

POLICE REPORT
SYLVANIA TOWNSHIP
POLICE DEPARTMENT

No Crime Crime Supplement

VICTIM ROEBKE, ALLISON E	RB # 000985-18
Location of Occurrence 8645 STONE POST RD, SYLVANIA, OH 43560	CAD # STP18006371
Location Type HOME, SINGLE FAMILY	Supplement Date and Time

Offense Description GENERAL INFORMATION/ NON-OFFENSE INCIDENT	Violation MIS MIS	A/C C	F/M & Degree UC	Occurred Date and Time 06/16/2018 10:46 - 06/16/2018 10:46
Hate Bias Type NOT	Premise/Structure	Criminal Activity	Using <input type="checkbox"/> Alcohol <input type="checkbox"/> Comp Equip	Reported Date and Time 06/16/2018 11:19
Method of Entry <input type="checkbox"/> Force <input type="checkbox"/> No Force	Method of Entry Vehicle	Larceny Type	<input type="checkbox"/> Drugs <input type="checkbox"/> Not App	Beat ST1
Method of Entry Burg / B&E	Burg Point of Entry	Burg Point of Exit	# Prem. Entered	
Additional MO Details		If D.V., Child Present <input type="checkbox"/> Y <input type="checkbox"/> N	# Children Present	Type Weapon Used By

OFFENSES	Offense Description 1. GENERAL INFORMATION/ NON-OFFENSE INCIDENT	Violation	A/C C	F/M & Degree UC

VICTIM	Vict # 1	#Victims Total 1	Victim Type <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Financial Institution <input type="checkbox"/> Police Officer (in the line of duty) <input type="checkbox"/> Society <input type="checkbox"/> Other <input type="checkbox"/> Student <input type="checkbox"/> Faculty <input type="checkbox"/> Business <input type="checkbox"/> Government <input type="checkbox"/> Religious Organization <input type="checkbox"/> Unknown <input type="checkbox"/> Staff <input type="checkbox"/> Other Person
	Name (Last, First, Middle) ROEBKE, ALLISON E		
	Alias		
	Address (Street, Apt., City, State, Zip) 8645 STONE POST RD, SYLVANIA, OH 43560		
	Place of Birth UNKNOWN / UNKNOWN POB		Resident Status NOT REPORTED
	*Age 35	*DOB 12/04/1982	*Race White
	*Sex Female	Hgt 509	Wgt 170
	*Hair Black		
*Eyes Gray			
Describe Injury			
Statements Obtained <input checked="" type="checkbox"/> Y <input type="checkbox"/> N			
Type: <input type="checkbox"/> Written <input checked="" type="checkbox"/> Oral <input type="checkbox"/> Taped <input type="checkbox"/> Other			
Gang Affiliation			
Victim is also Witness <input type="checkbox"/> PRO <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Suspect <input checked="" type="checkbox"/>			
Victim/Suspect Relationship			
Offense/Victim Link			
Assault Homicide Circumstance			

SUSPECT	Susp # 2	Juvenile <input type="checkbox"/>	Check Appropriate Category <input type="checkbox"/> Runaway <input type="checkbox"/> Missing <input type="checkbox"/> Other	<input type="checkbox"/> Student <input type="checkbox"/> Faculty <input type="checkbox"/> Warrant Issued	Charges Filed?
	Name (Last, First, Middle) ROEBKE, PAUL R				
	Alias				
	Address (Street, Apt., City, State, Zip) 8645 STONE POST RD, SYLVANIA, OH 43560				
	Place of Birth		*Resident Status NOT REPORTED	Driver's License & State	Marital Status
	*Age 70	*DOB 11/08/1947	*Race White	*Sex Male	*Hgt
	*Wgt	*Hair	*Eyes	Potential Injuries?	
	Statements Obtained <input checked="" type="checkbox"/> Y <input type="checkbox"/> N				
Type: <input type="checkbox"/> Written <input checked="" type="checkbox"/> Oral <input type="checkbox"/> Taped <input type="checkbox"/> Other					
Gang Affiliation					
Suspected of Using <input type="checkbox"/> Alcohol <input type="checkbox"/> Drugs					
Armed With					
Arrest Type 1. <input type="checkbox"/> Complaint 2. <input type="checkbox"/> On View 3. <input type="checkbox"/> Warrant 4. <input type="checkbox"/> Summons 5. <input type="checkbox"/> Protection Order 6. <input type="checkbox"/> Other					

