

EXHIBIT 2

CR #	OFFICER VARIABLES			VICTIM/COMPLAINANT VARIABLES				COMPLAINT VARIABLES				Initial Complaint Category	Initial Complaint Title	Summary of Allegation in CR	Allegation Category	Allegations (=0)	Operationo/ Personnel Violation (=1)/All Other	Was Complaint Investigated (Yes/No)	Affidavit Obtained from Complain ant or Victim? (Yes/No)
	Accused Officer Name	Star/ Badge Number	Assignment (Unit of Accused Officer)	Complainant(s) Name(s)	Victim's Name	Victim Arrested (Yes/No)	Victim Injured (Yes/No)	Victim's Race	Bates Start Number	Bates End Number	Initial Complaint Category								
1022370	Unknown Officer	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	No	No	Black	CITY- WATTS CR- 060006	CITY- WATTS CR- 060007	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	1	No	No		

OFFICER IDENTIFICATION											EVIDENCE VARIABLES					
Date of Incident	Date CR Initiated	Date CR Completed (in summary report)	Investigation Length (DAYS)	Sustained (=0)/All others (=1)	Investigator-Recommended Disciplinary Action: If			Personnel/Employment Records Search Indicated	Incident Reports Search Indicated	Inventory/Vehicle Report Search Indicated	Beat/Unit/ Radio/ Dispatch/CAD Search Indicated	Photo Arrays/ Video Footage Offered				
					Initial Disposition Recommended by Investigator	of Disciplinary Action Imposed	Suspended, Then Number of Days Suspended									
12/08/2008	12/11/2008	2008	12/12/2008	1	0	None (not investigated)	Not Applicable (No Discipline Recommended)	Not Applicable	External	No	Not Applicable	No	No			

Complainant Contacted		Statement Taken From Complainant	In-Person Interview with Complainant	Any Victim Contacted	Statement Taken from Any Victim	In-Person Interview with Any Victim	Any Witness Contacted	Statement Taken From Any Witness	In-Person Interview with Any Witness	Any Victim Described	Did Any Victim Request Medical Attention	Medical Treatment Received by Any Victim	Photos of Any Victim Taken by CPD	Any Accused Officer Identified by Any Victim	Any Accused Officer Identified by Any Witness	Any Accused Officer Statement Taken	Any Non-Accused Officer Statement Taken	Any Officer Submit Administrative Report	Arrest Report for Any Victim/Complainant
No	Not Applicable	Not Applicable	No	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	No	No	Not Applicable	No	No	Not Applicable		

				Superintendent Discipline Imposed (if applicable)					Discipline Imposed by Arbitrator (if applicable)			Discipline Imposed by Police Board (if applicable)										
Arrest Photos of Any Victim/ Complainant	Scene Canvass	Cameras Located at Scene	Photos of Scene Obtained	Radio Communication Tapes Preserved	District Phone Tapes Preserved	Any Officer Referred to Cook County Prosecut or's Office	Investigator's Name	Street Address Where Incident Occurred	After Recommended Disposition, Highest Level of Review Before Superintendent	Type of Disiplinary Action Imposed by Superintendent Recommended by Superintendent	If Suspended, Then Number of Days Suspended by Superintendent	Disposition Recommended by Superintendent	Type of Disiplinary Action Imposed by Arbitrator Recommended by Arbitrator	If Suspended, Then Number of Days Suspended by Arbitrator	Type of Disiplinary Action Imposed by Police Board Recommended by Police Board	If Suspended, Then Number of Days Suspended by Police Board						
Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Yolanda Toppins	3510 South Michigan Avenue, Chicago, IL 60653	Not Applicable	Not Applicable	Not Applicable (No Discipline Recommended)	Not Applicable	Not Applicable (No Discipline Recommended)	Not Applicable	Not Applicable (No Discipline Recommended)	Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable		