

INCIDENT REPORT

SHERIFF

SC0100000		DISPATCH NUMBER 2015-015292	ORIGINAL CASE NUMBER		PAGE 1 OF 5 PAGES	INC. ENTRY	INC.	ENT.										
EVENT	1. Shooting		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 Parking Lot		UNITS ENTERED	TYPE VICTIM <input checked="" type="checkbox"/> INDIVIDUAL <input checked="" type="checkbox"/> BUSINESS <input type="checkbox"/> FINANCIAL INST. <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> RELIG. ORG. <input type="checkbox"/> SOC./PUB. <input type="checkbox"/> OTHER <input type="checkbox"/> UNKNOWN <input type="checkbox"/> POLICE OFF.									
	2.			<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO													
	3.			<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO													
INCIDENT LOCATION: 4106 Dorchester Road, North Charleston			ZIP CODE 29405	WEAPON TYPE Pistol														
BEGINNING INCIDENT DATE 9-20-15		24 HR. CLOCK 1600	ENDING INCIDENT DATE 09-20-15	24 HR. CLOCK 1634	DISP. DATE 09-20-15	DISP. TIME 1623	TIME ARRIVED 1634	DEPART TIME 1900	TRACT #									
COMPLAINANT	NAME: (LAST, FIRST, MIDDLE) North Charleston PD			RELATIONSHIP TO SUBJECT			RESIDENT J	RACE	SEX	AGE	DOB	ETH						
	HEIGHT	WEIGHT	HAIR BLD	EYES BLK	FACIAL HAIR, SCARS, TATOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC.			DRIVERS LIC / ID & STATE		SOCIAL SECURITY #								
	ADDRESS # 2500		STREET NAME City Hall Lane		CITY North Charleston	STATE SC	ZIP CODE 29405	DAY PHONE 843-740-2800		EVENING PHONE								
	OCCUPATION			EMPLOYER		ALIAS		NIC #										
VICTIM #1	NAME: (LAST, FIRST, MIDDLE) Young, Sharod Devain			RELATIONSHIP TO SUBJECT			RESIDENT J	RACE B	SEX M	AGE 35	DOB 4-12-80	ETH N						
	HEIGHT 510	WEIGHT 215	HAIR BLK	EYES BRO	FACIAL HAIR, SCARS, TATOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC. unk			DRIVERS LIC / ID & STATE 90341639-SC		SOCIAL SECURITY #								
	ADDRESS # 2695		STREET NAME Ranger Drive		CITY North Charleston	STATE SC	ZIP CODE 29405	DAY PHONE		EVENING PHONE								
	<input checked="" type="checkbox"/> VISIBLE INJURY <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES			<input type="checkbox"/> 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 SPLASMT <input type="checkbox"/> ALONE		<input type="checkbox"/> ONE-MAN VEHICLE <input type="checkbox"/> OTHER <input type="checkbox"/> ASSISTED							
SUBJ. I.D.	<input type="checkbox"/> COMPLAINT <input type="checkbox"/> VICTIM #			NAME: (LAST, FIRST, MIDDLE) unknown			RELATIONSHIP TO SUBJECT			RESIDENT J	RACE B	SEX M	AGE	DOB	ETH			
	<input checked="" type="checkbox"/> SUSPECT # 1			HEIGHT 510			WEIGHT 180			HAIR BLD			EYES BLK			FACIAL HAIR, SCARS, TATOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC. white shirt, green hat, dark pants		
	<input type="checkbox"/> SUBJECT #			ADDRESS #		STREET NAME		CITY	STATE	ZIP CODE	DAY PHONE		EVENING PHONE					
	<input type="checkbox"/> WITNESS #			<input type="checkbox"/> VISIBLE INJURY <input type="checkbox"/> NO <input type="checkbox"/> YES			<input type="checkbox"/> COMPLAINT OF NON-VISIBLE INJURIES <input type="checkbox"/> NO <input type="checkbox"/> YES			USING ALCOHOL <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> UNK		<input type="checkbox"/> TWO-MAN VEHICLE <input type="checkbox"/> DETECTIVE SPLASMT <input type="checkbox"/> ALONE		<input type="checkbox"/> ONE-MAN VEHICLE <input type="checkbox"/> OTHER <input type="checkbox"/> ASSISTED				
ARREST	(A) CHARGE			(C) CHARGE														
	(B) CHARGE			(D) CHARGE														
NARRATIVE	<p>(Waylyn) On 9-20-15 at approximately 1623 hours NCPD requested CCSO assistance in reference to a shooting. NCPD responded to 2826 Ranger Drive in reference to a B/M subject on scene who had been shot. While enroute to Ranger Drive they were flagged down by a citizen who stated a shooting just occurred in the A-1 Food Store parking lot. NCPD officers located several shell casings in the parking lot, then taped off the parking lot with Crime Scene tape and contacted CCSO. (NCPD Case number 2015-029690). Upon arrival I located a witness, Ms. Beatrice Simmons. She was complaining of health issues and stated she really needed to get home where she could sit down. She said she was sitting in her vehicle, a Mazda CX7, in the parking lot when the shooting started. She was parked beside the white Chevy pick up truck and said</p>																	
PROPERTY EST.	TYPE (GROUP)	vehicle										TOTAL VALUE	JURISDICTION OF THEFT LAW ENFORCEMENT AGENCY					
	STOLEN																	
	DAMAGED	150										150						
	BURNED												JURISDICTION OF RECOVERY LAW ENFORCEMENT AGENCY					
	RECOVERED																	
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"/> 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) Sgt. S. Brinson			DATE 9-20-15	BADGE NUMBER 9801	APPROVING OFFICER Lt. D. Stanley			DATE 9-20-15	BADGE NUMBER 9612	FOLLOW-UP INVESTIGATION <input type="checkbox"/> YES <input type="checkbox"/> NO							

