



Pennsylvania Law Enforcement Crash - Public Information Release Report

| | | المعاقبة | Crasn - | Public in | iormation | Kele | ease Rep | οπ | | | | |
|--------------------|---------------------------------------|-------------------|--------------------------|------------------------|-------------|---------|--------------------|-------------|----------------|-------------|-----------|----------|
| Crasi | n Involves: | | | | | | | | | | | |
| | () DUI | ○ Fatality | Оня | and Run | () Commerc | ial Veh | icle / | C PSP Vehic | e/Non-Motorist | (Local Pol | ica Vahir | n a |
| | ① Other | | пе {}АТ | | Snowmot | | • | ~ | vealth Vehicle | O Local Go | | |
| | | - | - | | | | | - | | | | • |
| Agen | cy Information | on: | | | | | | | | | | |
| GENCY | TE POLICE - STO | UNCTON | | | | | INVESTIGA | | | | • | |
| PASIA | VIE POLICE - STO | VINGTON | | | | | KELLEY | , JASON | | | | |
| Sumr | nary Informa | tion: | | | | | | | | | | |
| AD/CASE | NUMBER | | CRASH D | ATE | | | | CRASH TIME | | | | |
| PA 2025 | -1201364 | | 09/27/2 | 025 | | | | 15:27 hrs. | | | | |
| COUNTY | · · · · · · · · · · · · · · · · · · · | | | | PALITY | | | | | | | |
| | JMBERLAND | | | ROCK | EFELLER TW | /P | | | | | | |
| OUTE# | SEGMENT # | STREET PLUM CREEK | | | | | TREET ENDI ROAD | NG | | | | |
| OCATION | | | *** | | | | | | | | | |
| N PLUN | CREEK RD 214 F | EET EAST OF | AIRPORT RD | | | | | | | | | |
| Peop | le Involved: | | | | | | | | | | | |
| NIT# | PERSON FIRST NAME | | | | | МІ | LAST NAM | 1E | | SUFFIX | AGE | Gender |
| 001 DRIVER | | | | | | | | | | | 17 | M |
| ITY FREEBU | RG | STAT PA | | EQUIPMENT D SHOULDE | R BELT USED |) | • | | NON-MOTORIST | SAFETY EQU | JIPMENT | - |
| MS TRAN NOT TRA | SPORT ANSPORTED | | RY SEVERITY T INJURED | | | | | | | | | |
| MS AGEN | CY | | | | MEDICAL FA | CILITY | | | | | | |
| MERIC | JS COMM AMBULA | ANCE SVC | | | NONE | | | | | | | |
| NIT# | PERSON | | FIRST NAME | • | | Luc | TI ACT NAME | | | 10 | 1 | т |
| 002 | DRIVER | | DENISE | - | | MI A | LAST NAM | IE | | SUFFIX | AGE 58 | Gender |
| ITY | | STAT | | QUIPMENT | | | | | NON-MOTORIST | SAFETY FOL | <u> </u> | <u> </u> |
| MIFFLIN | BURG | PA | LAP AN | SHOULDE | R BELT USED |) | | | | | | |
| MS TRAN | | INJUI | RY SEVERITY | | | | | | ! | | | |
| NOT TRA | ANSPORTED | NO. | T INJURED | | | | | | | | | |
| MS AGEN | | | | | MEDICAL FA | CILITY | | | | | | |
| WERICL | JS COMM AMBULA | NCE SVC | | | NONE | | - | | | | | |
| Vehic l | les Involved: | | | | | | | | | | | |
| VIT# | YEAR | VEHICLE MAKE | | | | | | MODEL | | | | |
| 01 | 2004 | HYUNDAI | | | | | | ACCENT | | | | |
| RIVER CH | ARGED? | PRIMARY VIOL | | | | | | | | | | |
| | | 3361 DRIVING | S AT SAFE SPE | ED | | , , | | | | | | |
| VIT# | YEAR | VEHICLE MAKE | | | | | | MODEL | | | | |
| 102 | 2008 | VOLVO | | | | | | XC70 | | | | |

Crash Synopsis:

PRIMARY VIOLATION

DRIVER CHARGED?



