

INCIDENT REPORT

SC010000		DISPATCH NUMBER 2016-018418	ORIGINAL CASE NUMBER		PAGE 1 OF 3 PAGES		NCIC ENTRY	SHERIFF INQ.	ENT.					
EVENT	INCIDENT TYPE 1. Armed Robbery		INCIDENT CODE	COMPLETED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	FORCED ENTRY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	PREMISE TYPE Convenience Store		UNITS ENTERED	TYPE VICTIM <input 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: 10141 N Highway 17, McClellanville SC				ZIP CODE 29458	WEAPON TYPE Pistol									
BEGINNING INCIDENT DATE 12/04/16		24 HR. CLOCK 2209	ENDING INCIDENT DATE 12/04/16	24 HR. CLOCK 1014	DISP. DATE 12/04/16	DISP. TIME 2211	TIME ARRIVED 2224	DEPART TIME 0100	TRACT #					
COMPLAINANT	NAME: (LAST, FIRST, MIDDLE) Jackson, Jerrica Brett			RELATIONSHIP TO SUBJECT #1 Unk #2 #3			RESIDENT J	RACE W	SEX F	AGE 25	DOB [REDACTED]	ETH N		
	HEIGHT 506	WEIGHT 285	HAIR BRO	EYES BRO	FACIAL HAIR, SCARS, TATTOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC. None			DRIVERS LIC / ID & STATE [REDACTED]		SOCIAL SECURITY # [REDACTED]				
	ADDRESS # 10244		STREET NAME N Highway 17		CITY McClellanville	STATE SC	ZIP CODE 29458	DAY PHONE [REDACTED]	EVENING PHONE Same		H			
	OCCUPATION Cashier			EMPLOYER Dollar General		ALIAS N/A	NIC # N/A							
VICTIM #1	NAME: (LAST, FIRST, MIDDLE) Dollar General			RELATIONSHIP TO SUBJECT #1 #2 #3			RESIDENT J	RACE	SEX	AGE	DOB	ETH		
	HEIGHT	WEIGHT	HAIR XXX	EYES XXX	FACIAL HAIR, SCARS, TATTOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC.			DRIVERS LIC / ID & STATE		SOCIAL SECURITY #				
	ADDRESS # 10141		STREET NAME N Highway 17		CITY McClellanville	STATE SC	ZIP CODE 29458	DAY PHONE [REDACTED]	EVENING PHONE Same		H			
	<input type="checkbox"/> VISIBLE INJURY		<input type="checkbox"/> NO <input type="checkbox"/> YES		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			
SUBJ. I.D.	<input type="checkbox"/> COMPLAINANT		NAME: (LAST, FIRST, MIDDLE) McKinney, Jonathan David			RELATIONSHIP TO SUBJECT #1 Unk #2 #3			RESIDENT J	RACE W	SEX M	AGE 20	DOB [REDACTED]	ETH N
	<input type="checkbox"/> SUSPECT #		HEIGHT 600	WEIGHT 156	HAIR BRO	EYES BRO	FACIAL HAIR, SCARS, TATTOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC. None			DRIVERS LIC / ID & STATE [REDACTED]		SOCIAL SECURITY # [REDACTED]		
	<input checked="" type="checkbox"/> SUBJECT # 1		ADDRESS # 10073		STREET NAME Randall St		CITY McClellanville	STATE SC	ZIP CODE 29458	DAY PHONE [REDACTED]	EVENING PHONE Same		H	
	<input type="checkbox"/> WITNESS #		<input type="checkbox"/> VISIBLE INJURY		<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES		COMPLAINT OF NON-VISIBLE INJURIES <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES		USING ALCOHOL <input checked="" 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 N/A			(C) CHARGE N/A										
	(B) CHARGE N/A			(D) CHARGE N/A										
NARRATIVE	See incident supplement.													
PROPERTY EST.	TYPE (GROUP)	US Currency	N/A	N/A	N/A	N/A	N/A	N/A	TOTAL VALUE	JURISDICTION OF THEFT LAW ENFORCEMENT AGENCY CCSO				
	STOLEN	[REDACTED]							[REDACTED]					
	DAMAGED													
	BURNED									JURISDICTION OF RECOVERY LAW ENFORCEMENT AGENCY N/A				
	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) C.B. Arrington			DATE 12/04/16	BADGE NUMBER 10783	APPROVING OFFICER Sgt C. Barton			DATE 12/04/16	BADGE NUMBER 10271				
						FOLLOW-UP INVESTIGATION		<input type="checkbox"/> YES <input type="checkbox"/> NO						

PERSON SUPPLEMENT

SC0100000 DISPATCH NUMBER 2016-018418 ORIGINAL CASE NUMBER PAGE 2 OF 3 PAGES 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. COMPLAINANT VICTIM # SUSPECT # 1 SUBJECT # WITNESS # WANTED WARRANT ARREST RUNAWAY MISSING PERSON

