	<b>Misc</b>	1-05-00003646	04/17/2005 2317	4272 Cider Mill DR, Cincinnati, Ohio	YES
Mullis, Kenneth		Mullis, Kenneth		4272 Cider Mill DR, Cincinnati, Ohio, 45245		1
Charge: 4301.69		Offenses Involving Underage Persons	Criminal	Charge Date: 04/17/2005	Counts: 1	Disp: Summons And Release
E	Offender	<b>Theft / Related Offenses</b>	1-04-00002257	03/05/2004 0245	4222 Edinburgh DR, Cincinnati, Ohio	YES
PAVIA, JOHN		Reed, Todd		4222 Edinburgh DR, Cincinnati, Ohio, 45245		1
Charge: 2911.21		Criminal Trespass	Criminal	Charge Date: 03/06/2004	Counts: 1	Disp: No disposition entered
Charge: 2913.02		Theft	Criminal	Charge Date: 03/05/2004	Counts: 1	Disp: No disposition entered
Charge: 2923.24		Possessing Criminal Tools	Criminal	Charge Date: 03/05/2004	Counts: 1	Disp: No disposition entered
E	Offender	<b>Domestic Dispute/Violence</b>	1-04-00000897	01/26/2004 1700	4272 Cider Mill DR, Cincinnati, Ohio	YES
JASPER, GREGORY		Perkins, David		4272 Cider Mill DR, Cincinnati, Ohio, 45245		1
Charge: 2919.25		Domestic Violence	Criminal	Charge Date: 01/26/2004	Counts: 1	Disp: Summons And Release
Charge: 2913.51		Receiving Stolen Property	Criminal	Charge Date: 01/26/2004	Counts: 1	Disp: Summons And Release
E	Offender	<b>Theft / Related Offenses</b>	1-04-00000884	01/26/2004 0159	673 East Lake LN, Cincinnati, Ohio	YES
Bullock, Chad		Reed, Todd		673 East Lake LN, Cincinnati, Ohio, 45245		1
Charge: 2913.02		Theft	Criminal	Charge Date: 01/26/2004	Counts: 1	Disp: No disposition entered
E	Offender	<b>Runaway/Missing Person</b>	1-04-00000863	01/25/2004 0133	109 Southern TR, Cincinnati, Ohio	1
Reed, Todd						
E	Offender	<b>Runaway/Missing Person</b>	1-03-00009640	10/10/2003 1900	4272 Cider Mill DR, Cincinnati, Ohio	1
Wilfert, Daniel						
E	Offender	<b>Vandalism/Criminal Damaging</b>	1-03-00008381	09/04/2003 1704	3225 Omni DR, Cincinnati, Ohio	1
Puckett, Keith						
Charge: 2909.06		Criminal Damaging/Endangering	Criminal	Charge Date: 10/10/2003	Counts: 1	Disp: Summons And Release
E	Offender	<b>Vandalism/Criminal Damaging</b>	1-03-00008305	09/03/2003 0142	650 Eastgate South DR, Cincinnati, Ohio	YES
Buelsing, Ed		White, William		650 Eastgate South DR, Cincinnati, Ohio, 45245		1
Charge: 2909.05		Vandalism	Criminal	Charge Date: 09/03/2003	Counts: 1	Disp: Warrant Filed- Juvenile
E	Offender	<b>Vandalism/Criminal Damaging</b>	1-03-00008272	08/29/2003 1300	4435 Aicholtz RD 220, Cincinnati, Ohio	YES
Godsey, Christopher		White, William		4435 Aicholtz RD 220, Cincinnati, Ohio, 45245		1
Charge: 2909.05		Vandalism	Criminal	Charge Date: 10/28/2003	Counts: 1	Disp: No disposition entered
E	Offender	<b>Vandalism/Criminal Damaging</b>	1-03-00008163	08/27/2003 1130	3241 Omni DR, Cincinnati, Ohio	1
Bullock, Chad						
Charge: 2909.05		Vandalism	Criminal	Charge Date: 09/01/2026	Counts: 1	Disp: No disposition entered
E	Offender	<b>Vandalism/Criminal Damaging</b>	1-03-00007830	08/19/2003 2100	4450 Eastgate BV, Cincinnati, Ohio	1
TAYLOR, TODD						
Charge: 2909.06		Criminal Damaging/Endangering	Criminal	Charge Date: 10/21/2003	Counts: 1	Disp: Warrant Filed- Juvenile
E	Offender	<b>Runaway/Missing Person</b>	1-03-00006461	07/10/2003 1400	4272 Cider Mill DR, Cincinnati, Ohio	1
Wagner, Richard						

# Union Township Police Dept.

## INVOLVEMENT SHEET

11/25/2025 11:34 AM

NOBLE, THOMAS MITCHELL

**SID/TCN:**

**Address:** 4212 CIDER MILL DR CINCINNATI OHIO 45245

**Phone:** 513.356.5867

**SSN/ID:** [REDACTED]

**DOB:** 7/17/1988 **Age:** 37 to 37

**Height:** 507      **Weight:** 124      **Hair Color:** BRO

**Eye Color:** BRO

**Race:** White

**Sex:** Male

**Ethnicity:** Non-Hispanic

**Res. Status:** Resident

**Nationality:**

**Gang:**

**Tattoo:**

<u>Source</u>	<u>Party Type</u>	<u>Incident Type</u>	<u>Incident No.</u>	<u>Date/Time</u>	<u>Incident Location</u>	<u>Arrested Offender</u>
<u>Reporting Officer</u>		<u>Arresting Officer</u>	<u>Arrest Location</u>			
E	Offender	<i>Theft / Related Offenses</i>	1-03-00001854	02/23/2003 2330	4283 Cider Mill DR, Cincinnati, Ohio	1
	Grammel, Brent					
E	Offender	<i>Vandalism/Criminal Damaging</i>	1-01-00004337	05/04/2001 1030	4342 Gleneste-withamsville RD, Cincinnati, Ohio	YES
	Williams, Richard	Williams, Richard		4342 Gleneste-withamsville RD, Cincinnati, Ohio, 45245		1
Charge: 2923.03		Complicity	Criminal	Charge Date: 05/04/2001	Counts: 1	Disp: Summons And Release
Charge: 2917.31		Inducing Panic	Criminal	Charge Date: 05/04/2001	Counts: 1	Disp: Summons And Release
E	Involved Party	<i>Field Contact</i>	1-01-00001200	02/08/2001 1148	4325 Terrace DR, Cincinnati, Ohio	0
	Rees, Anthony					
E	Involved Party	<i>Field Contact</i>	1-00-00009529	08/22/2000 1938	644 Clough PI, Cincinnati, Ohio	0
	Zint, Sean					

# Union Township Police Dept.



## Incident Report

Detailed

INCD#: 1-25-008537

CFS#: 25-025701

60.1 - Field Contact

Printed On: 12/05/2025 3:09 PM

### Incident Location

Location Type: SINGLE FAMILY HOME  
District/Zone: Terrace, Cider Mill, Holiday, Long  
Beat/Area: North District  
Bus/Common:  
Address: 4272 Cider Mill DR  
Cincinnati, OH 45245

### Report Information

Date: 06/05/2025 At: 16:55:44  
Report Type: Incident Report

### Incident Date and Time

From: 06/05/2025 At: 16:55:44  
To: 06/05/2025 At: 17:48:00

### Incident Origin

How Received: Phone  
Received From: 16:55:44 Thru: 17:50:41 Elapsed Time: 55 minutes  
Entered By: PARKER, MICHAEL  
Entry Date: 6/06/2025 At: 01:38:54  
Dispatched Nature: Suicide Attempt

### Incident Characteristics

Rpt. Officer: PARKER, MICHAEL  
Shift: Shift 2  
Lighting: Daylight  
Weather: No Adverse Weather  
Citations:  
 Weapons Involved  Cargo Theft Related

### Caller Information

Last Name: KIMBLE  
First Name: HANNAH  
Middle Name:

Address:

Phone: [REDACTED]

### Approval Information

Officer:

Date:

At:

### Responders and Times

Responder ID	Dispatched	Enroute	At Scene	Cleared	Other	Total	Reporting Officer
24-PARKER, MICHAEL	17:01:03	17:01:03	17:08:40	17:46:50		45	Yes
31-Hoess, William	17:00:50	17:00:50	17:16:05	17:48:37		48	No

### Clearances

Date Time Type  
06/06/2025 417 Closed

### Exceptional Clearances

Date Type  
Disposition  
Closed

### Involved Parties

Person Type: FIELD INTERVIEW: 1  
Name: NOBLE, MARILYN M  
Address: 4272 CIDER MILL DR CINCINNATI, OH 45245  
Driver Lic. No. [REDACTED] Expiration:  
State/Prov: Ohio  
Phone: [REDACTED]  
SSN/ID: [REDACTED] Sex Offender: No