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| | | _ | _ | | _ | |
|--------|-----|------|--------|---|-------|---|
| \sim | | _ 1_ | 3 | | lves | - |
| | | c n | 1 F) \ | " | 11/00 | - |
| - | ıa. | 311 | | • | V C 3 | |

| Othe | Fatality Work Zone | Ocommercial Vehicle Snowmobile | O PSP Vehicle/Non-Motorist Ocommonwealth Vehicle | ~ | |
|------|---------------------|--------------------------------|--|---|--|
| | | | y, on Plum Creek Rd. U recognize a vehicle on | | |

causing Unit 1 to hit Unit 2 from behind. Unit 1 sustained disabling damage, Unit 2 was driven from the scene.

| STONINGTON PATROL UNIT | | CAD/CASE NO PA 2025-1075025 |
|--|--------------------|--------------------------------|
| INVESTIGATING OFFICER THOMPSON,L,13947 (755255) | DATE/TIME OF INCID | 08-30-2025 1501 |
| DUI ON VIEW ALCOHOL | | |
| ASH ST | | |
| MUNICIPALITY(COUNTY) KULPMONT BORO (NORTHUMBERLAND) | | |

PERSON(S) INVOLVED (Age based off incident occurrence date):

ARRESTEE: James KOFSKIE, 32, M, MARION HEIGHT, PA

VEHICLES:

INVOLVED: 2020 DARK GREEN TOYOTA TACOMA

INCIDENT DETAILS:

On the above date and time PSP Stonington responded to the above location to check the welfare of a vehicle operator. The Operator was determined to be driving under the influence of alcohol. Charges are pending.

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| | J. S. S. | 1000 | | | | | | • | | | | | | |
|-------------------|--|-----------------|----------|---------------------|------------------------|----------------|--------|----------------------|-------------------|----------------|---------|---------------|------------------|---|
| Crash | Involves: | | | | | | | | | | | | | |
| | O DUI | () Fatal | ity | Hit and Run | (| Commerci | al Veh | cle | PSP Vehicl | e/Non-Motorist | () Lo | ocal Polic | ce Vehic | le |
| | Other | () Worl | k Zone | O ATV | (| Snowmob | ile | • | Commonv | vealth Vehicle | () t | ocal Gov | / Vehicle | |
| Agenc | y Informati | on: | | | | | | | | | | | | |
| AGENCY PA STAT | E POLICE - STO | NINGTON | | | | | | INVESTIGA BIRDSA | ATOR LL, TYLER | | | | | |
| Summ | ary Inform | ation: | | | | | | , | | | | | | *************************************** |
| CAD/CASE 1 | VIIMRER | | | CRASH DATE | | | | | CRASH TIME | | | | | |
| PA 2025- | | | | 09/21/2025 | | | | | 18:02 hrs. | | | | | |
| COUNTY NORTHUI | MBERLAND | | | 1 | ICIPAI C KSC | LITY ON TWP | | | | | | | | |
| ROUTE # 0225 | SEGMENT # 0225 | STREET STATE RO | UTE | | | | | TREET END HIGHWAY | ING | | | | | |
| LOCATION ON STATE | LOCATION ON STATE ROUTE 225 AT ITS INTERSECTION WITH HOOFLANDER RD | | | | | | | | | | | | | |
| People | e Involved: | | | | | | | | | | | | | |
| UNIT# | PERSON | | F | IRST NAME | | | МІ | LAST NA | ME | | 8 | SUFFIX | AGE | Gender |
| 001 | DRIVER | | | TYLER | | | s | HOLT | | | | | 22 | М |
| CITY HERNDO | N | | PA | SAFETY EQUIPMENT | | BELT USED |) | | | NON-MOTORIS | ST SAFE | ETY EQU | IIPMENT | ' |
| EMS TRANS | | ļ, | | SEVERITY | | | | | | | | | | |
| | NSPORTED | | NOTIN | IJURED | | | | | | | | | | |
| EMS AGENO | CY | | | | | MEDICAL FA | CILITY | | | | | | | |
| | | | | | | • | | | | | | | [| 1- |
| 002 | PERSON DRIVER | | [| FIRST NAME JAMES | | | MI | LAST NAM | ME IDERFER | | | SUFFIX III | AGE 53 | Gender M |
| CITY SUNBUR | Y | | PA | SAFETY EQUIPMENT | | BELT USED |) | | | NON-MOTORIS | ST SAFE | TY EQU | IPMENT | • |
| EMS TRANS | PORT NSPORTED | 1 | | SEVERITY JURED | | | | | | 1 | | | | |
| EMS AGENC | Y | I | | | | MEDICAL FA | CILITY | | | | | | | |
| | | | | | | | | | • | | | | | |
| | PERSON | | F | FIRST NAME | | | МІ | LAST NAM | ME | | 1 | | AGE | Gender |
| 002 | PASSENGER | | | ANTHONY | | | L | JULIO | | | | <u> </u> | 53 | M |
| CITY DORNSIF | E | (| PA | SAFETY EQUIPMENT | | BELT USED |) | | | NON-MOTORIS | ST SAFE | TY EQU | IPMENT | |
| EMS TRANS | PORT NSPORTED | I | | SEVERITY JURED | | | | | | | | | | |

