

INCIDENT REPORT

SC0100000		DISPATCH NUMBER 2015-018030		ORIGINAL CASE NUMBER N/A		PAGE 1 OF 3 PAGES		INCIC ENTRY		SHERIFF N/A		EIT N/A																		
EVENT	INCIDENT TYPE			INCIDENT CODE		COMPLETED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		FORCED ENTRY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		PREMISE TYPE Residence																				
	1. Assault - Shooting																													
	2. N/A																													
3. N/A																														
INCIDENT LOCATION: 4409 W. Montague Ave. Lot 7, N. Charleston, SC						ZIP CODE 29405		WEAPON TYPE Firearm																						
BEGINNING INCIDENT DATE 11/22/15		24 HR. CLOCK 1055		ENDING INCIDENT DATE 11/22/15		24 HR. CLOCK 1056		DISP. DATE 11/22/15		DISP. TIME 1056		TIME ARRIVED 1059		DEPART TIME 1215		TRACT #														
COMPLAINANT	NAME (LAST, FIRST, MIDDLE) Coaxum, Albert Lathel						RELATIONSHIP TO SUBJECT Stranger			RESIDENT J		RACE B		SEX M		AGE 24		DOB 11/12/91		ETH N										
	HEIGHT 6'0						WEIGHT 200						HAIR BLK						EYES BRO						FACIAL HAIR, SCARS, TATOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC. None					
	ADDRESS # 4409, Lot #7				STREET NAME W. Montague Ave.				CITY N. Charleston				STATE SC		ZIP CODE 29405		DAY PHONE [REDACTED]				EVENING PHONE None									
	OCCUPATION None				EMPLOYER None				ALIAS None				NIC # N/A																	
VICTIM #1	NAME (LAST, FIRST, MIDDLE) Coaxum, Darrell Lamar						RELATIONSHIP TO SUBJECT Acquaint			RESIDENT J		RACE B		SEX M		AGE 44		DOB 05/02/71		ETH N										
	HEIGHT 6'4						WEIGHT 280						HAIR BLK						EYES BRO						FACIAL HAIR, SCARS, TATOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC. None					
	ADDRESS # 4409, Lot #7				STREET NAME W. Montague Ave.				CITY N. Charleston				STATE SC		ZIP CODE 29405		DAY PHONE Unk				EVENING PHONE Unk									
	<input checked="" type="checkbox"/> VISIBLE INJURY		<input type="checkbox"/> NO		<input checked="" type="checkbox"/> YES		COMPLAINT OF NON-VISIBLE INJURIES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES		USING ALCOHOL <input type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> UNK		<input type="checkbox"/> TWO-MAN VEHICLE		<input type="checkbox"/> DETECTIVE SPLASHT		<input type="checkbox"/> ALONE		EXPLAIN Gunshot to foot		<input type="checkbox"/> ONE-MAN VEHICLE		<input type="checkbox"/> OTHER		<input type="checkbox"/> ASSISTED							
OCCUPATION None				EMPLOYER None				ALIAS None				NIC # N/A																		
SUBJ. I.D.	NAME (LAST, FIRST, MIDDLE) Unk						RELATIONSHIP TO SUBJECT N/A			RESIDENT J		RACE B		SEX M		AGE 27		DOB Unk		ETH n										
	HEIGHT 6'0						WEIGHT Unk						HAIR BLK						EYES BRO						FACIAL HAIR, SCARS, TATOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC. blk shorts, grn shirt, flipflops					
	ADDRESS # Unk				STREET NAME Unk				CITY Unk				STATE Unk		ZIP CODE Unk		DAY PHONE Unk				EVENING PHONE Unk									