Person is a Complainant  Juvenile at time of incident  
Birth Date: 10/14/1929 Age: 95  
Hair Color: BRO Eye Color: BRO  
Height From: 503 Height To: 503  
Weight From: 110 Weight To: 110

University/College Use

Student  Faculty  Staff  Non-Affiliated

Place Of Birth:  
Resident Status: Resident  
Deceased Date:

### Injuries

<input type="checkbox"/> No Injury	<input type="checkbox"/> Apparent Broken Bones	<input type="checkbox"/> Possible Internal	<input type="checkbox"/> Severe Laceration	<input type="checkbox"/> Loss Of Teeth
<input type="checkbox"/> Unconsciousness	<input type="checkbox"/> Other Major Injury	<input type="checkbox"/> Apparent Minor Injury	<input type="checkbox"/> Fatal	<input type="checkbox"/> Unknown

# Union Township Police Dept.

## Incident Report

Detailed

INCD#: 1-25-008537

CFS#: 25-025701

60.1 - Field Contact

Printed On: 12/05/2025 3:09 PM



### Demographics

Sex: Female

Race: White

Marital Status: N/A

Ethnicity: Non-Hispanic

Religion:

Nationality:

Gang:

Person Type: **FIELD INTERVIEW: 2**

Person is a Complainant  **Juvenile at time of incident**

Name: **NOBLE, THOMAS MITCHELL**

Birth Date: 07/17/1988

Age: 36

Address: 3897 OLD SAVANNAH DR Suite: 8 CINCINNATI, OH 45245

Hair Color: BRO

Eye Color: BRO

Driver Lic. No. [REDACTED] Expiration: 07/2027

Height From: 507

Height To: 507

State/Prov: Ohio

Weight From: 124

Weight To: 124

Phone: 513.528.2134

SSN/ID: [REDACTED] Sex Offender: No

Place Of Birth:

University/College Use

Resident Status: Resident

Student  Faculty  Staff  Non-Affiliated

Deceased Date:

### Injuries

No Injury

Apparent Broken Bones

Possible Internal

Severe Laceration

Loss Of Teeth

Unconsciousness

Other Major Injury

Apparent Minor Injury

Fatal

Unknown

### Demographics

Sex: Male

Race: White

Marital Status: N/A

Ethnicity: Non-Hispanic

Religion:

Nationality:

Gang:

Person Type: **FIELD INTERVIEW: 3**

Person is a Complainant  **Juvenile at time of incident**

Name: **REMLEY, ASHLEIGH N**

Birth Date: 08/05/1989

Age: 35

Address: 1494 WOODSIDE DR FLORENCE, KY 41042

Hair Color:

Eye Color:

Driver Lic. No. [REDACTED]

Height From:

Height To:

Expiration:

Weight From: 0

Weight To: 0

State/Prov: Kentucky

Phone:

SSN/ID: [REDACTED] Sex Offender: No

Place Of Birth:

University/College Use

Resident Status: Resident

Student  Faculty  Staff  Non-Affiliated

Deceased Date:

### Injuries

No Injury

Apparent Broken Bones

Possible Internal

Severe Laceration

Loss Of Teeth

Unconsciousness

Other Major Injury

Apparent Minor Injury

Fatal

Unknown

### Demographics

Sex: Female

Race: White

Marital Status: N/A

Ethnicity: Non-Hispanic

Religion:

Nationality:

Gang:

# Union Township Police Dept.



## Incident Report

Detailed

INCD#: 1-25-008537

CFS#: 25-025701

60.1 - Field Contact

Printed On: 12/05/2025 3:09 PM

Person Type: **REPORTEE: 1**

Name: **KIMBLE, HANNAH MARIE**

Address: **3855 CRESCENT DR CINCINNATI, OH 452452703**

Driver Lic. No: **[REDACTED]** Expiration: **09/2028**

State/Prov: **Ohio**

Phone: **[REDACTED]**

SSN/ID: **[REDACTED]**

Sex Offender: **No**

University/College Use

Student  Faculty  Staff  Non-Affiliated

Person is a Complainant

**Juvenile at time of incident**

Birth Date: **09/09/1995**

Age: **29**

Hair Color:

Eye Color: **HAZ**

Height From: **505**

Height To: **505**

Weight From: **135**

Weight To: **135**

Injuries

No Injury

Unconsciousness

Apparent Broken Bones

Other Major Injury

Possible Internal

Apparent Minor Injury

Severe Laceration

Fatal

Loss Of Teeth

Unknown

## Demographics

Sex: **Female**

Race: **White**

Marital Status: **N/A**

Ethnicity: **Non-Hispanic**

Religion:

Nationality:

Gang:

Reporting Officer Signature: \_\_\_\_\_

Signed Date: \_\_\_\_\_

Approving Officer Signature: \_\_\_\_\_

Signed Date: \_\_\_\_\_

# Union Township Police Dept.

## Incident Report

Detailed

INCD#: 1-25-008537 CFS#: 25-025701

60.1 - Field Contact

Printed On: 12/05/2025 3:09 PM



### Narratives

Subject:

Type	Date	Time	Author	Approving Officer
Initial Narrative	06/05/2025	1655	PARKER, MICHAEL	

Complainant, who is a social worker, advised the listed male made a concerning comment, indicating self harm. An investigation took place and the male and persons associated, advised he was not suicidal.

# Union Township Police Dept.



## Incident Report

Detailed

INCD#: 1-25-008537 CFS#: 25-025701

60.1 - Field Contact

Printed On: 12/05/2025 3:09 PM

### Narratives

Subject:

Type	Date	Time	Author	Approving Officer
CAD Transfer	06/05/2025	1656	DALY, TRACY L	
06/05/2025 16:56:57 - REQ WELFARE CHECK OF 36 YO ML THOMAS NOBLE WHO MADE 58A COMMENTS				
06/05/2025 16:57:43 - ML LIVES WITH HIS MOTHER WHO IS IN HER 90'S				
06/05/2025 16:58:02 - COMP ADV SHE LAST SPOKE TO ML AT 1620 AND HASN'T BEEN ABLE TO REACH HIM SINCE				
06/05/2025 16:58:11 - ML ISD C-24 AND ADV HE WOULD HANG HIMSELF				
06/05/2025 16:58:27 - THOMAS NOBLE 513-882-9363				
06/05/2025 16:58:37 - ML DID NOT MENTION ANY WEAPONS				
06/05/2025 16:59:02 - Case ID: [REDACTED]				
06/05/2025 17:10:47 - E49 - Clear Time Check-4272 Cider Mill DR Cincinnati				
06/05/2025 17:14:43 - 24 - Clear Time Check-4272 Cider Mill DR Cincinnati				
06/05/2025 17:14:46 - M51 - Clear Time Check-4272 Cider Mill DR Cincinnati				
06/05/2025 17:20:37 - 31 - Clear Time Check-4272 Cider Mill DR Cincinnati				
06/05/2025 17:20:39 - 24 - Clear Time Check-4272 Cider Mill DR Cincinnati				
06/05/2025 17:23:59 - 24 - Cancel Checks-4272 Cider Mill DR Cincinnati				
06/05/2025 17:24:01 - 31 - Cancel Checks-4272 Cider Mill DR Cincinnati				
06/05/2025 17:40:09 - 24 - Clear Time Check-4272 Cider Mill DR Cincinnati				
06/05/2025 17:40:19 - 31 - Clear Time Check-4272 Cider Mill DR Cincinnati				