Vehicles Involved:

EMS AGENCY

MEDICAL FACILITY
NONE



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| O | _ !_ | I | 1 | | _ |
|-----|------|-----|-----|----|---|
| Cra | sn | HΠ\ | /OI | ve | S |

| | Other | ○ Fatality ○ Work Zone | | Commercial Vehicle Snowmobile | O PSP Vehicle/Non-Motorist Commonwealth Vehicle | C Local Police Vehicle C Local Gov Vehicle |
|----------|------------------|------------------------|----|-------------------------------|---|--|
| UNIT # | YEAR 2007 | VEHICLE MAKE JEEP | | | MODEL WRANGLER | |
| DRIVER (| CHARGED? | PRIMARY VIOLATIO | | EQUIRED SIGNALS - GENERAL F | RULE | |
| UNIT # | YEAR 2013 | VEHICLE MAKE RAM | | | MODEL 1500 | |
| DRIVER (| CHARGED? | PRIMARY VIOLATION | ON | | | |

Crash Synopsis:

This crash occurred on SR225 Jackson Township, Northumberland County. As Unit 1 was attempting to make a left hand turn from Hooflander Rd onto SR225, Unit 1 failed to safely negotiate the turn, hitting Unit 2. Unit 1 was traveling approximately 5mph during the time of the crash. Unit 1 sustained disabling damage during the time of the crash. Operator 1 was wearing his seat belt and reported no injuries on scene. Unit 2 was traveling approximately 45mph during the time of the crash. Unit 2 sustained disabling damage during the time of the crash. Operator 2 and Passenger 1 were both wearing their seat belts and reported no injuries on scene.

| STONINGTON PATROL UNIT | | PA 2025-1172866 |
|---|---------------------|------------------------|
| INVESTIGATING OFFICER WINNER, J, 14153 (762675) | DATE/TIME OF INCIDE | ент 09-20-2025 1808 |
| NATURE OF INCIDENT THEFT OF MOTOR VEHICLE | | |
| 921 CHESTNUT ST | | |
| MUNICIPALITY(COUNTY) KULPMONT BORO (NORTHUMBERLAND) | | |

PERSON(S) INVOLVED (Age based off incident occurrence date):

VICTIM: Jessica RONA, 34, F, MOUNT CARMEL, PA

VEHICLES:

STOLEN: WHITE BUICK

INCIDENT DETAILS:

On the above date and time at the above location PSP Stonington was dispatched to a theft of a vehicle. The victim allowed her vehicle to be towed to Ronald CAREY's residence. Ronald CAREY related to RONA that her vehicle was parked behind the house with the keys in the vehicle. When she arrived two days later the vehicle was gone.

| STONINGTON PATROL UNIT | CAD/CASE NO PA 2025-1180253 |
|---|---------------------------------------|
| INVESTIGATING OFFICER LORENC,A,15069 (789569) | DATE/TIME OF INCIDENT 09-22-2025 1625 |
| NATURE OF INCIDENT HARASS PHYSICAL CONTACT | |
| STATE ROUTE 147 | |
| MUNICIPALITY(COUNTY) LOWER MAHANOY TWP (NORTHUMBER | RLAND) |

PERSON(S) INVOLVED (Age based off incident occurrence date):

ARRESTEE: Marcus JAMES, 26, M, MILLERSBURG, PA

VICTIM: 23, F, DALMATIA, PA

INCIDENT DETAILS:

On the above date, time, and location, PSP Stonington responded to a report of a domestic. During the investigation, it was determined the actor physically struck the victim with a closed fist. The actor was cited with Harassment.