NARRATIVE

The PRO/victim/suspect Allison Roebke states that she and her father Paul Roebke had been arguing and he wouldn't leave her alone. She stated she has several medical issues that she is dealing with and wanted to leave to cool down.

Mr. Roebke stated he has become frustrated with his daughter because of her arguing. He stated she is on several different medications for her health and believes they need to be regulated.

Ms. Roebke stated she had just seen her doctor and the medication is fine.

Report Made By: 424 KISH, R	Officer(s) Name(s) I.D.# Unit No./Section	Officer Assigned to Case	Supervisor's Approval 486 BOTTLES, B
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DISPOSITION R 06/16/2018	A Death of Offender G Cleared by Arrest - Juv R Report Written	B Prosecution Declined H Warrant Issued S Summons Sent	C Extradition Denied I Investigation Pending	D Victim Refuses to Cooperate J Inactive	E Juvenile/No Custody K Unfounded	F Cleared by Arrest - Adult U Unknown
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VICTIM ROEBKE, ALLISON E	RB # 000985-18
	CAD # STP18006371

After speaking with all parties involved, it was agreed upon that Allison would leave for a couple hours so all parties involved could cool down.

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VICTIM ROEBKE, PAUL R	RB # 001858-18
Location of Occurrence 8645 STONE POST RD, SYLVANIA, OH 43560	CAD # STP18012257
Location Type HOME, SINGLE FAMILY	Supplement Date and Time

Offense Description DISPUTE: DOMESTIC	Violation MIS 40207A	A/C C	F/M & Degree UC	Occurred Date and Time 10/31/2018 15:27 - 10/31/2018 15:27
				Reported Date and Time 10/31/2018 22:43
				Beat ST1
Hate Bias Type NOT	Premise/Structure	Criminal Activity	Using <input type="checkbox"/> Alcohol <input type="checkbox"/> Drugs	<input type="checkbox"/> Comp Equip <input type="checkbox"/> Not App
Method of Entry <input type="checkbox"/> Force <input type="checkbox"/> No Force	Method of Entry Vehicle	Larceny Type		
Method of Entry Burg / B&E	Burg Point of Entry	Burg Point of Exit		
Additional MO Details	# Prem. Entered	If D.V., Child Present <input type="checkbox"/> Y <input type="checkbox"/> N	# Children Present	Type Weapon Used By

OFFENSES	Offense Description 1. DISPUTE: DOMESTIC	Violation	A/C C	F/M & Degree UC

Vict # 1	#Victims Total 1	Victim Type <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Financial Institution <input type="checkbox"/> Police Officer (in the line of duty) <input type="checkbox"/> Society <input type="checkbox"/> Other <input type="checkbox"/> Student <input type="checkbox"/> Faculty <input type="checkbox"/> Business <input type="checkbox"/> Government <input type="checkbox"/> Religious Organization <input type="checkbox"/> Unknown <input type="checkbox"/> Staff <input type="checkbox"/> Other Person
Name (Last, First, Middle) ROEBKE, PAUL R		
Address (Street, Apt., City, State, Zip) 8645 STONE POST RD, SYLVANIA, OH 43560		
Place of Birth	Resident Status NOT REPORTED	Marital Status
*Age 70	*DOB 11/08/1947	*Race White
*Sex Male	Hgt 603	Wgt 220
	Hair Gray	Eyes Blue
Describe Injury		
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		
Gang Affiliation		
Victim is also Witness <input type="checkbox"/> PRO <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Suspect <input type="checkbox"/>		
Victim/Suspect Relationship		
Offense/Victim Link		
Assault Homicide Circumstance		

Susp # 1	Juvenile <input type="checkbox"/>	Check Appropriate Category <input type="checkbox"/> Runaway <input type="checkbox"/> Missing <input type="checkbox"/> Other _____	<input type="checkbox"/> Student <input type="checkbox"/> Faculty <input type="checkbox"/> Warrant Issued	Charges Filed?
Name (Last, First, Middle) ROEBKE, ALLISON E			Phone	
Alias			FBI	BCI
Address (Street, Apt., City, State, Zip) 8645 STONE POST RD, SYLVANIA, OH 43560			Alt. Phone	
Place of Birth UNKNOWN / UNKNOWN POB	Resident Status NOT REPORTED	Driver's License & State	Marital Status	
*Age 35	*DOB 12/04/1982	*Race White	*Sex Female	*Hgt 509
		*Wgt 170	*Hair Black	*Eyes Gray
Potential Injuries?				
Gang Affiliation				
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				
Suspected of Using <input type="checkbox"/> Alcohol <input type="checkbox"/> Drugs		Armed With	Arrest 1. <input type="checkbox"/> Complaint 3. <input type="checkbox"/> Warrant 5. <input type="checkbox"/> Protection Order Type 2. <input type="checkbox"/> On View 4. <input type="checkbox"/> Summons 6. <input type="checkbox"/> Other	

NARRATIVE

On 10/31/2018 15:27 we responded to a possible overdose at 8645 Stone Post RD Sylvania OH 43560. Upon arrival it was determined that this was domestic dispute and not an overdose. After speaking to the R/P Victim1: Paul R Roebke, he stated that his daughter was arguing with him over the phone as she was waiting for her doctor to call. Suspect1: Allison E Roebke has suffered from mental health issues and appeared to be having an episode tonight. No violence occurred however this report is being made to document the dispute between the father and daughter. Daughter was offered money to go to a hotel by her parents but she refused. No further action is required at this time.

Report Made By: 441 CHAREST, P 441 2ND	Officer(s) Name(s) I.D.# Unit No./Section	Officer Assigned to Case	Supervisor's Approval 480 JANKOWSKI, D
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DISPOSITION R 10/31/2018	A Death of Offender G Cleared by Arrest - Juv R Report Written	B Prosecution Declined H Warrant Issued S Summons Sent	C Extradition Denied I Investigation Pending	D Victim Refuses to Cooperate J Inactive	E Juvenile/No Custody K Unfounded	F Cleared by Arrest - Adult U Unknown
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POLICE REPORT
SYLVANIA TOWNSHIP
POLICE DEPARTMENT

No Crime Crime Supplement

VICTIM ROEBKE, PAUL R	RB # 001697-19
Location of Occurrence 8645 STONE POST RD, SYLVANIA, OH 43560	CAD # STP19011445
Location Type HOME, SINGLE FAMILY	Supplement Date and Time

Offense Description DOMESTIC VIOLENCE	Violation ORC 2919.25A	A/C C	F/M & Degree M1	Occurred Date and Time 09/14/2019 13:00 - 09/14/2019 13:20
Hate Bias Type NOT	Premise/Structure RESIDENTIAL (SINGLE)	Criminal Activity	Using <input type="checkbox"/> Alcohol <input type="checkbox"/> Drugs	Reported Date and Time 09/14/2019 13:20
Method of Entry <input type="checkbox"/> Force <input type="checkbox"/> No Force	Method of Entry Vehicle	Larceny Type	<input type="checkbox"/> Comp Equip <input type="checkbox"/> Not App	Beat ST1
Method of Entry Burg / B&E	Burg Point of Entry	Burg Point of Exit	TWN	
Additional MO Details	# Prem. Entered	If D.V., Child Present <input type="checkbox"/> Y <input type="checkbox"/> N	# Children Present	Type Weapon Used By HANDS AND OR FEET