ADMINISTRATIVE	AGENCY NAME <b>Union Township Police Dept.</b>								*INCIDENT NUMBER <b>1-25-008537</b>										
	CALL NUMBER <b>1-25-025701</b>		*GEOCODE <b>3A</b>		*CLEARANCES														
	TOD <b>17:01:03</b>		<input checked="" type="checkbox"/> INCIDENT (NON-CRIMINAL) <input type="checkbox"/> OFFENSE <input type="checkbox"/> SUPPLEMENT		A <input type="checkbox"/> Death of Suspect B <input type="checkbox"/> Prosecution Declined C <input type="checkbox"/> Extradition Denied D <input type="checkbox"/> Victim Refused to Coop. E <input type="checkbox"/> Juvenile/No Custody F <input type="checkbox"/> Arrest - Adult G <input type="checkbox"/> Arrest - Juvenile H <input type="checkbox"/> Warrant Issued I <input type="checkbox"/> Invest. Pending J <input checked="" type="checkbox"/> Closed K <input type="checkbox"/> Unfounded L <input type="checkbox"/> Unknown M <input type="checkbox"/> Referred to another agency														
	TOA <b>17:08:40</b>																		
	TOC <b>17:46:50</b>																		
	<b>OHIO UNIFORM INCIDENT REPORT</b>																		
	*REPORT DATE/TIME MONTH <b>6</b> DAY <b>5</b> YEAR <b>2025</b> TIME <b>1655</b>				*INCIDENT OCCURRED FROM MONTH <b>6</b> DAY <b>5</b> YEAR <b>2025</b> TIME <b>1655</b>				*INCIDENT OCCURRED TO MONTH <b>6</b> DAY <b>5</b> YEAR <b>2025</b> TIME <b>1748</b>										
	INCIDENT LOCATION (Street, Apt., City, State, Zip) <b>4272 Cider Mill DR, Cincinnati, OH 45245</b>																		
	OFFENSE	*OFFENSE		*OFFENSE CODE		*A/C		F/M & DEGREE		*HATE/BIAS		*LARCENY		*TYPE CRIMINAL ACTIVITY					
		1.		1.										(Enter up to three for each offense)					
2.		2.										B- BUYING/RECEIVING							
3.		3.										C- CULTIVATING/MFG./PUB.							
4.		4.										D- DISTRIBUTING/SELLING							
5.		5.										E- EXPLOITING CHILDREN							
												O- OPER/PROPOTING/ASSIST.							
												P- POSSESSING/CONCEALING							
												T- TRANSP/TRANSMITTING							
												U- USING/CONSUMING							
												G- OTHER GANG ACTIVITY							
												J- JUVENILE GANG ACTIVITY							
												N- NO GANG ACTIVITY							
*LOCATION OF OFFENSE (Enter up to two)																			
1. <input type="checkbox"/> 2. <input type="checkbox"/> 12 Jail/ Prison 13 Park ing Garage 14 Oth er Pub lic Access Build ings  RESID ENTIAL S TRUCTURE 01 Sing le Family Home 02 Multiple Dwelling 03 Res identi al Faci lity 04 Oth er Res identi al 05 Gar age/Shed  PUBLI C ACC ESS BLDGS. 06 Transit Faci lity 07 G overnm ent Offi ce 08 Sch ool 09 Coll ege 10 Chu rch 11 Hos pital												RETAIL 26 Bar 27 B uy/Sell/Trade Shop 28 Res taurant 29 Gas Station 30 Auto Sales Lot 31 Jewelry Store 32 Clo th ing Sto re 33 Dru gstore 34 Liq uor Sto re 35 Sh opping Mall 36 Spo ring Goods 37 Gro cery/Superm arket 38 Vari ety/Con veni ence 39 De partme nt Sto re 40 Oth er Retail Sto re  COMMERCIAL LOCATIONS 15 Aut o Shop 16 Fin ancial Institu ion 17 Bar ber/Beauty Shop 18 Hote l/Motel 19 Dry Cleaners/Laundry 20 Pro fessi onal Offi ce 21 Doc tor's Offi ce 22 Oth er Bus iness Offi ce 23 Amu seme nt Center 24 Ren tal Storage Faci lity 25 Oth er Co mmercial Service Loc.				41 Fac tory/Mill/Plan t 42 Oth er Building  OUTSIDE 43 Yard 44 Con struction Site 45 Lake /Waterway 46 Field/ Woods 47 Str eet 48 Park /Playground 49 Park etry 50 Ce metery 51 Pub lic Transit V ehicle 52 Oth er Outs ide Locati on  77 Other			
												*SUSPECTED OF USING							
												A <input type="checkbox"/> ALCOHOL							
												D <input type="checkbox"/> DRUGS							
												C <input type="checkbox"/> COMPUTER EQUIPMENT							
												N <input type="checkbox"/> NOT APPLICABLE							
												*TYPE WEAPON/FORCE USED							
												1. <input type="checkbox"/> 2. <input type="checkbox"/> 3. <input type="checkbox"/>							
*METHOD OF ENTRY		*METHOD OF ENTRY – MOTOR VEHICLE THEFT								*METHOD OF ENTRY – BURGLARY/B&E									
1 <input type="checkbox"/> FORCE 2 <input type="checkbox"/> NO FORCE		01 <input type="checkbox"/> Motor Running/Keys in Car 02 <input type="checkbox"/> Unlocked 03 <input type="checkbox"/> Duplicate Key Used 04 <input type="checkbox"/> Window Broken 05 <input type="checkbox"/> Towed								06 <input type="checkbox"/> Hot Wire 07 <input type="checkbox"/> Slim Jim/Coat Hanger 08 <input type="checkbox"/> Tumblers Removed 09 <input type="checkbox"/> Column Peeled 10 <input type="checkbox"/> Ignition Peeled		ENTRY 1 <input type="checkbox"/> BASEMENT 2 <input type="checkbox"/> 1 <sup>ST</sup> FLOOR 3 <input type="checkbox"/> 2 <sup>ND</sup> FLOOR 4 <input type="checkbox"/> OTHER		EXIT 1 <input type="checkbox"/> DOOR 2 <input type="checkbox"/> WINDOW 3 <input type="checkbox"/> GARAGE 4 <input type="checkbox"/> SKYLIGHT 5 <input type="checkbox"/> OTHER		ENTRY 1 <input type="checkbox"/> FRONT 2 <input type="checkbox"/> SIDE 3 <input type="checkbox"/> REAR 4 <input type="checkbox"/> ROOF 5 <input type="checkbox"/> OTHER			
*NO. PREMISES ENTERED																			
###																			
METHODS OF OPERATION																			
*NO.	*TOTAL VICTIMS	*VICTIM TYPE <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> BUSINESS	I <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> BUSINESS	F <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> GOVERNMENT	P <input type="checkbox"/> POLICE OFFICER (IN THE LINE OF DUTY) <input type="checkbox"/> RELIGIOUS ORGANIZATION	S <input type="checkbox"/> SOCIETY <input type="checkbox"/> UNKNOWN	O <input type="checkbox"/> OTHER												
NAME (Last, First, Middle)																			
ADDRESS (Street, Apt., City, State, Zip)																			
EMPLOYER NAME AND ADDRESS (Street, Apt., City, State, Zip)																			
*AGE/ D.O.B.		*SEX	*RACE <input type="checkbox"/> B <input type="checkbox"/> W <input type="checkbox"/> I <input type="checkbox"/> U	ETHNICITY <input type="checkbox"/> A <input type="checkbox"/> U	HGT	WGT	HAIR	EYES											
OCCUPATION				SSN				*RESIDENT STATUS 1 <input type="checkbox"/> RESIDENT 2 <input type="checkbox"/> TOURIST				3 <input type="checkbox"/> MILITARY 4 <input type="checkbox"/> STUDENT		5 <input type="checkbox"/> OTHER U <input type="checkbox"/> UNKNOWN					
*VICTIM <input type="checkbox"/> Y INJURED? <input type="checkbox"/> N		IF INJURED, DESCRIBE INJURIES:																	
*AGG. ASSAULT/ HOMICIDE CIRC.		*LEOKA INFORMATION TYPE OF ACT.		*VICTIM/SUSPECT RELATIONSHIP ASSIGN. TYPE		ORI – OTHER		0. <input type="checkbox"/> 1. <input type="checkbox"/> 2. <input type="checkbox"/> 3. <input type="checkbox"/> 4. <input type="checkbox"/> 5. <input type="checkbox"/>		*VICTIM/OFFENSE LINK									
My signature verifies that the information on this report is accurate and true																			
DATE																			
REPORTING OFFICER <b>PARKER, MICHAEL</b> APPROVING OFFICER																			
TITLE		TITLE								BADGE NO.		DATE							
		<b>Patrol Officer</b>								<b>24</b>		<b>06/06/2025</b>							
FOLLOW-UP? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		If yes, follow-up Assignment:																	
ADDITIONAL SUPPLEMENTS		<input type="checkbox"/> VICTIM/WITNESS <input type="checkbox"/> SUSPECT/ARRESTEE		<input type="checkbox"/> PROPERTY <input type="checkbox"/> NARRATIVE		<input type="checkbox"/> STATEMENTS <input type="checkbox"/> OTHER		FORM RECEIVED BY: <input type="checkbox"/> INVESTIGATION <input type="checkbox"/> RECORDS		INTELLIGENCE RECORDS		SPECIAL COPIES							
P																			
11/2005																			