	<input type="checkbox"/> VISIBLE INJURY		<input checked="" type="checkbox"/> NO		<input type="checkbox"/> YES		COMPLAINT OF NON-VISIBLE INJURIES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES		USING ALCOHOL <input type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> UNK		<input type="checkbox"/> TWO-MAN VEHICLE		<input type="checkbox"/> DETECTIVE SPLASHT		<input type="checkbox"/> ALONE		EXPLAIN		<input type="checkbox"/> ONE-MAN VEHICLE		<input type="checkbox"/> OTHER		<input type="checkbox"/> ASSISTED							
OCCUPATION Unk				EMPLOYER Unk				ALIAS Unk				NIC # N/A																		
ARREST	(A) CHARGE N/A						(C) CHARGE N/A																							
	(B) CHARGE N/A						(D) CHARGE N/A																							
NARRATIVE	<p>W. Montague Ave.) I was dispatched to the incident location in regard to a shooting. Upon arrival I observed a black male on the steps of the residence who appeared to have just stepped out of the residential mobile home. He then sat down on the stairs. I noticed a bloody, improvised bandage on his left foot. He appeared to be in some pain but was not forthcoming with information when asked what had happened. It was unclear if this was intentional on his part or if he was in medical shock from the apparent gunshot to the inner arch of his left foot. Other units including North Charleston Police Department (NCPD) patrols and Deputy Comfort arrived on scene a few seconds after I did. EMS was advised that the scene was safe for them to come in. They arrived within a minute or so and began treating the Victim, Coaxum, D. A black male in the residence was identified as the</p>																													
	PROPERTY EST.	TYPE (GROUP)		N/A		N/A		N/A		N/A		N/A		N/A		TOTAL VALUE		JURISDICTION OF THEFT LAW ENFORCEMENT AGENCY												
		STOLEN																N/A												
		DAMAGED																												
		BURNED																												
RECOVERED																														
SEIZED																														
ADMINISTRATIVE	SUBJECT IDENTIFIED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		SUBJECT LOCATED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		<input checked="" type="checkbox"/> ACTIVE <input type="checkbox"/> ADM. CLOSED		<input type="checkbox"/> UNFOUNDED		<input type="checkbox"/> ARRESTED UNDER 18		<input type="checkbox"/> ARRESTED 18 AND OVER		<input type="checkbox"/> EX-CLEAR UNDER 18		<input type="checkbox"/> EX-CLEAR 18 AND OVER															
	REASON FOR EXCEPTIONAL CLEARANCE: 1. <input type="checkbox"/> OFFENDER DEATH 2. <input type="checkbox"/> NO PROSECUTION 3. <input type="checkbox"/> EXTRADITION DENIED 4. <input type="checkbox"/> VICTIM DECLINES COOPERATION 5. <input type="checkbox"/> JUVENILE NO CUSTODY																													
	REPORTING OFFICER(S) Heffner, D.J.				DATE 11/22/15				BADGE NUMBER 8956				APPROVING OFFICER Sgt. Semlitsch, E.				DATE 11/22/15				BADGE NUMBER 9982									
	FOLLOW-UP INVESTIGATION <input type="checkbox"/> YES <input type="checkbox"/> NO																													