Offense Description 1. DOMESTIC VIOLENCE KNOWINGLY CAUSE OR ATTEMPT TO CAUSE PHYSICAL HARM TO FAMILY OR HOUSEHOLD MEMBER	Violation 2919.25A ORC	A/C C	F/M & Degree M1
Method of Entry Burg / B&E Burglary Entry Point Floor Location	Burglary Exit Point Floor Location	Criminal Activity	
Method of Entry <input type="checkbox"/> Force <input type="checkbox"/> No Force	Method of Entry Vehicle	Larceny Type	
Hate Bias Type Not Reported	Premise/Structure Residential (Single)	Criminal Activity	
Additional MO Details	Prem. Entered	If D.V., Child Present <input type="checkbox"/> Y <input type="checkbox"/> N	# Children Present
Weapon Used HANDS AND OR FEET			
Circumstances ARGUMENT			

Vict # 1	#Victims Total 1	Victim Type <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Financial Institution <input type="checkbox"/> Police Officer (in the line of duty) <input type="checkbox"/> Society <input type="checkbox"/> Other <input type="checkbox"/> Student <input type="checkbox"/> Faculty	<input type="checkbox"/> Business <input type="checkbox"/> Government <input type="checkbox"/> Religious Organization <input type="checkbox"/> Unknown <input type="checkbox"/> Staff <input type="checkbox"/> Other Person
Name (Last, First, Middle) ROEBKE, PAUL R			Phone
Address (Street, Apt., City, State, Zip) 8645 STONE POST RD, SYLVANIA, OH 43560			Alt. Phone
Place of Birth	Resident Status RESIDENT	Driver's License State	Marital Status Married
*Age 71	*DOB 11/08/1947	*Race White	*Sex Male
Hgt 603	Wgt 220	Hair Gray	Eyes Blue
Statements Obtained <input checked="" type="checkbox"/> Y <input type="checkbox"/> N		Type: <input type="checkbox"/> Written <input checked="" type="checkbox"/> Oral <input type="checkbox"/> Taped <input type="checkbox"/> Other	
Victim is also Witness <input type="checkbox"/> PRO <input type="checkbox"/> Owner <input type="checkbox"/> Suspect <input type="checkbox"/>		Victim/Suspect Relationship Parent/Guardian	Offense/Victim Link 1
Assault Homicide Circumstance		Charges Filed?	

Susp # 1	Juvenile <input type="checkbox"/>	Check Appropriate Category <input type="checkbox"/> Runaway <input type="checkbox"/> Missing <input type="checkbox"/> Other	<input type="checkbox"/> Student <input type="checkbox"/> Faculty <input type="checkbox"/> Warrant Issued	<input type="checkbox"/> Staff <input type="checkbox"/> Other Person
Name (Last, First, Middle) ROEBKE, ALLISON E			Phone (419) 351-6616 (C)	
Alias			FBI	BCI
Address (Street, Apt., City, State, Zip) 8645 STONE POST RD, SYLVANIA, OH 43560			Alt. Phone (419) 885-2017 (H)	
Place of Birth	Resident Status RESIDENT	Driver's License State	Marital Status Single	
*Age 36	*DOB 12/04/1982	*Race White	*Sex Female	*Hgt 509
*Wgt 170	*Hair Black	*Eyes Gray		
Statements Obtained <input checked="" type="checkbox"/> Y <input type="checkbox"/> N		Type: <input type="checkbox"/> Written <input checked="" type="checkbox"/> Oral <input type="checkbox"/> Taped <input type="checkbox"/> Other		
Suspected of Using <input type="checkbox"/> Alcohol <input type="checkbox"/> Drugs		Armed With	Arrest Type 1. <input type="checkbox"/> Complaint 3. <input type="checkbox"/> Warrant 5. <input type="checkbox"/> Protection Order 2. <input type="checkbox"/> On View 4. <input type="checkbox"/> Summons 6. <input type="checkbox"/> Other	