INCIDENT NUMBER  
**1-25-008537**

## INCIDENT REPORT – PART 2

VICTIM		OFFENSE		INCIDENT NUMBER 1-25-008537						
NO. 1 NAME (Last, First, Middle) 1 KIMBLE, HANNAH MARIE		ADDRESS (Street, Apt., City, State, Zip) 3855 CRESCENT DR CINCINNATI, OH 452452703		INCIDENT DATE AND TIME 06/05/2025 1655						
EMPLOYER NAME AND ADDRESS (Street, Apt., City, State, Zip)		STATEMENTS OBTAINED <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		AGE/ D.O.B. 29 YRS 09/09/1995 SSN [REDACTED]						
REPORTEE		TYPE: <input type="checkbox"/> WRITTEN <input type="checkbox"/> ORAL <input type="checkbox"/> TAPE <input type="checkbox"/> OTHER		PHO [REDACTED] (Mobile) [REDACTED] (Mobile)						
CHECK CATEGORIES <input type="checkbox"/> STOLEN <input type="checkbox"/> RECOVERED <input type="checkbox"/> IMPOUNDED <input type="checkbox"/> RECEIVED <input type="checkbox"/> SUSPECT'S VEHICLE <input type="checkbox"/> VICTIM'S VEHICLE <input type="checkbox"/> UNAUTHORIZED USE <input type="checkbox"/> ABANDONED		ADDRESS (Street, Apt., City, State, Zip)								
NO. <input type="checkbox"/> DAMAGE TO VEHICLE <input type="checkbox"/> THEFT FROM VEHICLE		LIC	LIS	LYI	LIT	VIN/OAN	*VALUE			
VYR		VMA	VMO	VST	VCO TOP BOTTOM	VEHICLE <input type="checkbox"/> Y LOCKED <input type="checkbox"/> N	KEYS IN <input type="checkbox"/> Y VEHICLE <input type="checkbox"/> N	HOLD <input type="checkbox"/> Y VEHICLE <input type="checkbox"/> N	RELEASE <input type="checkbox"/> Y CONTENTS <input type="checkbox"/> N	
VEHICLE ASSOC. W/ SUSPECT NO.		VEHICLE ASSOC. W/ VICTIM NO.	VEHICLE TOWED? <input type="checkbox"/> Y <input type="checkbox"/> N	TOWED BY	OWNERSHIP <input type="checkbox"/> TAG RECEIPT VERIFIED BY: <input type="checkbox"/> BILL OF SALE <input type="checkbox"/> OTHER					
STOLEN MOTOR VEHICLE ONLY		NO. STOLEN	AREA STOLEN <input type="checkbox"/> RESID. <input type="checkbox"/> BUSINESS <input type="checkbox"/> RURAL	ADDITIONAL DESCRIPTION						
AUTO INSURER NAME (Company)		ADDRESS (Street, Apt., City, State, Zip)		PHONE						
MOTOR VEHICLE RECOVERY ONLY		NO. RECOVERED	DATE REC.	STOLEN IN YOUR JURISDICTION <input type="checkbox"/> Y <input type="checkbox"/> N WHERE RECOVERED?					NCIC No.	
*TYPE PROPERTY LOSS/ETC. (enter codes below)		1 NONE 2 BURNED	3 COUNTERFEITED/FORGED 4 DESTROYED/DAMAGED/VANDALIZED	5 STOLEN/ETC. 6 SEIZED	7 RECOVERED U UNKNOWN	P	PHOTO EVIDENCE	TOTAL VALUE		
*LOSS CODE		QUANTITY	DESCRIPTION					*PROP CODE	*VALUE	
VICT. NO.		VEH NO.	MAKE/BRAND		MODEL					DATE RECOVERED
		SERIAL NUMBER	NCIC NUMBER		OTHER NUMBER					
*LOSS CODE		QUANTITY	DESCRIPTION					*PROP CODE	*VALUE	
VICT. NO.		VEH NO.	MAKE/BRAND		MODEL					DATE RECOVERED
		SERIAL NUMBER	NCIC NUMBER		OTHER NUMBER					
*LOSS CODE		QUANTITY	DESCRIPTION					*PROP CODE	*VALUE	
VICT. NO.		VEH NO.	MAKE/BRAND		MODEL					DATE RECOVERED
		SERIAL NUMBER	NCIC NUMBER		OTHER NUMBER					
*LOSS CODE		QUANTITY	DESCRIPTION					*PROP CODE	*VALUE	
VICT. NO.		VEH NO.	MAKE/BRAND		MODEL					DATE RECOVERED
		SERIAL NUMBER	NCIC NUMBER		OTHER NUMBER					
PROPER TY CODES :			VALUABLES		EQUIPMENT	26 Tools		VEHICLES	STRUCTURES	
EXCHANGE MEDIUMS			08 Jewels/Precious Metals 09 Art Objects, Antiques 10 Other Valuables		15 Drugs/Narcotics Equipment 16 Gambling Equipment 17 Computer Hardware/Software 18 Office Equipment 19 Stereo/TV Equipment 20 Recordings-Audio/Visual 21 Sports Equipment 22 Photography Equipment 23 Farm Equipment 24 Heavy Construction/Industrial 25 Building Supplies-Construction	27 Vehicle Parts/Accessories 28 School Supplies 29 Other Equipment		35 Aircraft 36 Automobiles 37 Bicycles 38 Buses 39 Trucks 40 Trailers 41 Watercraft 42 Recreational Vehicle 43 Other Motor Vehicle	46 Single Occupancy 47 Other Dwellings 48 Commercial/Business 49 Industrial/Mfg. 50 Public/Community 51 Storage 52 Other Structure	
DOCUMENTS			01 Money 02 Credit/Debit Card 03 Negotiable Instruments 04 Other Exchange Mediums		11 Clothing/Furs 12 Purse/Handbags/Wallets 13 Other Personal Effects	30 Alcohol 31 Drugs/Narcotics 32 Consumable Goods		44 Firearms 45 Other Weapons	53 Merchandise 54 Other Property 55 Pending Inventory	
05 Non-Negotiable Instruments 06 Personal Papers 07 Other Documents			14 Household Items		20 Recordings-Audio/Visual 21 Sports Equipment 22 Photography Equipment 23 Farm Equipment 24 Heavy Construction/Industrial 25 Building Supplies-Construction	33 Livestock 34 Household Pets			52 Other Structure 53 Merchandise 54 Other Property 55 Pending Inventory	

Complainant, who is a social worker, advised the listed male made a concerning comment, indicating self harm. An investigation took place and the male and persons associated, advised he was not suicidal.

## NARRATIVE

<b>NARRATIVE SUPPLEMENT:</b>		INCIDENT NUMBER <b>1-25-008537</b>
VICTIM		INCIDENT DATE / TIME <b>6/05/2025</b> <b>1655</b>
OFFENSE		NARRATIVE DATE / TIME <b>06/05/2025</b>
NARRATIVE TOPIC	OFFICER <b>T. DALY (94)</b>	BADGE NO.

06/05/2025 16:56:57 - REQ WELFARE CHECK OF 36 YO ML THOMAS NOBLE WHO MADE 58A  
COMMENTS

06/05/2025 16:57:43 - ML LIVES WITH HIS MOTHER WHO IS IN HER 90'S

06/05/2025 16:58:02 - COMP ADV SHE LAST SPOKE TO ML AT 1620 AND HASN'T BEEN ABLE  
TO REACH HIM SINCE

06/05/2025 16:58:11 - ML ISD C-24 AND ADV HE WOULD HANG HIMSELF

06/05/2025 16:58:27 - THOMAS NOBLE 513-882-9363

06/05/2025 16:58:37 - ML DID NOT MENTION ANY WEAPONS

06/05/2025 16:59:02 - Case ID: [REDACTED]