PERSON SUPPLEMENT

SC010000 DISPATCH NUMBER 2015-015292 ORIGINAL CASE NUMBER PAGE 2 OF 5 PAGES NCIC ENTRY INO. ENT.

ORIGINAL REPORT SUPPLEMENTAL REPORT ADDITIONAL VICTIMS ADDITIONAL WITNESSES ADDITIONAL STOLEN PROPERTY
 MODIFIES REPORT CASE STATUS CHANGE ADDITIONAL OFFENDERS ADDITIONAL SUBJECTS ADDITIONAL RECOVERED PROPERTY

SUBJ. I.D.
 COMPLAINANT VICTIM # 2
 SUSPECT # SUBJECT # WITNESS # WANTED WARRANT ARREST RUNAWAY MISSING PERSON

NAME: (LAST, FIRST, MIDDLE) **Anglin, David S.** RELATIONSHIP TO SUBJECT #1 unk #2 #3 RESIDENT J RACE B SEX M AGE 51 DOB 11/10/63 ETH N
 HEIGHT 600 WEIGHT 230 HAIR BLK EYES BRO FACIAL HAIR, SCARS, TATOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC DRIVERS LIC / ID & STATE 9309167-SC SOCIAL SECURITY #
 ADDRESS # 2951 STREET NAME Alabama Drive CITY N. Charleston STATE SC ZIP CODE 29405 DAY PHONE 8433030477 EVENING PHONE H
 VISIBLE INJURY YES NO COMPLAINT OF NON-VISIBLE INJURIES NO YES USING ALCOHOL UNK NO YES TWO-MAN VEHICLE DETECTIVE SPLASMT ALONE ONE-MAN VEHICLE OTHER ASSISTED
 OCCUPATION unknown EMPLOYER ALIAS NIC #

(A) CHARGE (C) CHARGE
 (B) CHARGE (D) CHARGE

SUBJ. I.D.
 COMPLAINANT VICTIM # SUSPECT # SUBJECT # WITNESS # 1
 WANTED WARRANT ARREST RUNAWAY MISSING PERSON

NAME: (LAST, FIRST, MIDDLE) **Simmons, Beatrice** RELATIONSHIP TO SUBJECT #1 unk #2 #3 RESIDENT J RACE B SEX F AGE 63 DOB 7/26/52 ETH N
 HEIGHT 5-4 WEIGHT 230 HAIR BLK EYES BRO FACIAL HAIR, SCARS, TATOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC DRIVERS LIC / ID & STATE 4798609-SC SOCIAL SECURITY #
 ADDRESS # 2723 STREET NAME E. Surrey Drive CITY N Charleston STATE SC ZIP CODE 29405 DAY PHONE 8433450378 EVENING PHONE H
 VISIBLE INJURY YES NO COMPLAINT OF NON-VISIBLE INJURIES NO YES USING ALCOHOL UNK NO YES TWO-MAN VEHICLE DETECTIVE SPLASMT ALONE ONE-MAN VEHICLE OTHER ASSISTED
 OCCUPATION unknown EMPLOYER ALIAS NIC #