NARRATIVE
On the listed date and time, I responded to the listed location regarding a report of domestic violence. Upon my arrival, I spoke with the listed victim inside the listed location, while Officer Smith and Officer Deutschman spoke with the listed suspect outside the home. The victim stated that he and his wife, Elaine Roebke, just returned

Report Made By: 411 CASE, J	Officer(s) Name(s) I.D.# Unit No./Section	Officer Assigned to Case	Supervisor's Approval 482 GERMANI, S
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DISPOSITION R 09/14/2019	A Death of Offender G Cleared by Arrest - Juv R Report Written	B Prosecution Declined H Warrant Issued S Summons Sent	C Extradition Denied I Investigation Pending	D Victim Refuses to Cooperate J Inactive	E Juvenile/No Custody K Unfounded	F Cleared by Arrest - Adult U Unknown
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VICTIM ROEBKE, PAUL R	RB # 001697-19
	CAD # STP19011445

home from a trip today. He said that when they got home, their daughter (listed suspect) had moved her bed from her upstairs bedroom into the den on the first floor. The victim advised his daughter has a mental illness that makes he feel that everything is infested with bugs. He said she moved her bed downstairs because she thought her room contained bed bugs. The victim stated his daughter is constantly cleaning, throwing away food, and spraying his home with bug killer. According to the victim, when he came home today his daughter was throwing away perfectly good food and condiments because she felt they were contaminated with bugs. When he asked her to stop, she became upset and punched him on the left side of the face. The victim said they continued to argue as he walked upstairs to get the STPD phone number he had wrote down on a piece of paper. The suspect followed him up the stairs and when she noticed the STPD phone number in his hand, she grabbed for it and grabbed the victims' hand. The victim stated his daughter bent his fingers back trying to get the paper out of his hand. The victim said his tapped his daughter on the top of her head with his hand in order to get her off of him and to release her grip on his other hand. After the suspect released her grip, they separated and the suspect contacted the police. The suspect stated that she spent the last three days cleaning the home trying to get rid of all of the bugs that were present. She said she got into an argument with her father because he did not want her throwing away food that was expired. The suspect advised her father struck her on top of the head but never struck him at any time. She said she contacted the health department regarding the bug infestation and the uncleanliness of the home. The victim did not have any scrapes or marks on his face and did not want to pursue domestic violence charges against his daughter. The suspect also did not have any marks or scrapes on her head and just wanted to leave the home for the night. While speaking to the victim, I was able to look around his home and did not notice any evidence of a bug infestation. The home was clean, uncluttered, and well kept. The only clutter in the home was in the kitchen and on the dining room table. This consisted of the items that belonged to the suspect and the items she had removed from the kitchen and set out to be cleaned or thrown away. There was also a large spray can of bug killer in the dining room that the suspect had used recently. The victim agreed to let the suspect take his car so that she could go stay with a friend for the night. Due to the victim not wanting to pursue charges and the lack of physical evidence no arrests were made.

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VICTIM	RB # 000194-20
Location of Occurrence 8645 STONE POST RD, SYLVANIA, OH 43560	CAD # STP20001093
Location Type HOME, SINGLE FAMILY	Supplement Date and Time

Offense Description DISPUTE: DOMESTIC	Violation MIS 40207A	A/C C	F/M & Degree UC	Occurred Date and Time 01/25/2020 11:30 - 01/25/2020 12:00
				Reported Date and Time 01/25/2020 11:30
				Beat ST1
				TWN
Hate Bias Type NOT	Premise/Structure	Criminal Activity	Using <input type="checkbox"/> Alcohol <input type="checkbox"/> Drugs	<input type="checkbox"/> Comp Equip <input type="checkbox"/> Not App
Method of Entry <input type="checkbox"/> Force <input type="checkbox"/> No Force	Method of Entry Vehicle	Larceny Type		
Method of Entry Burg / B&E	Burg Point of Entry	Burg Point of Exit		
Additional MO Details		# Prem. Entered	If D.V., Child Present <input type="checkbox"/> Y <input type="checkbox"/> N	# Children Present
Type Weapon Used By				