06/05/2025 17:10:47 - E49 - Clear Time Check-4272 Cider Mill DR Cincinnati

06/05/2025 17:14:43 - 24 - Clear Time Check-4272 Cider Mill DR Cincinnati

06/05/2025 17:14:46 - M51 - Clear Time Check-4272 Cider Mill DR Cincinnati

06/05/2025 17:20:37 - 31 - Clear Time Check-4272 Cider Mill DR Cincinnati

06/05/2025 17:20:39 - 24 - Clear Time Check-4272 Cider Mill DR Cincinnati

06/05/2025 17:23:59 - 24 - Cancel Checks-4272 Cider Mill DR Cincinnati

06/05/2025 17:24:01 - 31 - Cancel Checks-4272 Cider Mill DR Cincinnati

06/05/2025 17:40:09 - 24 - Clear Time Check-4272 Cider Mill DR Cincinnati

06/05/2025 17:40:19 - 31 - Clear Time Check-4272 Cider Mill DR Cincinnati

ADMINISTRATIVE	AGENCY NAME <b>Union Township Police Dept.</b>				*INCIDENT NUMBER <b>1-25-011664</b>										
	CALL NUMBER <b>1-25-034726</b>		*GEOCODE <b>3A</b>		*CLEARANCES										
	TOD <b>01:56:19</b>		TOA <b>02:00:53</b>		<input type="checkbox"/> INCIDENT (NON-CRIMINAL) <input checked="" type="checkbox"/> OFFENSE <input type="checkbox"/> SUPPLEMENT										
	TOC <b>02:17:55</b>				<input type="checkbox"/> Death of Suspect <input type="checkbox"/> Prosecution Declined <input type="checkbox"/> Extradition Denied <input type="checkbox"/> Victim Refused to Coop. <input type="checkbox"/> Juvenile/No Custody <input type="checkbox"/> Arrest - Adult <input type="checkbox"/> Referred to another agency										
					<input type="checkbox"/> Arrest – Juvenile <input type="checkbox"/> Warrant Issued <input type="checkbox"/> Invest. Pending <input checked="" type="checkbox"/> Closed <input type="checkbox"/> Unfounded <input type="checkbox"/> Unknown										
	<b>OHIO UNIFORM OFFENSE REPORT</b>														
*REPORT DATE/TIME MONTH <b>7</b> DAY <b>31</b> YEAR <b>2025</b> TIME <b>0155</b>				*INCIDENT OCCURRED FROM MONTH <b>7</b> DAY <b>31</b> YEAR <b>2025</b> TIME <b>0155</b>				*INCIDENT OCCURRED TO MONTH <b>7</b> DAY <b>31</b> YEAR <b>2025</b> TIME <b>0155</b>							
INCIDENT LOCATION (Street, Apt., City, State, Zip) <b>4272 Cider Mill DR, Cincinnati, OH 45245</b>															
OFFENSE	*OFFENSE		*OFFENSE CODE		*A/C	F/M & DEGREE	*HATE/BIAS	*LARCENY	* TYPE CRIMINAL ACTIVITY						
	1. Drug Abuse/Possession of Drugs		1. <b>2925.11</b>		C	M1	N		1. <b>P</b> 2. _____ 3. _____ (Enter up to three for each offense) B- BUYING/RECEIVING C- CULTIVATING/MFG./PUB. D- DISTRIBUTING/SELLING E- EXPLOITING CHILDREN O- OPER/PROPOTING/ASSIST. P- POSSESSING/CONCEALING T- TRANSP/TRANSMITTING U- USING/CONSUMING G- OTHER GANG ACTIVITY J- JUVENILE GANG ACTIVITY N- NO GANG ACTIVITY						
	2.		2.						1. _____ 2. _____ 3. _____						
	3.		3.						1. _____ 2. _____ 3. _____						
	4.		4.						1. _____ 2. _____ 3. _____						
	5.		5.						1. _____ 2. _____ 3. _____						
*LOCATION OF OFFENSE (Enter up to two)															
1. <b>01</b> 2. _____ 12 Jail/ Prison 13 Park ing Garage 14 Oth er Pub lic Ac cess Build ings  RESID ENTIAL STRUC TURE 01 Sing le Fa mily Home 02 Mu ltiple Dwelling 03 Res identi al Fa cility 04 Oth er Res identi al 05 Gar age/Shed  PUBLI C AC CESS BLDGS. 06 Tran sit Fa cility 07 G overn ment Offi ce 08 Sch ool 09 Col lege 10 Chu rch 11 Hos pital								RETAIL 26 Bar 27 Bu y/Sell/ Trade Shop 28 Res ta urant 29 Gas Sta tion 30 Aut o Sales Lot 31 Jewelry Sto re 32 Clot hing Sto re 33 Dru gstore 34 Liq uor Sto re 35 Sh opping Mall 36 Spo rting Goods 37 Gro cery/Supermar ket 38 Vari ety/Con veni ence 39 De partme nt Sto re 40 Oth er Ret ail Sto re  COMMERCIAL LOCATIONS 15 Aut o Shop 16 Fin ancial Institu ion 17 Bar ber/B ea uty Shop 18 Hote l/Motel 19 Dry Cleaners/La undry 20 Pro fessi onal Offi ce 21 Doc tor's Offi ce 22 Oth er Bus iness Offi ce 23 Amu semen t Cen ter 24 Ren tal Sto rage Fa cility 25 Oth er Com mercial Service Loc.				41 Fa cto ry/Mill/Plan t 42 Oth er Building  OUTSIDE 43 Yard 44 Con structi on Sit e 45 Lak e/Water way 46 Field/ Woods 47 Str eet 48 Park ing Lot 49 Park /Playground 50 Ce metery 51 Publ ic Tran sit V ehicle 52 Oth er Outs ide Loca tion  77 Other			
								*SUSPECTED OF USING  A <input type="checkbox"/> ALCOHOL D <input checked="" type="checkbox"/> DRUGS C <input type="checkbox"/> COMPUTER EQUIPMENT N <input type="checkbox"/> NOT APPLICABLE							
								*TYPE WEAPON/FORCE USED  1. <b>99</b> 2. _____ 3. _____							
*METHOD OF ENTRY		*METHOD OF ENTRY – MOTOR VEHICLE THEFT						*METHOD OF ENTRY – BURGLARY/B&E							
1 <input type="checkbox"/> FORCE 2 <input type="checkbox"/> NO FORCE		01 <input type="checkbox"/> Motor Running/Keys in Car 02 <input type="checkbox"/> Unlocked  *NO. PREMISES ENTERED 03 <input type="checkbox"/> Duplicate Key Used 04 <input type="checkbox"/> Window Broken 05 <input type="checkbox"/> Towed			06 <input type="checkbox"/> Hot Wire 07 <input type="checkbox"/> Slim Jim/Coat Hanger  08 <input type="checkbox"/> Tumblers Removed 09 <input type="checkbox"/> Column Peeled 10 <input type="checkbox"/> Ignition Peeled			ENTRY	EXIT	ENTRY	EXIT				
								1 <input type="checkbox"/> BASEMENT 2 <input type="checkbox"/> 1 <sup>ST</sup> FLOOR 3 <input type="checkbox"/> 2 <sup>ND</sup> FLOOR 4 <input type="checkbox"/> OTHER	1 <input type="checkbox"/> DOOR 2 <input type="checkbox"/> WINDOW 3 <input type="checkbox"/> GARAGE 4 <input type="checkbox"/> SKYLIGHT 5 <input type="checkbox"/> OTHER	1 <input type="checkbox"/> FRONT 2 <input type="checkbox"/> SIDE 3 <input type="checkbox"/> REAR 4 <input type="checkbox"/> ROOF 5 <input type="checkbox"/> OTHER					
METHODS OF OPERATION															
*NO. <b>1</b>	*TOTAL VICTIMS <b>1</b>	*VICTIM TYPE B <input type="checkbox"/> BUSINESS	I <input type="checkbox"/> INDIVIDUAL G <input type="checkbox"/> GOVERNMENT	F <input type="checkbox"/> FINANCIAL INSTITUTION R <input type="checkbox"/> RELIGIOUS ORGANIZATION	P <input type="checkbox"/> POLICE OFFICER (IN THE LINE OF DUTY) S <input checked="" type="checkbox"/> SOCIETY U <input type="checkbox"/> UNKNOWN										
NAME (Last, First, Middle) <b>State Of Ohio</b>								PHONE <b>513.752.1230 (Home)</b>							
ADDRESS (Street, Apt., City, State, Zip) <b>4312 GLEN ESTE WITHAMSVILLE RD, CINTI, OH, 45245</b>								PHONE							
EMPLOYER NAME AND ADDRESS (Street, Apt., City, State, Zip)															
*AGE/ D.O.B. <b>6 MOS</b>		*SEX <b>01/01/2025</b>		*RACE <b>NA</b>		B <input type="checkbox"/> W <input type="checkbox"/> A <input type="checkbox"/> I <input type="checkbox"/> U <input type="checkbox"/>	ETHNICITY	HGT	WGT	HAIR	EYES				
OCCUPATION				SSN <b>000-00-0000</b>				*RESIDENT STATUS <b>1</b> <input checked="" type="checkbox"/> RESIDENT 2 <input type="checkbox"/> TOURIST				3 <input type="checkbox"/> MILITARY 4 <input type="checkbox"/> STUDENT	5 <input type="checkbox"/> OTHER U <input type="checkbox"/> UNKNOWN		
*VICTIM INJURED? <input checked="" type="checkbox"/> Y <input type="checkbox"/> N		IF INJURED, DESCRIBE INJURIES:													
*AGG. ASSAULT/ HOMICIDE CIRC.		*LEOKA INFORMATION			*VICTIM/SUSPECT RELATIONSHIP			*VICTIM/OFFENSE LINK <b>2925.11</b>							
		TYPE OF ACT.	ASSIGN. TYPE	ORI – OTHER	0. _____	1. <b>ST</b>	2. _____	3. _____	4. _____	5. _____					
My signature verifies that the information on this report is accurate and true															
REPORTING OFFICER <b>GOSINK, ANDREW</b>								TITLE <b>Patrol Officer</b>		BADGE NO. <b>40</b>		DATE <b>07/31/2025</b>			
APPROVING OFFICER								TITLE		BADGE NO.		DATE			
FOLLOW-UP? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N		If yes, follow-up Assignment: <b>GOSINK, ANDREW</b>													
ADDITIONAL SUPPLEMENTS		<input type="checkbox"/> VICTIM/WITNESS		<input type="checkbox"/> PROPERTY		<input type="checkbox"/> STATEMENTS		FORM RECEIVED BY:	<input type="checkbox"/> INTELLIGENCE	SPECIAL COPIES					
		<input type="checkbox"/> SUSPECT/ARRESTEE		<input type="checkbox"/> NARRATIVE		<input type="checkbox"/> OTHER		<input type="checkbox"/> INVESTIGATION	<input type="checkbox"/> RECORDS						