NAME: (LAST, FIRST, MIDDLE) Unknown
 RELATIONSHIP TO SUBJECT #1 #2 #3
 RESIDENT RACE SEX AGE DOB ETH J B M
 HEIGHT WEIGHT HAIR EYES FACIAL HAIR, SCARS, TATTOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC. DRIVERS LIC / ID & STATE SOCIAL SECURITY #
 602 Unk BRO BRO
 ADDRESS # STREET NAME CITY STATE ZIP CODE DAY PHONE EVENING PHONE
 VISIBLE INJURY YES NO COMPLAINT OF NON-VISIBLE INJURIES NO YES USING ALCOHOL UNK NO YES DRUGS NO YES TYPE UNK TWO-MAN VEHICLE DETECTIVE SPLASMT ALONE ONE-MAN VEHICLE OTHER ASSISTED
 OCCUPATION EMPLOYER ALIAS NIC #

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

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

NAME: (LAST, FIRST, MIDDLE) Ray, Margot Marie
 RELATIONSHIP TO SUBJECT #1 #2 #3
 RESIDENT RACE SEX AGE DOB ETH J W F 32 [REDACTED] N
 HEIGHT WEIGHT HAIR EYES FACIAL HAIR, SCARS, TATTOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC. DRIVERS LIC / ID & STATE SOCIAL SECURITY #
 509 170 BRO BRO None [REDACTED] Withheld
 ADDRESS # STREET NAME CITY STATE ZIP CODE DAY PHONE EVENING PHONE
 290 Myrtle Ave Pawleys Island SC 29585 [REDACTED] H Same H
 VISIBLE INJURY YES NO COMPLAINT OF NON-VISIBLE INJURIES NO YES USING ALCOHOL UNK NO YES DRUGS NO YES TYPE UNK TWO-MAN VEHICLE DETECTIVE SPLASMT ALONE ONE-MAN VEHICLE OTHER ASSISTED
 OCCUPATION EMPLOYER ALIAS NIC #
 District Manager Dollar General N/A N/A

ARREST (A) CHARGE (C) CHARGE
 N/A N/A
 (B) CHARGE (D) CHARGE
 N/A N/A

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

NAME: (LAST, FIRST, MIDDLE)
 RELATIONSHIP TO SUBJECT #1 #2 #3
 RESIDENT RACE SEX AGE DOB ETH J
 HEIGHT WEIGHT HAIR EYES FACIAL HAIR, SCARS, TATTOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC. DRIVERS LIC / ID & STATE SOCIAL SECURITY #
 XXX XXX
 ADDRESS # STREET NAME CITY STATE ZIP CODE DAY PHONE EVENING PHONE
 VISIBLE INJURY YES NO COMPLAINT OF NON-VISIBLE INJURIES NO YES USING ALCOHOL UNK NO YES DRUGS NO YES TYPE UNK TWO-MAN VEHICLE DETECTIVE SPLASMT ALONE ONE-MAN VEHICLE OTHER ASSISTED
 OCCUPATION EMPLOYER ALIAS NIC #

ARREST (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) DATE BADGE NUMBER APPROVING OFFICER DATE BADGE NUMBER
 C.B. Arrington 12/04/16 10783 Sgt C. Barton 12/04/16 10271
 FOLLOW-UP INVESTIGATION YES NO OFFICER

INCIDENT SUPPLEMENT

SC010000	DISPATCH NUMBER 2016-018418	ORIGINAL CASE NUMBER	PAGE <u>3</u> OF <u>3</u> PAGES	NCIC ENTRY	INO.	ENT.
<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		

(McClellanville) On 12/04/16 I, Deputy C.B. Arrington and Deputy J. Hightower responded to 10141 N Highway 17 located in the McClellanville area of Charleston County in reference to an armed robbery to the Dollar General. While enroute dispatch advised that the suspect shot at the front door and robbed the store while two employees were inside. Upon arrival myself and Hightower made contact with the two employees at the front door of the business, we cleared the interior of the store with no results. We secured the scene with crime scene tape and started a crime scene log.

EMS was requested to the scene to check on employee Jonathan McKinney who had been assaulted. McKinney advised they had just closed the business and locked the front door when the suspect who McKinney described as black male wearing a black hoodie, black gloves and a ski mask came through the front door. He stated the suspect grabbed him and told him to take everything out of the safe, the suspect then hit him in the head with a pistol twice. When he asked the suspect if he wanted the coins he struck him in the head a few more times. He stated the phone to the business rang and the suspect left out of the front door. McKinney was checked by EMS on scene but refused transport.

I spoke to the 2nd employee/complainant, who advised she was in the back of the business when the suspect came in at which point she called 911. Sgt Barton arrived on scene and requested CID respond. Written statements were obtained by both employees. Detective McCauley arrived on scene and took custody of the scene. The district manager, Margo Ray for Dollar general responded to the scene to re-secure the store. Ray advised that [REDACTED] in US currency was taken from the safe. End of report.

NARRATIVE

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) C.B. Arrington			DATE 12/04/16		BADGE NUMBER 10783		APPROVING OFFICER Sgt C. Barton			DATE 12/04/16		BADGE NUMBER 10271
FOLLOW-UP INVESTIGATION <input type="checkbox"/> YES <input type="checkbox"/> NO										OFFICER			