(A) CHARGE (C) CHARGE
 (B) CHARGE (D) CHARGE

SUBJ. I.D.
 COMPLAINANT VICTIM # SUSPECT # SUBJECT # WITNESS # 2
 WANTED WARRANT ARREST RUNAWAY MISSING PERSON

NAME: (LAST, FIRST, MIDDLE) **Drayton, David** RELATIONSHIP TO SUBJECT #1 unknown #2 #3 RESIDENT J RACE B SEX M AGE 29 DOB 6/30/86 ETH N
 HEIGHT 509 WEIGHT 165 HAIR BLK EYES BRO FACIAL HAIR, SCARS, TATOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC DRIVERS LIC / ID & STATE 103051160-SC SOCIAL SECURITY #
 ADDRESS # 4106 STREET NAME Dorchester Road CITY N. Charleston STATE SC ZIP CODE 29405 DAY PHONE 2672909620 EVENING PHONE H
 VISIBLE INJURY YES NO COMPLAINT OF NON-VISIBLE INJURIES NO YES USING ALCOHOL UNK NO YES TWO-MAN VEHICLE DETECTIVE SPLASMT ALONE ONE-MAN VEHICLE OTHER ASSISTED
 OCCUPATION cashier EMPLOYER A-1 Food Store ALIAS NIC #

(A) CHARGE (C) CHARGE
 (B) CHARGE (D) CHARGE

REMARKS

ADMINISTRATIVE
 SUBJECT IDENTIFIED YES NO SUBJECT LOCATED YES NO ACTIVE ADM. CLOSED ARRESTED UNDER 18 EX-CLEAR UNDER 18
 UNFOUNDED ARRESTED 18 AND OVER EX-CLEAR 18 AND OVER
 REASON FOR EXCEPTIONAL CLEARANCE: 1. OFFENDER DEATH 2. NO PROSECUTION 3. EXTRADITION DENIED 4. VICTIM DECLINES COOPERATION 5. JUVENILE NO CUSTODY

REPORTING OFFICER(S) Sgt. S. Brinson	DATE 9/20/2015	BADGE NUMBER 9801	APPROVING OFFICER Lt. D. Stanley	DATE 9/20/2015	BADGE NUMBER 9612
FOLLOW-UP INVESTIGATION			OFFICER		
<input type="checkbox"/> YES <input type="checkbox"/> NO					

PERSON SUPPLEMENT

SC010000

DISPATCH NUMBER
 2015-015292

ORIGINAL CASE NUMBER

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NCIC ENTRY INQ. ENT.

- ORIGINAL REPORT
 SUPPLEMENTAL REPORT
 ADDITIONAL VICTIMS
 ADDITIONAL WITNESSES
 ADDITIONAL STOLEN PROPERTY
 MODIFIES REPORT
 CASE STATUS CHANGE
 ADDITIONAL OFFENDERS
 ADDITIONAL SUBJECTS
 ADDITIONAL RECOVERED PROPERTY

SUBJ. I.D.
 ARREST
 SUBJ. I.D.
 ARREST
 SUBJ. I.D.
 ARREST
 REMARKS
 ADMINISTRATIVE

NAME: (LAST, FIRST, MIDDLE) **Chavis, Rita**
 RELATIONSHIP TO SUBJECT #1 unk #2 #3
 RESIDENT RACE SEX AGE DOB ETH
 J B F 29 9/27/85 N
 HEIGHT WEIGHT HAIR EYES FACIAL HAIR, SCARS, TATOOS, GLASSES, CLOTH'NG, PHYSICAL PECULIARITIES, ETC
 507 233 BLK BRO
 DRIVERS LIC / ID & STATE SOCIAL SECURITY #
 101012126-SC
 ADDRESS # STREET NAME CITY STATE ZIP CODE DAY PHONE EVENING PHONE
 3721 Nightingate Dr. N. Charleston SC 29405 8434808616 H H
 VISIBLE INJURY YES NO COMPLAINT OF NON-VISIBLE INJURIES NO YES
 USING ALCOHOL NO YES DRUGS NO YES TYPE UNK
 TWO-MAN VEHICLE DETECTIVE SPLASMT ALONE
 ONE-MAN VEHICLE OTHER ASSISTED
 OCCUPATION EMPLOYER ALIAS NIC #
 unknown

(A) CHARGE (C) CHARGE
 (B) CHARGE (D) CHARGE

NAME: (LAST, FIRST, MIDDLE) **Grant, Da'Shawn**
 RELATIONSHIP TO SUBJECT #1 unk #2 #3
 RESIDENT RACE SEX AGE DOB ETH
 J B M 15 5/28/00 N
 HEIGHT WEIGHT HAIR EYES FACIAL HAIR, SCARS, TATOOS, GLASSES, CLOTH'NG, PHYSICAL PECULIARITIES, ETC
 510 165 BLK BRO
 DRIVERS LIC / ID & STATE SOCIAL SECURITY #
 none
 ADDRESS # STREET NAME CITY STATE ZIP CODE DAY PHONE EVENING PHONE
 2603 Ferrara Drive N. Charleston SC 29405 8432597646 H H
 VISIBLE INJURY YES NO COMPLAINT OF NON-VISIBLE INJURIES NO YES
 USING ALCOHOL NO YES DRUGS NO YES TYPE UNK
 TWO-MAN VEHICLE DETECTIVE SPLASMT ALONE
 ONE-MAN VEHICLE OTHER ASSISTED
 OCCUPATION EMPLOYER ALIAS NIC #
 student Garrett HS

(A) CHARGE (C) CHARGE
 (B) CHARGE (D) CHARGE

NAME: (LAST, FIRST, MIDDLE) **Simmons, Vincent**
 RELATIONSHIP TO SUBJECT #1 unk #2 #3
 RESIDENT RACE SEX AGE DOB ETH
 J B M 17 7/29/98 N
 HEIGHT WEIGHT HAIR EYES FACIAL HAIR, SCARS, TATOOS, GLASSES, CLOTH'NG, PHYSICAL PECULIARITIES, ETC
 511 175 BLK BRO
 DRIVERS LIC / ID & STATE SOCIAL SECURITY #
 103971624-SC
 ADDRESS # STREET NAME CITY STATE ZIP CODE DAY PHONE EVENING PHONE
 2510 Highpoint Road N. Charleston SC 29405 8434781523 H H
 VISIBLE INJURY YES NO COMPLAINT OF NON-VISIBLE INJURIES NO YES
 USING ALCOHOL NO YES DRUGS NO YES TYPE UNK
 TWO-MAN VEHICLE DETECTIVE SPLASMT ALONE
 ONE-MAN VEHICLE OTHER ASSISTED
 OCCUPATION EMPLOYER ALIAS NIC #
 student Garrett HS

(A) CHARGE (C) CHARGE
 (B) CHARGE (D) CHARGE

REASON FOR EXCEPTIONAL CLEARANCE: 1. OFFENDER DEATH 2. NO PROSECUTION 3. EXTRADITION DENIED 4. VICTIM DECLINES COOPERATION 5. JUVENILE NO CUSTODY

SUBJECT IDENTIFIED YES NO
 SUBJECT LOCATED YES NO
 ACTIVE ADM. CLOSED
 UNFOUNDED
 ARRESTED UNDER 18
 ARRESTED 18 AND OVER
 EX-CLEAR UNDER 18
 EX-CLEAR 18 AND OVER
 REPORTING OFFICER(S) DATE BADGE NUMBER APPROVING OFFICER DATE BADGE NUMBER
 Sgt. S. Brinson 9/20/2015 9801 Lt. D. Stanley 9/20/2015 9612
 FOLLOW-UP INVESTIGATION YES NO

ARTICLE SUPPLEMENT

SHERIFF

SC0100000		DISPATCH NUMBER 2015-015292	ORIGINAL CASE NUMBER	PAGE 4 OF 5 PAGES	NCIC ENTRY	INO	ENT
<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							
VEH. / GUN / ETC.	STATUS <input type="checkbox"/> STOLEN <input checked="" type="checkbox"/> VEHICLE <input type="checkbox"/> RECOVERED <input type="checkbox"/> GUN <input type="checkbox"/> FOUND <input type="checkbox"/> BOAT <input type="checkbox"/> VICTIM <input type="checkbox"/> LICENSE PLATE <input checked="" type="checkbox"/> SUSPECT <input type="checkbox"/> SECURITIES/BONDS, STOCKS <input type="checkbox"/> TOWED <input type="checkbox"/> ARTICLE	LICENSE/REGISTRATION NO. unknown	BOAT HULL NO. OR VIN NO.				
		SERIAL #	OWNER APPLIED #				
		YEAR OF REGISTRATION	YEAR OF EXPIRATION	YEAR	MAKE	TYPE	
		MODEL	STYLE	BRAND NAME	COLOR	CALIBER	
		NIC NO.	DENOMINATION	ISSUER	SECURITIES DATE		
		JURISDICTION OF THEFT LAW ENFORCEMENT AGENCY			JURISDICTION OF RECOVERY LAW ENFORCEMENT AGENCY		
VEH. / GUN / ETC.	STATUS <input type="checkbox"/> STOLEN <input checked="" type="checkbox"/> VEHICLE <input type="checkbox"/> RECOVERED <input type="checkbox"/> GUN <input type="checkbox"/> FOUND <input type="checkbox"/> BOAT <input checked="" type="checkbox"/> VICTIM <input type="checkbox"/> LICENSE PLATE <input type="checkbox"/> SUSPECT <input type="checkbox"/> SECURITIES/BONDS, STOCKS <input type="checkbox"/> TOWED <input type="checkbox"/> ARTICLE	LICENSE/REGISTRATION NO. LHH617	BOAT HULL NO. OR VIN NO. 1GCEC19X442276217				
		SERIAL #	OWNER APPLIED #				
		YEAR OF REGISTRATION	YEAR OF EXPIRATION	YEAR	MAKE	TYPE	
		MODEL	STYLE	BRAND NAME	COLOR	CALIBER	
		NIC NO.	DENOMINATION	ISSUER	SECURITIES DATE		
		JURISDICTION OF THEFT LAW ENFORCEMENT AGENCY			JURISDICTION OF RECOVERY LAW ENFORCEMENT AGENCY		
VEH. / GUN / ETC.	STATUS <input type="checkbox"/> STOLEN <input checked="" type="checkbox"/> VEHICLE <input type="checkbox"/> RECOVERED <input type="checkbox"/> GUN <input type="checkbox"/> FOUND <input type="checkbox"/> BOAT <input type="checkbox"/> VICTIM <input type="checkbox"/> LICENSE PLATE <input type="checkbox"/> SUSPECT <input type="checkbox"/> SECURITIES/BONDS, STOCKS <input type="checkbox"/> TOWED <input type="checkbox"/> ARTICLE	LICENSE/REGISTRATION NO. IYS442	BOAT HULL NO. OR VIN NO. JM3ER293X90231755				
		SERIAL #	OWNER APPLIED #				
		YEAR OF REGISTRATION	YEAR OF EXPIRATION	YEAR	MAKE	TYPE	
		MODEL	STYLE	BRAND NAME	COLOR	CALIBER	
		NIC NO.	DENOMINATION	ISSUER	SECURITIES DATE		
		JURISDICTION OF THEFT LAW ENFORCEMENT AGENCY			JURISDICTION OF RECOVERY LAW ENFORCEMENT AGENCY		
VEH. / GUN / ETC.	STATUS <input type="checkbox"/> STOLEN <input checked="" type="checkbox"/> VEHICLE <input type="checkbox"/> RECOVERED <input type="checkbox"/> GUN <input type="checkbox"/> FOUND <input type="checkbox"/> BOAT <input type="checkbox"/> VICTIM <input type="checkbox"/> LICENSE PLATE <input type="checkbox"/> SUSPECT <input type="checkbox"/> SECURITIES/BONDS, STOCKS <input type="checkbox"/> TOWED <input type="checkbox"/> ARTICLE	LICENSE/REGISTRATION NO. LFF412	BOAT HULL NO. OR VIN NO. 2CKDL637386291836				
		SERIAL #	OWNER APPLIED #				
		YEAR OF REGISTRATION	YEAR OF EXPIRATION	YEAR	MAKE	TYPE	
		MODEL	STYLE	BRAND NAME	COLOR	CALIBER	
		NIC NO.	DENOMINATION	ISSUER	SECURITIES DATE		
		JURISDICTION OF THEFT LAW ENFORCEMENT AGENCY			JURISDICTION OF RECOVERY LAW ENFORCEMENT AGENCY		
VEH. / GUN / ETC.	STATUS <input type="checkbox"/> STOLEN <input type="checkbox"/> VEHICLE <input type="checkbox"/> RECOVERED <input type="checkbox"/> GUN <input type="checkbox"/> FOUND <input type="checkbox"/> BOAT <input type="checkbox"/> VICTIM <input type="checkbox"/> LICENSE PLATE <input type="checkbox"/> SUSPECT <input type="checkbox"/> SECURITIES/BONDS, STOCKS <input type="checkbox"/> TOWED <input type="checkbox"/> ARTICLE	LICENSE/REGISTRATION NO.	BOAT HULL NO. OR VIN NO.				
		SERIAL #	OWNER APPLIED #				
		YEAR OF REGISTRATION	YEAR OF EXPIRATION	YEAR	MAKE	TYPE	
		MODEL	STYLE	BRAND NAME	COLOR	CALIBER	
		NIC NO.	DENOMINATION	ISSUER	SECURITIES DATE		
		JURISDICTION OF THEFT LAW ENFORCEMENT AGENCY			JURISDICTION OF RECOVERY LAW ENFORCEMENT AGENCY		
REMARKS							
	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"/> ARRESTED UNDER 18 <input type="checkbox"/> EX-CLEAR UNDER 18 <input type="checkbox"/> UNFOUNDED <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	
	Sgt. S. Brinson	9-20-15	9801	Lt. D. Stanley	9-20-15	9612	
				FOLLOW-UP INVESTIGATION <input type="checkbox"/> NO <input type="checkbox"/> YES	OFFICER		