# INCIDENT REPORT – PART 2

INCIDENT NUMBER	1-25-011664
INCIDENT DATE AND TIME	07/31/2025 0155

VICTIM State Of Ohio,		OFFENSE Drug Abuse/Possession of Drug		AGE/ D.O.B.	SSN
NO. NAME (Last, First, Middle)					
ADDRESS (Street, Apt., City, State, Zip)				PHONE	
EMPLOYER NAME AND ADDRESS (Street, Apt., City, State, Zip)				PHONE	
STATEMENTS OBTAINED <input type="checkbox"/> Y <input type="checkbox"/> N TYPE: <input type="checkbox"/> WRITTEN <input type="checkbox"/> ORAL <input type="checkbox"/> TAPE <input type="checkbox"/> OTHER					
CHECK CATEGORIES <input type="checkbox"/> STOLEN <input type="checkbox"/> RECOVERED <input type="checkbox"/> IMPOUNDED <input type="checkbox"/> RECEIVED <input type="checkbox"/> SUSPECT'S VEHICLE <input type="checkbox"/> VICTIM'S VEHICLE <input type="checkbox"/> UNAUTHORIZED USE <input type="checkbox"/> ABANDONED					
NO. <input type="checkbox"/> DAMAGE TO VEHICLE <input type="checkbox"/> THEFT FROM VEHICLE		LIC	LIS	LIY	LIT
VIN/OAN					
*VALUE					
VYR		VMA	VMO	VST	VCO TOP BOTTOM
VEHICLE ASSOC. W/ SUSPECT NO.		VEHICLE ASSOC. W/ VICTIM NO.	VEHICLE TOWED? <input type="checkbox"/> Y <input type="checkbox"/> N	TOWED BY	OWNERSHIP VERIFIED BY:
STOLEN MOTOR VEHICLE ONLY		NO. STOLEN	AREA STOLEN <input type="checkbox"/> BUSINESS <input type="checkbox"/> RURAL	RESID. <input type="checkbox"/> Y <input type="checkbox"/> N	ADDITIONAL DESCRIPTION
TAG RECEIPT BILL OF SALE OTHER					
TITLE OTHER					
AUTO INSURER NAME (Company) ADDRESS (Street, Apt., City, State, Zip)					
PHONE					
MOTOR VEHICLE RECOVERY ONLY		NO. RECOVERED	DATE REC.	STOLEN IN YOUR JURISDICTION <input type="checkbox"/> Y <input type="checkbox"/> N WHERE RECOVERED?	
NCIC No.					
*TYPE PROPERTY LOSS/ETC. 1 NONE 2 BURNED 3 COUNTERFEITED/FORGED 4 DESTROYED/DAMAGED/VANDALIZED 5 STOLEN/ETC. 6 SEIZED 7 RECOVERED 8 UNKNOWN 9 UNKNOWN P PHOTO E EVIDENCE					
*LOSS CODE 6 QUANTITY DESCRIPTION A Other-UNKNOWN DRUG *PROP CODE 31 *VALUE					
VICT. NO. 1 VEH NO. MAKE/BRAND MODEL DATE RECOVERED					
SERIAL NUMBER NCIC NUMBER OTHER NUMBER					
*LOSS CODE QUANTITY DESCRIPTION *PROP CODE *VALUE					
VICT. NO. VEH NO. MAKE/BRAND MODEL DATE RECOVERED					
SERIAL NUMBER NCIC NUMBER OTHER NUMBER					
*LOSS CODE QUANTITY DESCRIPTION *PROP CODE *VALUE					
VICT. NO. VEH NO. MAKE/BRAND MODEL DATE RECOVERED					
SERIAL NUMBER NCIC NUMBER OTHER NUMBER					
*LOSS CODE QUANTITY DESCRIPTION *PROP CODE *VALUE					
VICT. NO. VEH NO. MAKE/BRAND MODEL DATE RECOVERED					
SERIAL NUMBER NCIC NUMBER OTHER NUMBER					
PROPER TY CODES : VALUABLES EQUIPMENT 26 Too ls VEHICLES STRUCTURES EXCHANGE MEDIUMS 08 Jewe lry/Precious Metals 15 Dr ug/Narcotic Eq up. 27 Ve hicle Parts/Accessories 35 Aircraft 46 Single Occupancy 01 Mo ney 09 Art Objects, Antiques 16 Gamb ling Eq upment 28 Sc hool Supplies 36 Automob ilies 47 Other Dwellings 02 Cred it/Debit Card 10 Other Va luables 17 Comp uter Hardware/Soft. 29 Other Eq upment 37 Bicycles 48 Commercial/Business 03 Negot iable Instrume nts 11 Clothing/Furs 18 Off ice Eq upment 30 Alcohol 38 Buses 49 Indust./Mfg. 04 Other Exchange Med iums 12 Pur ses/Han dbags/ Wallets 19 Stereo TV Eq up. 20 Record ings-Audio Visual 31 Dr ugs/Narcot ics 39 Trucks 50 Public/Comm unity DOCUMENTS 13 Other Perso nal Effects 21 Sports Eq upment 22 Photograp hic Eq upment 32 Consumab le Goods 40 Tra ilers 51 Storage 05 Non-Negot iable Instrume nts 14 Ho usehold Items 23 Farm Eq upment 24 Heavy Co nstruction/Industrial 33 Livestock 41 W atercraft 52 Other Structure 06 Perso nal Papers 15 Ho usehold Items 25 Building Supplies-Co nst. 34 Ho usehold Pets 42 Recreat ional Vehicle OTHER 07 Other Doc uments					
WEAPONS 43 Other Motor Ve hicle 53 Merchandise 54 Other Property 55 Pending Inventory					
44 Firearms 45 Other Weapons					
On the listed date and time, officers responded to the 4200 block of Cider Mill Drive for a man down. On arrival, it was found that a male subject(s) had overdosed and refused medical care. No further action taken.					
NARRATIVE					
07/2022					

## SUSPECT/ARREST SUPPLEMENT

ARRESTING AGENCY

INCIDENT NUMBER

1-25-011664

VICTIM

State Of Ohio,

OFFENSE

Drug Abuse/Possession of Drugs

INCIDENT DATE

ND TIME

07/31/2025

0155

NO.

ADULT  JUVENILE  UNKNOWN 

CHECK APPROPRIATE CATEGORY

 SUSPECT ARRESTEE SUSPECT/ARRESTEE RUNAWAY MISSING OTHER

CHARGES FILED?

 Y  N

NAME (Last, First, Middle)

NOBLE, THOMAS MITCHELL

ALIAS

SSN

G

ADDRESS (Street, Apt., City, State, Zip)

4212 CIDER MILL DR, CINCINNATI, OH, 45245

PHONE

513.528.2134 (Home)

EMPLOYER NAME AND

ADDRESS (Street, Apt., City, State, Zip)

PHONE

PLACE OF BIRTH

DL#/STATE

OCCUPATION/SCHOOL

OH

\*AGE/

D.O.B.

37 YRS

07/17/1988

Male

\*SEX

X

\*RACE

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NAME/DESCRIPTIVES

ADDITIONAL DESCRIPTIVES

SUSPECTED OF USING

 ALCOHOL  DRUGS

POTENTIAL INJURIES?

\*RESIDENT

STATUS

1  RESIDENT2  TOURIST3  MILITARY4  STUDENT5  OTHER

(explain) \_\_\_\_\_

U

 UNKNOWN

\*ARRESTEE WAS ARMED WITH

ARRESTEE ARMED WITH 1. \_\_\_\_ 2. \_\_\_\_ 3. \_\_\_\_

99	NONE	13B	OTHER FULLY AUTOMATIC FIREARM	16	IMITATION FIREARM	50	POISON
11	FIREARM	14	SHOTGUN	17	SIMULATED FIREARM	60	EXPLOSIVES
12	HANDGUN	15	OTHER FIREARM	18	BB/PELLET GUN	65	FIRE/INCENDIARY DEVICE
12A	AUTOMATIC HANDGUN	15A	SEMI-AUTOMATIC SPORTING RIFLE	20	KNIFE/CUTTING INSTRUMENT	70	DRUGS/NARC/SLEEPING PILLS
13	RIFLE	15B	SEMI-AUTOMATIC ASSAULT FIREARM	30	BLUNT OBJECT	80	OTHER WEAPON
13A	FULLY AUTOMATIC RIFLE	15C	MACHINE PISTOL				

ASSOC. PERSONS

NAME

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**VICTIM/WITNESS SUPPLEMENT**