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EMS AGENCY

AREA SVCS



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| | | | | | | • | | | | | |
|----------------------|------------------|---------------------------------------|-------------------------------|------------------------|----------|------------|-------------|---------------|----------------|---------|--------|
| Crash | Involves: | | | | | | | | | | |
| | () DUI | Fatality | () Hit and Run | () Commercia | al Vehic | le { | PSP Vehicle | /Non-Motorist | O Local Police | e Vehic | :le |
| | Other | ○ Work Zone | - | O Snowmobi | ile | Č | Commonwe | ealth Vehicle | C Local Gov | Vehicle | • |
| Agend | y Informatio | on: | | | | | | | | | |
| AGENCY | | | | | | INVESTIGAT | OR | | | | |
| PA STA | TE POLICE - STOR | IINGTON | | | | ADAMS, A | AARON | | | | |
| Summ | nary Informa | tion: | | | | | | | | | |
| CAD/CASE | NUMBER | | CRASH DATE | | | C | RASH TIME | | | | |
| PA 2025- | 1206038 | | 09/28/2025 | | | | 20:08 hrs. | | | | |
| COUNTY NORTHU | MBERLAND | | | ICIPALITY CKSON TWP | | | | | | | |
| ROUTE # 0225 | SEGMENT # S | STREET STATE ROUTE | | | | REET ENDIN | G | | | | |
| LOCATION ON STATI | E ROUTE 225 647 | FEET SOUTH OF | HOWARD TAYLOR | RD | | | | | | | |
| Peopl | e Involved: | | | | | | | | | | |
| UNIT# | PERSON | | FIRST NAME | | МІ | LAST NAME | = | | SUFFIX | AGE | Gender |
| 001 | DRIVER | | JOHN | | M | KOPERN | A | | JR. | 39 | M |
| CITY | | STATE | | | _ | | | NON-MOTORIS | ST SAFETY EQU | IIPMEN | Т |
| POTTSV | | PA | LAP AND SHOUL | DEK BELL OSED |) | | | | | | |
| TRANSP | | 1 | SEVERITY PECTED MINOR INJU | RY | | | | | | | |
| EMS AGEN | CY | | | MEDICAL FA | | NOA! CENT | | | | | |
| AREA SV | cs | | | GEISINGE | -K MCL | OICAL CENT | EK | | | | |
| UNIT# | PERSON | | FIRST NAME | | МІ | LAST NAMI | E | | SUFFIX | AGE | Gender |
| 002 | NON-MOTORIST | (OPERATOR) | ERVAN | | J | zook | | | | 34 | М |
| CITY DORNSI | FE | STATE PA | SAFETY EQUIPMEN | T | - | | | NON-MOTORIS | ST SAFETY EQU | JIPMEN | r |
| EMS TRAN | | E | SEVERITY PECTED SERIOUS IN | JURY | | | | | | | |
| EMS AGEN | CY | | | MEDICAL FA | | | | | | | |
| AREA SV | rcs | | | GEISIGNE | RMED | DICAL CENT | ER | | | | |
| UNIT# | IPERSON | · · · · · · · · · · · · · · · · · · · | FIRST NAME | | MI | LAST NAMI | - | | SUFFIX | AGE | Gender |
| 002 | NON-MOTORIST | (OCCUPANT) | LEAH | | R | ZOOK | _ | | | 29 | F |
| CITY | FE | STATE PA | SAFETY EQUIPMEN | ΙΤ | | ! | | NON-MOTORIS | ST SAFETY EQL | JIPMEN | Τ |
| EMS TRAN | | | | | | | | 1 | | | |
| TRANSP | | | PECTED SERIOUS IN | JURY | | | | | | | |