ARTICLE SUPPLEMENT

<b>SC0100000</b>		DISPATCH NUMBER 2015-018030	ORIGINAL CASE NUMBER N/A	PAGE 2 OF 3 PAGES	NCIC ENTRY	INO. N/A	EXT. N/A	
<input checked="" type="checkbox"/> ORIGINAL REPORT <input type="checkbox"/> MODIFIES ORIGINAL <input type="checkbox"/> SUPPLEMENTAL REPORT <input type="checkbox"/> CASE STATUS CHANGE <input type="checkbox"/> ADDITIONAL STOLEN PROPERTY <input type="checkbox"/> ADDITIONAL RECOVERED PROPERTY		LICENSE/REGISTRATION NO. N/A		BOAT HULL NO. OR VIN NO. N/A				
VEH. / GUN / ETC.	STATUS	TYPE	SERIAL #	OWNER APPLIED #				
	<input type="checkbox"/> STOLEN	<input type="checkbox"/> VEHICLE	Unk	N/A				
	<input type="checkbox"/> RECOVERED	<input checked="" type="checkbox"/> GUN	YEAR OF REGISTRATION	YEAR OF EXPIRATION	YEAR	MAKE	TYPE	
	<input type="checkbox"/> FOUND	<input type="checkbox"/> BOAT	N/A	N/A	N/A	N/A	Firearm	
	<input type="checkbox"/> VICTIM	<input type="checkbox"/> LICENSE PLATE	MODEL	STYLE	BRAND NAME	COLOR	CALIBER	
	<input checked="" type="checkbox"/> SUSPECT	<input type="checkbox"/> SECURITIES/BONDS, STOCKS	Unk	Revolver	Unk	Blk	Unk	
	<input type="checkbox"/> TOWED	<input type="checkbox"/> ARTICLE	N/C NO.	DENOMINATION	ISSUER	SECURITIES DATE		
			N/A	N/A	N/A	N/A		
JURISDICTION OF THEFT LAW ENFORCEMENT AGENCY    N/A			JURISDICTION OF RECOVERY LAW ENFORCEMENT AGENCY    N/A					
VEH. / GUN / ETC.	STATUS	TYPE	SERIAL #	OWNER APPLIED #				
	<input type="checkbox"/> STOLEN	<input type="checkbox"/> VEHICLE						
	<input type="checkbox"/> RECOVERED	<input type="checkbox"/> GUN	YEAR OF REGISTRATION	YEAR OF EXPIRATION	YEAR	MAKE	TYPE	
	<input type="checkbox"/> FOUND	<input type="checkbox"/> BOAT						
	<input type="checkbox"/> VICTIM	<input type="checkbox"/> LICENSE PLATE	MODEL	STYLE	BRAND NAME	COLOR	CALIBER	
	<input type="checkbox"/> SUSPECT	<input type="checkbox"/> SECURITIES/BONDS, STOCKS	N/C NO.	DENOMINATION	ISSUER	SECURITIES DATE		
	<input type="checkbox"/> TOWED	<input type="checkbox"/> ARTICLE						
	JURISDICTION OF THEFT LAW ENFORCEMENT AGENCY			JURISDICTION OF RECOVERY LAW ENFORCEMENT AGENCY				
VEH. / GUN / ETC.	STATUS	TYPE	SERIAL #	OWNER APPLIED #				
	<input type="checkbox"/> STOLEN	<input type="checkbox"/> VEHICLE						
	<input type="checkbox"/> RECOVERED	<input type="checkbox"/> GUN	YEAR OF REGISTRATION	YEAR OF EXPIRATION	YEAR	MAKE	TYPE	
	<input type="checkbox"/> FOUND	<input type="checkbox"/> BOAT						
	<input type="checkbox"/> VICTIM	<input type="checkbox"/> LICENSE PLATE	MODEL	STYLE	BRAND NAME	COLOR	CALIBER	
	<input type="checkbox"/> SUSPECT	<input type="checkbox"/> SECURITIES/BONDS, STOCKS	N/C NO.	DENOMINATION	ISSUER	SECURITIES DATE		
	<input type="checkbox"/> TOWED	<input type="checkbox"/> ARTICLE						
	JURISDICTION OF THEFT LAW ENFORCEMENT AGENCY			JURISDICTION OF RECOVERY LAW ENFORCEMENT AGENCY				
VEH. / GUN / ETC.	STATUS	TYPE	SERIAL #	OWNER APPLIED #				
	<input type="checkbox"/> STOLEN	<input type="checkbox"/> VEHICLE						
	<input type="checkbox"/> RECOVERED	<input type="checkbox"/> GUN	YEAR OF REGISTRATION	YEAR OF EXPIRATION	YEAR	MAKE	TYPE	
	<input type="checkbox"/> FOUND	<input type="checkbox"/> BOAT						
	<input type="checkbox"/> VICTIM	<input type="checkbox"/> LICENSE PLATE	MODEL	STYLE	BRAND NAME	COLOR	CALIBER	
	<input type="checkbox"/> SUSPECT	<input type="checkbox"/> SECURITIES/BONDS, STOCKS	N/C NO.	DENOMINATION	ISSUER	SECURITIES DATE		
	<input type="checkbox"/> TOWED	<input type="checkbox"/> ARTICLE						
	JURISDICTION OF THEFT LAW ENFORCEMENT AGENCY			JURISDICTION OF RECOVERY LAW ENFORCEMENT AGENCY				
REMARKS								
	SUBJECT IDENTIFIED		SUBJECT LOCATED		<input checked="" type="checkbox"/> ACTIVE <input type="checkbox"/> ADM. CLOSED <input type="checkbox"/> UNFOUNDED		<input type="checkbox"/> ARRESTED UNDER 18 <input type="checkbox"/> EX-CLEAR UNDER 18 <input type="checkbox"/> ARRESTED 18 AND OVER <input type="checkbox"/> EX-CLEAR 18 AND OVER	
	REASON FOR EXCEPTIONAL CLEARANCE: 1. <input type="checkbox"/> OFFENDER DEATH                    2. <input type="checkbox"/> NO PROSECUTION                    3. <input type="checkbox"/> EXTRADITION DENIED                    4. <input type="checkbox"/> VICTIM DECLINES COOPERATION                    5. <input type="checkbox"/> JUVENILE NO CUSTODY							
	REPORTING OFFICER(S)	DATE	BADGE NUMBER	APPROVING OFFICER	DATE	BADGE NUMBER		
	Heffner, D.J.	11/22/15	8955	Sgt. Semlitsch, E.	11/22/15	9962		
				FOLLOW-UP INVESTIGATION				
				<input type="checkbox"/> NO <input type="checkbox"/> YES				