INCIDENT NUMBER

1-25-011664

 VICTIM  
 State Of Ohio,

 OFFENSE  
 Drug Abuse/Possession of Drugs

INCIDENT DATE

ND TIME

07/31/2025

0155

VICTIM	*NO.	*TOTAL VICTIMS	*VICTIM TYPE	I <input type="checkbox"/> INDIVIDUAL B <input type="checkbox"/> BUSINESS	F <input type="checkbox"/> FINANCIAL INSTITUTION G <input type="checkbox"/> GOVERNMENT	P <input type="checkbox"/> POLICE OFFICER (IN THE LINE OF DUTY) R <input type="checkbox"/> RELIGIOUS ORGANIZATION	S <input type="checkbox"/> SOCIETY U <input type="checkbox"/> UNKNOWN	O <input type="checkbox"/> OTHER			
	NAME (Last, First, Middle)										
	ADDRESS (Street, Apt., City, State, Zip)										
	EMPLOYER NAME AND ADDRESS (Street, Apt., City, State, Zip)										
	*AGE/ D.O.B.		*SEX	*RACE □ W □ I □ U	□ B □ A □ U	ETHNICITY	HGT	WGT	HAIR	EYES	
	OCCUPATION			SSN			*RESIDENT STATUS 1 <input type="checkbox"/> RESIDENT 2 <input type="checkbox"/> TOURIST			3 <input type="checkbox"/> MILITARY 4 <input type="checkbox"/> STUDENT	5 <input type="checkbox"/> OTHER U <input type="checkbox"/> UNKNOWN
	*VICTIM INJURED? <input type="checkbox"/> Y N		IF INJURED, DESCRIBE INJURIES:								
	*AGG. ASSAULT/ HOMICIDE CIRC.		*LEOKA INFORMATION		*VICTIM/SUSPECT RELATIONSHIP			*VICTIM/OFFENSE LINK			
			TYPE OF ACT.	ASSIGN. TYPE	ORI - OTHER	0. _____	1. _____	2. _____	3. _____	4. _____	5. _____
	My signature verifies that the information on this report is accurate and true										

DATE \_\_\_\_\_

VICTIM	*NO.	*TOTAL VICTIMS	*VICTIM TYPE	I <input type="checkbox"/> INDIVIDUAL B <input type="checkbox"/> BUSINESS	F <input type="checkbox"/> FINANCIAL INSTITUTION G <input type="checkbox"/> GOVERNMENT	P <input type="checkbox"/> POLICE OFFICER (IN THE LINE OF DUTY) R <input type="checkbox"/> RELIGIOUS ORGANIZATION	S <input type="checkbox"/> SOCIETY U <input type="checkbox"/> UNKNOWN	O <input type="checkbox"/> OTHER			
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	*AGE/ D.O.B.		*SEX	*RACE □ W □ I □ U	□ B □ A □ U	ETHNICITY	HGT	WGT	HAIR	EYES	
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	*AGG. ASSAULT/ HOMICIDE CIRC.		*LEOKA INFORMATION		*VICTIM/SUSPECT RELATIONSHIP			*VICTIM/OFFENSE LINK			
			TYPE OF ACT.	ASSIGN. TYPE	ORI - OTHER	0. _____	1. _____	2. _____	3. _____	4. _____	5. _____
	My signature verifies that the information on this report is accurate and true										

DATE \_\_\_\_\_

WITNESS	NO.	NAME (Last, First, Middle)				AGE/ D.O.B.	95 YRS 10/14/1929	SSN	
	1	NOBLE, MARILYN M							
	ADDRESS (Street, Apt., City, State, Zip)								
	4272 CIDER MILL DR CINCINNATI, OH 45245								
	EMPLOYER NAME AND ADDRESS (Street, Apt., City, State, Zip)								
	STATEMENTS OBTAINED <input type="checkbox"/> Y <input checked="" type="checkbox"/> N TYPE: <input type="checkbox"/> WRITTEN <input type="checkbox"/> ORAL <input type="checkbox"/> TAPED <input type="checkbox"/> OTHER								
	NO.	NAME (Last, First, Middle)				AGE/ D.O.B.	SSN		
	ADDRESS (Street, Apt., City, State, Zip)								
	PHONE								
	EMPLOYER NAME AND ADDRESS (Street, Apt., City, State, Zip)								
PHONE									
STATEMENTS OBTAINED <input type="checkbox"/> Y <input type="checkbox"/> N TYPE: <input type="checkbox"/> WRITTEN <input type="checkbox"/> ORAL <input type="checkbox"/> TAPED <input type="checkbox"/> OTHER									

DATE \_\_\_\_\_

WITNESS	NO.	NAME (Last, First, Middle)				AGE/ D.O.B.	SSN		
	ADDRESS (Street, Apt., City, State, Zip)								
	PHONE								
	EMPLOYER NAME AND ADDRESS (Street, Apt., City, State, Zip)								
	PHONE								
	STATEMENTS OBTAINED <input type="checkbox"/> Y <input type="checkbox"/> N TYPE: <input type="checkbox"/> WRITTEN <input type="checkbox"/> ORAL <input type="checkbox"/> TAPED <input type="checkbox"/> OTHER								
	NO.	NAME (Last, First, Middle)				AGE/ D.O.B.	SSN		
	ADDRESS (Street, Apt., City, State, Zip)								
	PHONE								
	EMPLOYER NAME AND ADDRESS (Street, Apt., City, State, Zip)								
PHONE									
STATEMENTS OBTAINED <input type="checkbox"/> Y <input type="checkbox"/> N TYPE: <input type="checkbox"/> WRITTEN <input type="checkbox"/> ORAL <input type="checkbox"/> TAPED <input type="checkbox"/> OTHER									

DATE \_\_\_\_\_

WITNESS	NO.	NAME (Last, First, Middle)				AGE/ D.O.B.	SSN		
	ADDRESS (Street, Apt., City, State, Zip)								
	PHONE								
	EMPLOYER NAME AND ADDRESS (Street, Apt., City, State, Zip)								
	PHONE								
	STATEMENTS OBTAINED <input type="checkbox"/> Y <input type="checkbox"/> N TYPE: <input type="checkbox"/> WRITTEN <input type="checkbox"/> ORAL <input type="checkbox"/> TAPED <input type="checkbox"/> OTHER								
	NO.	NAME (Last, First, Middle)				AGE/ D.O.B.	SSN		
	ADDRESS (Street, Apt., City, State, Zip)								
	PHONE								
	EMPLOYER NAME AND ADDRESS (Street, Apt., City, State, Zip)								
PHONE									
STATEMENTS OBTAINED <input type="checkbox"/> Y <input type="checkbox"/> N TYPE: <input type="checkbox"/> WRITTEN <input type="checkbox"/> ORAL <input type="checkbox"/> TAPED <input type="checkbox"/> OTHER									

DATE \_\_\_\_\_

WITNESS	NO.	NAME (Last, First, Middle)				AGE/ D.O.B.	SSN		
	ADDRESS (Street, Apt., City, State, Zip)								
	PHONE								
	EMPLOYER NAME AND ADDRESS (Street, Apt., City, State, Zip)								
	PHONE								
	STATEMENTS OBTAINED <input type="checkbox"/> Y <input type="checkbox"/> N TYPE: <input type="checkbox"/> WRITTEN <input type="checkbox"/> ORAL <input type="checkbox"/> TAPED <input type="checkbox"/> OTHER								
	NO.	NAME (Last, First, Middle)				AGE/ D.O.B.	SSN		
	ADDRESS (Street, Apt., City, State, Zip)								
	PHONE								
	EMPLOYER NAME AND ADDRESS (Street, Apt., City, State, Zip)								
PHONE									
STATEMENTS OBTAINED <input type="checkbox"/> Y <input type="checkbox"/> N TYPE: <input type="checkbox"/> WRITTEN <input type="checkbox"/> ORAL <input type="checkbox"/> TAPED <input type="checkbox"/> OTHER									

DATE \_\_\_\_\_

WITNESS	REPORTING OFFICER <b>GOSINK, ANDREW</b>							BADGE NO.	DATE
	APPROVING OFFICER							40	07/31/2025
11/2005								BADGE NO.	DATE

<b>NARRATIVE SUPPLEMENT:</b>		INCIDENT NUMBER <b>1-25-011664</b>
VICTIM		INCIDENT DATE / TIME <b>7/31/2025 0155</b>
OFFENSE		NARRATIVE DATE / TIME <b>07/31/2025</b>
NARRATIVE TOPIC	OFFICER <b>E. MADISON (103)</b>	BADGE NO.