OFFENSES	Offense Description 1. DISPUTE: DOMESTIC	Violation	A/C C	F/M & Degree UC

REPORTEE	No. 1	Name (Last, First, Middle) ROEBKE, PAUL	Age / D.O.B. 72 11/08/1947	SSN
	Address 8645 STONE POST RD, SYLVANIA, OH 43560			Phone (419) 885-2017 (H)
	Employer Name, Address (Street, Apt., City, State, Zip) and Phone			Driver's License & State RT348497, OH
	Statements Obtained <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Type: <input type="checkbox"/> Written <input checked="" type="checkbox"/> Oral <input type="checkbox"/> Taped <input type="checkbox"/> Other	<input type="checkbox"/> Student <input type="checkbox"/> Faculty <input type="checkbox"/> Staff <input type="checkbox"/> Other Person	

OTHER	Contact <input type="checkbox"/>	Parent <input type="checkbox"/>	Owner <input type="checkbox"/>	Driver <input type="checkbox"/>	Subject of Interest <input type="checkbox"/>	<input type="checkbox"/> Student <input type="checkbox"/> Faculty <input type="checkbox"/> Staff <input type="checkbox"/> Other Person
	No. 1	Name (Last, First, Middle) ROEBKE, EVELYN E	Age / D.O.B. 70 02/26/1949	SSN		
	Address 8645 STONE POST RD, SYLVANIA, OH 43560			Phone (419) 885-2017 (H)		

OTHER	Contact <input type="checkbox"/>	Parent <input type="checkbox"/>	Owner <input type="checkbox"/>	Driver <input type="checkbox"/>	Subject of Interest <input type="checkbox"/>	<input type="checkbox"/> Student <input type="checkbox"/> Faculty <input type="checkbox"/> Staff <input type="checkbox"/> Other Person
	No. 2	Name (Last, First, Middle) ROEBKE, ALLISON E	Age / D.O.B. 37 12/14/1982	SSN		
	Address 8645 STONE POST RD, SYLVANIA, OH 43560			Phone (419) 351-6616 (C)		

NARRATIVE	On listed date and time this officer and Sgt. McKinney responded to 8645 Stone Post Rd. on a Domestic Dispute. Upon arrival I spoke with Person 3 Allison Roebke and Sgt. McKinney spoke with Person 1 Paul Roebke (father) and Person 2 Evelyn Roebke (mother).
	All parties had previously been arguing about Allison's health and returning a rental vehicle. After speaking with all parties we were able to de-escalate the parties involved.
	Mr. Roebke had stated he had been having chest pains, a squad was called. Mr. Roebke was evaluated by STFD he was not transported but advised to follow up with his doctor.
	STFD spoke to Allison and advised her to follow up with her physician about her current situation.
	Allison and her mother Evelyn agreed to return the rental vehicle.
	All parties had calmed down when we left the residence.
	Allison stated she is currently living on her own and does not feel safe where she is living.
	She was going to talk to her parents about moving back home.

Report Made By: 424 KISH, R	Officer(s) Name(s) I.D.# Unit No./Section	Officer Assigned to Case	Supervisor's Approval 485 MCKINNEY, L
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DISPOSITION R 01/25/2020	A Death of Offender G Cleared by Arrest - Juv R Report Written	B Prosecution Declined H Warrant Issued S Summons Sent	C Extradition Denied I Investigation Pending	D Victim Refuses to Cooperate J Inactive	E Juvenile/No Custody K Unfounded	F Cleared by Arrest - Adult U Unknown
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