MEDICAL FACILITY

GEISINGER MEDICAL CENTER



Pennsylvania Law Enforcement Crash - Public Information Release Report

| | | | | | | | - | | | | | | |
|---------------|---------------------|-----------|--------|--------------------|------------|-----------|-------------|----------------|------------|--------|-------------|---------|--|
| Crash | Involves: | | | | | | | | | | | | |
| | () DUI | Fatalit | v | | ⟨ Commerc | ial Vehic | le () | PSP Vehicle/No | n-Motorist | () (| .ocal Polic | e Vehic | le |
| | Other | ○ Work | | | Snowmot | oile | ŏ | Commonwealt | h Vehicle | Ō | Local Gov | Vehicle | |
| UNIT # | PERSON | | T | FIRST NAME | | МІ | LAST NAME | | | | SUFFIX | AGE | Gender |
| 002 | NON-MOTORIST | (OCCUPAN | - 1 | I HOT WASE | | "" | | - | | | | 9 | М |
| CITY | | | TATE | SAFETY EQUIPMENT | | <u> </u> | 1 | N | ON-MOTORIS | ST SAF | ETY EQL | IPMENT | <u> </u> |
| DORNSI | FE | I | PA | | | • | | บเ | NKNOWN | | | | |
| EMS TRAN | SPORT | I | | SEVERITY | | | | | | | | | |
| TRANSP | ORTED | | FATA | LINJURY | | | | | | | | | |
| EMS AGEN | | | | | MEDICAL F | | ICAL CENT | CD | | | | | |
| LIFE FLI | GHT | | | | GEISING | EK MED | ACAL CENT | ER | | | | | |
| | Taracou | | | FIDET NAME | | Імі | LAST NAME | - | ******* | | SUFFIX | AGE | Gender |
| UNIT # 002 | PERSON NON-MOTORIST | COCCUPAN | - 1 | FIRST NAME | | IVII | LAST NAME | = | | | JOOITIA | 7 | F |
| CITY | I TON-MOTORIOT | · | TATE | SAFETY EQUIPMENT | | <u> </u> | <u> </u> | I NO | ON-MOTORIS | ST SAF | ETY EQL | JIPMENT | <u>. </u> |
| DORNSI | FE | I | PA | DAI ETT EGOT MENT | | | | t | NKNOWN | | | | |
| EMS TRAN | SPORT | IN | JURY | SEVERITY | | | | | | | | | |
| NOT TR | ANSPORTED | | FATA | L INJURY | | | | | | | | | |
| EMS AGEN | ICY | I | | | MEDICAL F. | ACILITY | | | | | | | |
| | | | | | NONE | | | | | | | | |
| UNIT# | PERSON | | | FIRST NAME | | IMI | LAST NAME | | | | SUFFIX | AGE | Gender |
| 002 | NON-MOTORIST | (OCCUPAN | | I INOT HAME | | ["" | | • | | | | 3 | M |
| CITY | | | TATE | SAFETY EQUIPMENT | | | <u> </u> | N | ON-MOTORIS | ST SAF | ETY EQL | JIPMENT | <u> </u> |
| DORNSI | FE | 1 | PA | | | | | u | NKNOWN | | | | |
| EMS TRAN | ISPORT | IN | JURY | SEVERITY | | | | | | | | | |
| TRANSF | PORTED | ; | SUSP | ECTED SERIOUS INJU | RY | | | | | | | | |
| EMS AGEN | ICY | · | | | MEDICAL F | | | | | | | | |
| AREA S | /CS | | | | GEISING | ER MED | ICAL CENT | EK | | | | | |
| UNIT# | PERSON | | - | FIRST NAME | | МІ | LAST NAME | <u> </u> | | | SUFFIX | AGE | Gender |
| 002 | NON-MOTORIST | COCCUPAN | IT) | LIKOT IAVINE | | IVII | DAOT (WAILE | = | | | | 1.55 | M |
| CITY | 1 | | TATE | SAFETY EQUIPMENT | | | | N | ON-MOTORIS | ST SA | ETY EQL | JIPMENT | |
| DORNSI | FE | 1 | PA | | | | | u | NKNOWN | | | | |
| EMS TRAN | ISPORT | IN | JURY | SEVERITY | | | | | | | | | |
| TRANSF | PORTED | [: | SUSP | ECTED MINOR INJURY | , | | | | | | | | |
| EMS AGEN | ICY | | | | MEDICAL F | | | | | | | | |
| AREA S | /cs | | | | GEISING | ER MED | ICAL CENT | ER | | | | | |
| Vehic | les Involved | : | | | | | | | | | | | |
| UNIT# | YEAR | VEHICLE N | AKE | | | | | MODEL | | | | | |
| 001 | 2014 | MINI | | | | | | COOPER/CO | OOPER-S | | | | |
| DRIVER C | HARGED? | PRIMARY \ | VIOLA: | TION | | | | | | | | | |
| | | | | | | | | | | | | | |