07/31/2025 01:56:05 - Case ID: [REDACTED]

07/31/2025 01:56:06 - 36 YO ML POSS C16

07/31/2025 01:56:20 - ML ON THE FLOOR LAST SEEN AROUND 2000

07/31/2025 01:56:46 - The patient is male

07/31/2025 01:56:46 - Age: 36

07/31/2025 01:56:47 - THE PATIENT IS NOT CONSCIOUS

07/31/2025 01:56:48 - THE PATIENT IS NOT BREATHING NORMALLY

07/31/2025 01:56:55 - CHIEF COMPLAINT CPR ADULT >8 YRS

07/31/2025 01:56:55 - New Card CPR Adult >8 yrs from EMD

07/31/2025 01:56:55 - CHIEF COMPLAINT CPR ADULT >8 YRS

07/31/2025 01:57:46 - ENTER VIA GARAGE DOOR

07/31/2025 01:58:02 - CHIEF COMPLAINT UNCONSCIOUS|UNRESP|SYNCOPE

07/31/2025 01:58:02 - New Card Unconscious|Unresp|Syncpe from EMD

07/31/2025 01:58:04 - PATIENT IS NOT BREATHING NORMALLY

07/31/2025 01:58:40 - FML UNABLE TO GET TO THE MALE TO ATTEMPT CPR

07/31/2025 01:58:47 - ADVISING SHE IS HANDICAP

07/31/2025 01:59:20 - ML IS KITCHEN NO BLOOD

07/31/2025 02:00:29 - 47 ADV POSS OVERDOSE

07/31/2025 02:00:42 - NOW ADV"ING HE IS AWAKE

07/31/2025 02:09:43 - 40 - Clear Time Check-4272 Cider Mill DR Cincinnati

07/31/2025 02:09:43 - 47 - Clear Time Check-4272 Cider Mill DR Cincinnati

07/31/2025 02:09:43 - 84 - Clear Time Check-4272 Cider Mill DR Cincinnati

07/31/2025 02:15:30 - M51 - Clear Time Check-4272 Cider Mill DR Cincinnati

<b>NARRATIVE SUPPLEMENT:</b>		INCIDENT NUMBER <b>1-25-011664</b>
VICTIM		INCIDENT DATE / TIME <b>7/31/2025 0155</b>
OFFENSE		NARRATIVE DATE / TIME <b>07/31/2025</b>
NARRATIVE TOPIC	OFFICER <b>A. GOSINK (99114)</b>	BADGE NO.

On July 31, 2025 at approximately 0155 hours, Officers were dispatched along with Union Township Fire Department to the single family residence at 4272 Cider Mill Drive for a man down. On arrival, Officer Moran advised that the condition was possibly an overdose. On my arrival, I confirmed that Officer Moran did not need any additional equipment from the cruisers prior to making entry.

The male, later identified as Thomas Noble was seated on the ground, nodding in and out and was slightly confrontational with law enforcement. Noble denied any drug use and stated that he believed he had a seizure. However to the paramedics when asked what he had taken he stated "come on man, I've been clean for 14 months and can't let her hear that." Union Township Fire Department did administer Naxolone to Noble prior to leaving the scene. Noble was unable to stay awake throughout the investigation however refused further on care.

I explained to Noble the purpose and intent of house bill 110 and what he needed to do to comply with the protection it provides. Information will be forwarded to the Clermont County Prosecutors Office, pending any charges.

<b>NARRATIVE SUPPLEMENT:</b>	INCIDENT NUMBER <b>1-25-011664</b>
VICTIM	INCIDENT DATE / TIME <b>7/31/2025 0155</b>
OFFENSE	NARRATIVE DATE / TIME <b>09/30/2025</b>
NARRATIVE TOPIC	OFFICER <b>A. GOSINK (99114)</b> BADGE NO.

No further action to be taken. HB110 was not followed up with and no additional evidence provided.

Please close.

# Union Township Police Dept.

## Incident Report

Detailed

INCD#: 1-25-017889

CFS#: 25-052402

60.1 - Field Contact

Printed On: 11/25/2025 11:37 AM



### Incident Location

Location Type: SINGLE FAMILY HOME  
District/Zone: Terrace, Cider Mill, Holiday, Long  
Beat/Area: North District  
Bus/Common:  
Address: 4272 Cider Mill DR  
Cincinnati, OH 45245

### Report Information

Date: 11/16/2025 At: 22:58:55  
Report Type: Incident Report

### Incident Date and Time

From: 11/16/2025 At: 22:58:55  
To: 11/16/2025 At: 22:58:55

### Incident Origin

How Received: Phone  
Received From: 22:58:55 Thru: 23:11:33 Elapsed Time: 13 minutes  
Entered By: FRIEDMAN, EVAN  
Entry Date: 11/17/2025 At: 00:01:39  
Dispatched Nature: Disturbance

### Incident Characteristics

Rpt. Officer: FRIEDMAN, EVAN  
Shift: Shift 2  
Lighting: Dark- Lighted  
Weather: No Adverse Weather  
Citations:

Weapons Involved  Cargo Theft Related

### Caller Information

Last Name: NOBLE  
First Name: THOMAS  
Middle Name:  
Address:  
Phone: 5135280094

### Approval Information

Officer: Date: At:

### Responders and Times

Responder ID	Dispatched	Enroute	At Scene	Cleared	Other	Total	Reporting Officer
14-FRIEDMAN, EVAN T	23:03:19	23:03:19	23:06:42	23:11:10		8	Yes
49-HALE, JAMES T	23:03:19	23:03:19		23:09:54		6	No

### Clearances

Date Time Type  
11/17/2025 046 Closed

### Exceptional Clearances

Date Type  
Disposition  
Field Contact

### Involved Parties

Person Type: FIELD INTERVIEW: 1  
Name: REMLEY, ASHLEIGH N  
Address: 4272 CIDER MILL DR CINCINNATI, OH 45245  
Driver Lic. No.: XXXXXXXXXX Expiration:  
State/Prov: Kentucky  
Phone: XXXXXXXXXX Sex Offender: No  
SSN/ID: XXXXXXXXXX

Person is a Complainant  Juvenile at time of incident  
Birth Date: 08/05/1989 Age: 36  
Hair Color: Eye Color:  
Height From: Height To:  
Weight From: 0 Weight To: 0

### University/College Use

Student  Faculty  Staff  Non-Affiliated

Place Of Birth:  
Resident Status: Resident  
Deceased Date:

### Injuries

<input type="checkbox"/> No Injury	<input type="checkbox"/> Apparent Broken Bones	<input type="checkbox"/> Possible Internal	<input type="checkbox"/> Severe Laceration	<input type="checkbox"/> Loss Of Teeth
<input type="checkbox"/> Unconsciousness	<input type="checkbox"/> Other Major Injury	<input type="checkbox"/> Apparent Minor Injury	<input type="checkbox"/> Fatal	<input type="checkbox"/> Unknown

# Union Township Police Dept.

## Incident Report

Detailed

INCD#: 1-25-017889

CFS#: 25-052402

60.1 - Field Contact

Printed On: 11/25/2025 11:37 AM



### Demographics

Sex: Female

Marital Status: N/A

Religion:

Gang:

Person Type: FIELD INTERVIEW: 2

Name: NOBLE, THOMAS MITCHELL

Address: 4212 CIDER MILL DR CINCINNATI, OH 45245

Driver Lic. No. [REDACTED] Expiration: 07/2027

State/Prov: Ohio

Phone: [REDACTED]

SSN/ID: [REDACTED] Sex Offender: No

University/College Use

Student  Faculty  Staff  Non-Affiliated

Race: White

Ethnicity: Non-Hispanic

Nationality:

Person is a Complainant  Juvenile at time of incident

Birth Date: 07/17/1988

Age: 37

Hair Color: BRO

Eye Color: BRO

Height From: 507

Height To: 507

Weight From: 124

Weight To: 124

Place Of Birth:

Resident Status: Resident

Deceased Date:

### Injuries

No Injury

Unconsciousness

Apparent Broken Bones

Other Major Injury

Possible Internal

Apparent Minor Injury

Severe Laceration

Fatal

Loss Of Teeth

Unknown

### Demographics

Sex: Male

Marital Status: Single

Religion:

Gang:

Race: White

Ethnicity: Non-Hispanic

Nationality:

Reporting Officer Signature: \_\_\_\_\_

Signed Date: \_\_\_\_\_

Approving Officer Signature: \_\_\_\_\_

Signed Date: \_\_\_\_\_

# Union Township Police Dept.

## Incident Report

Detailed

INCD#: 1-25-017889 CFS#: 25-052402

60.1 - Field Contact

Printed On: 11/25/2025 11:37 AM



### Narratives

Subject:

Type

Date Time Author

Approving Officer

Initial Narrative

11/16/2025 2258 FRIEDMAN, EVAN T

Listed male called stating listed female took his cell phone. Male located his phone, he was advised.

# Union Township Police Dept.

## Incident Report

Detailed

INCD#: 1-25-017889 CFS#: 25-052402

60.1 - Field Contact

Printed On: 11/25/2025 11:37 AM



### Narratives

#### Subject:

Type	Date	Time	Author	Approving Officer
CAD Transfer	11/16/2025	2300	BAILEY, KARA R	

11/16/2025 23:00:43 - COMPL ADV HIS GIRLFRIEND TOOK HIS PHONES

11/16/2025 23:01:03 - ADV THE FML IS GOA IN DK GRAY KIA FORTE

11/16/2025 23:01:27 - ASHLEIGHY REMLEY

11/16/2025 23:04:00 - ADV POSS TOOK HIS MEDS

11/16/2025 23:09:51 - 14 - Clear Time Check-4272 Cider Mill DR Cincinnati