INCIDENT SUPPLEMENT

SC0100000	DISPATCH NUMBER 2015-015292	ORIGINAL CASE NUMBER	PAGE 5 OF 5 PAGES	NCC ENTRY	SNO	ENTL
<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 VICTIMS <input type="checkbox"/> ADDITIONAL OFFENDERS	<input type="checkbox"/> ADDITIONAL WITNESSES <input type="checkbox"/> ADDITIONAL SUBJECTS	<input type="checkbox"/> ADDITIONAL STOLEN PROPERTY <input type="checkbox"/> ADDITIONAL RECOVERED PROPERTY		

NARRATIVE

She was not able to see anything. I obtained her information and allowed her to leave and go to her residence. She left her vehicle in the parking lot. Deputy Gillard located the owner/driver of the white Chevy pick up truck, David Anglin. He obtained his information and advised him to remain on scene to speak to detectives. Deputy Gillard also maintained the Crime Scene Log. I noticed several shell casings around the white Chevy pick up truck and also observed that the driver side window had been shattered.

I spoke to the employee at the A-1 Food Store, David Drayton, who stated he was able to pull up video of the incident. I watched the video with him and observed a grey vehicle on Ranger Dr. pull up, stop and then take off. A subject in the vehicle was shooting toward people in the parking lot. I was unable to see any of the subject's inside the vehicle. The vehicle was a grey, 4 door sedan, possibly a Buick.

I then met with NCPD officers at 2826 Ranger Drive. I was advised that a black male subject had been transported to MUSC due to a single gun shot wound to his side/rib area. NCPD identified the subject as Sharod Young, DOB: 4-12-80. According to a witness, Rita Chavis, Young was standing beside her vehicle (Pontiac Torrent) in the front yard of 2826 Ranger Drive talking to her when he said he was shot. She stated she did not see any vehicles go by and did not see anyone shoot him. Due to conflicting witness statements it was unclear exactly where Young was when he was shot. Chavis was sitting in the driver seat and there were two subjects in the back seat. Da'Shawn Grant stated he was sitting in rear driver side seat and did not see anyone shooting and did not hear any gunshots. Vincent Simmons stated he was sitting in the rear passenger seat and also did not see anyone shooting and did not hear any gunshots.

I then notified CID and the CDO of the incident. CID and FSU responded to the scene. Information was passed on to Sgt. Bryant and Sgt. James.

PROPERTY EST.	TYPE (GROUP)					TOTAL VALUE	JURISDICTION OF THEFT LAW ENFORCEMENT AGENCY
	STOLEN						
	DAMAGED						
	BURNED						JURISDICTION OF RECOVERY LAW ENFORCEMENT AGENCY
	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) Sgt. S. Brinson	DATE 9-20-15	BADGE NUMBER 9801	APPROVING OFFICER Lt. D. Stanley	DATE 9-20-15	BADGE NUMBER 9612
				FOLLOW-UP INVESTIGATION <input type="checkbox"/> YES <input type="checkbox"/> NO	OFFICER	