Crash Synopsis:

DRIVER CHARGED?

YEAR

UNIT#

002

VEHICLE MAKE

PRIMARY VIOLATION

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MODEL



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| _ | - | _ | - |
|------|---|------|------|
| Crae | h | Inve | NVAC |

| _ | _ | ~ | • | O ==== | O Least Balley Valida |
|-------|-----------------|---------------|--------------------|--------------------------|------------------------|
| O DUI | Fatality | ← Hit and Run | Commercial Vehicle | PSP Vehicle/Non-Motorist | C Local Police Venicle |
| Other | Work Zone ✓ | | Snowmobile | Commonwealth Vehicle | C Local Gov Vehicle |

This crash occurred on 09/28/25 at approximately 2008 hours in the area of 4041 State Route 225, Jackson Township, Northumberland County. Unit 2, a horse drawn buggy were traveling south on State Route 225. Unit 1 was also traveling south on State Route 225 approaching Unit 2. Operator 1 believes he fell asleep prior to initial impact. Point of initial impact occurred as the 12 o'clock position of Unit 1 struck the 6 o'clock position of the horse drawn buggy. All six occupants inside the buggy were ejected to various location on the highway, shoulder and down an embankment. People 5 was pronounced deceased on scene and People 4 was pronounced deceased at Geisinger Medical Center. People 7 was transported to Geisinger Medical Center with suspected minor injury. All other occupants of Unit 2 were transported to Geisinger Medical Center with suspected serious injuries. Operator 1 was transported to Geisinger Medical Center with suspected serious injuries. Operator 1 was transported from the scene. The Horse sustained fatal injuries.

Assisted on scene by Herndon and Trevorton Fire Companies and personnel, Area Services EMS personnel, Americus EMS personnel, Geisinger Life Flight, Cartas Towing and Peiffers Towing.

| STATION | CAD/CASE NO |
|-------------------------------|-----------------------|
| STONINGTON PATROL UNIT | PA 2025-1151458 |
| INVESTIGATING OFFICER | DATE/TIME OF INCIDENT |
| KELLEY,J,13616 (673853) | 09-15-2025 1728 |
| NATURE OF INCIDENT | |
| BURGLARY RESIDENTIAL NO FORCE | |
| LOCATION | |
| 401 E SHAMOKIN ST | |
| MUNICIPALITY(COUNTY) | |
| ZERBE TWP (NORTHUMBERLAND) | |

PERSON(S) INVOLVED (Age based off incident occurrence date):

VICTIM: Cody BOWERSOX, 37, M, TREVORTON, PA

PROPERTY:

STOLEN: SMITH & WESSON OR SWAZILAND USE COUNTRY CODE IF MAKE CANNOT BE DETERMINED MP SHIELD BLACK SEMIAUTO SHIELD, Value \$300.00

STOLEN: SMITH & WESSON OR SWAZILAND USE COUNTRY CODE IF MAKE CANNOT BE DETERMINED MP15 AR 15, Value \$300.00

STOLEN: SONY PLAYSTATION 5 WHITE IN COLOR WITH A FRYING PAN WITH EGG IN IT STICKER, Value \$150.00

INCIDENT DETAILS:

On 09/15/2025 PSP Stonington responded to 401 E. Shamokin St, Trevorton for the report of stolen belongings. The victim reported that he is missing a rifle, a handgun and a Playstation 5. It was reported to have gone missing between the hours of 0600 and 1700 hours on this date. Firearms entered as stolen, investigation on going.

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