INCIDENT SUPPLEMENT

<b>SC0100000</b>	DISPATCH NUMBER 2015-018030	ORIGINAL CASE NUMBER N/A	PAGE 3 OF 3 PAGES	AGC ENTRY	REQ. N/A	EXT. N/A
<input checked="" type="checkbox"/> ORIGINAL REPORT	<input type="checkbox"/> SUPPLEMENTAL REPORT	<input type="checkbox"/> ADDITIONAL VICTIMS	<input type="checkbox"/> ADDITIONAL WITNESSES	<input type="checkbox"/> ADDITIONAL STOLEN PROPERTY		
<input type="checkbox"/> MODIFIES ORIGINAL	<input type="checkbox"/> CASE STATUS CHANGE	<input type="checkbox"/> ADDITIONAL OFFENDERS	<input type="checkbox"/> ADDITIONAL SUBJECTS	<input type="checkbox"/> ADDITIONAL RECOVERED PROPERTY		

NARRATIVE

Complainant/ Coaxum, A., who is a nephew of Coaxum, D. Coaxum, A. was directed out of the residence so that the crime scene could be cleared and secured. Sgt. Semlitsch responded to the scene. Sgt. Semlitsch, along with several NCPD units and Deputy Comfort conducted a protective sweep of the residence for any other injured parties or suspects, which were not located. Sgt. Semlitsch observed blood in the front room and the kitchen. The residence was cordoned off with crime scene tape and Deputy Comfort began a crime scene log. Coaxum, D. was transported by EMS to MUSC for medical treatment. Lt Knox responded to the scene. I interviewed Coaxum, A. regarding the incident. He was unwilling to write a written statement but was willing to speak about the incident. I recorded the interview using my in-car camera system. Coaxum, A. stated that about 5 minutes before the shooting he heard someone at the front door, which is kept barricaded with furniture due to it being unable to be locked. He recognized that Coaxum, D. was trying to come in the residence, along with another black male, Suspect #1. Both parties were heard to argue loudly, but Coaxum, A. was unsure what they were arguing about. He asked them to settle down. He heard the Suspect tell Coaxum, D. to leave him alone. Coaxum, D. appeared to be intentionally aggravating the Suspect. The Suspect warned Coaxum, D. that this argument "won't end well" if Coaxum, D. didn't stop pestering him. Coaxum, A. then heard a single gunshot from the front room where the parties had been arguing. He looked and saw the Suspect with a black revolver in his right hand. The Suspect was then heard to tell Coaxum, D., "see, I could have shot you more". Coaxum, D. was heard to exclaim "he/you shot me". The suspect then fled out the front door with the gun in his hand. Coaxum, A. believed that the Suspect fled on foot but did not see him leave the property. The Suspect is a black male, about 27 years old, 5'10 to 6'0, medium complexion, wearing a green t-shirt, black basketball shorts and black flip-flop sandals. Coaxum, A. did not have a name or nickname for the Suspect. Deputy Balzano/FSU responded to the scene for processing, Detective Herriott responded to the scene and assumed control of the investigation.

PROPERTY EST.	TYPE (GROUP)	N/A				TOTAL VALUE	JURISDICTION OF THEFT LAW ENFORCEMENT AGENCY
	STOLEN		N/A				N/A
	DAMAGED			N/A			
	BURNED				N/A		JURISDICTION OF RECOVERY LAW ENFORCEMENT AGENCY
	RECOVERED					N/A	N/A
SEIZED						N/A	
ADMINISTRATIVE	SUBJECT IDENTIFIED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	SUBJECT LOCATED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input checked="" type="checkbox"/> ACTIVE <input type="checkbox"/> ADM. CLOSED <input type="checkbox"/> UNFOUNDED	<input type="checkbox"/> ARRESTED UNDER 18 <input type="checkbox"/> ARRESTED 18 AND OVER	<input type="checkbox"/> EX-CLEAR UNDER 18 <input type="checkbox"/> EX-CLEAR 18 AND OVER	REASON FOR EXCEPTIONAL CLEARANCE: 1. <input type="checkbox"/> OFFENDER DEATH 2. <input type="checkbox"/> NO PROSECUTION 3. <input type="checkbox"/> EXTRADITION DENIED 4. <input type="checkbox"/> VICTIM DECLINES COOPERATION 5. <input type="checkbox"/> JUVENILE NO CUSTODY	
	REPORTING OFFICER(S)	DATE	BADGE NUMBER	APPROVING OFFICER	DATE	BADGE NUMBER	
	Heffner, D.J.	11/22/15	8955	Sgt. Semlitsch, E.	11/22/15	9962	
				FOLLOW-UP INVESTIGATION	<input type="checkbox"/> YES <input type="checkbox"/> NO		