

INCIDENT REPORT

SC0100000		DISPATCH NUMBER 2016-015192		ORIGINAL CASE NUMBER		PAGE 1 OF 5 PAGES		SHERIFF		INQ.		ENT.																	
EVENT	1. Disturbance on Bus				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 Bus		TYPE VICTIM <input checked="" type="checkbox"/> INDIVIDUAL <input 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. Assault and Battery 3rd						<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		Bus																		
	3.						<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO																				
	INCIDENT LOCATION: 8900 Hwy 17 S, McCellanville SC																												
		ZIP CODE 29458		WEAPON TYPE fist																									
BEGINNING INCIDENT DATE 9/21/16		24 HR. CLOCK 1228		ENDING INCIDENT DATE 9/21/16		24 HR. CLOCK 1320		DISP. DATE 9/22/16		DISP. TIME 0700		TIME ARRIVED 0700		DEPART TIME 1200															
TRACT #																													
COMPLAINANT	NAME: (LAST, FIRST, MIDDLE) Sheppard, Carmen				RELATIONSHIP TO SUBJECT #1 Aquaintanc #2 Aquaintanc #3 Aquaintanc				RESIDENT J		RACE W		SEX F		AGE 50		DOB 1/13/66		ETH N										
	HEIGHT 5'4		WEIGHT 120		HAIR BRO		EYES HAZ		FACIAL HAIR, SCARS, TATOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC. [REDACTED]																				
	ADDRESS # 8900				STREET NAME Hwy 17S				CITY McCellanville		STATE SC		ZIP CODE 29458		DAY PHONE [REDACTED]		EVENING PHONE [REDACTED]		SOCIAL SECURITY # unknown										
	OCCUPATION School				EMPLOYER CCSD				ALIAS N/A		NIC # N/A																		
VICTIM #1	NAME: (LAST, FIRST, MIDDLE) Graham, James H.				RELATIONSHIP TO SUBJECT #1 Aquaintanc #2 Aquaintanc #3 Aquaintanc				RESIDENT J		RACE W		SEX M		AGE 56		DOB 6/30/61		ETH N										
	HEIGHT 611		WEIGHT 220		HAIR GRY		EYES BLU		FACIAL HAIR, SCARS, TATOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC. [REDACTED]																				
	ADDRESS # 8900				STREET NAME Hwy 17S				CITY McCellanville		STATE SC		ZIP CODE 29458		DAY PHONE [REDACTED]		EVENING PHONE [REDACTED]		SOCIAL SECURITY # Unknown										
	<input type="checkbox"/> VISIBLE INJURY <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES				<input type="checkbox"/> COMPLAINT OF NON-VISIBLE INJURIES <input checked="" type="checkbox"/> NO <input 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														
EXPLAIN OCCUPATION Teacher				EMPLOYER CCSD				ALIAS Unknown		NIC # N/A																			
SUBJ. I.D.	<input type="checkbox"/> COMPLAINANT				NAME: (LAST, FIRST, MIDDLE) Kinloch, Salina				RELATIONSHIP TO SUBJECT #1 Aquaintanc #2 Aquaintanc #3 Aquaintanc				RESIDENT J		RACE W		SEX F		AGE 43		DOB 6/12/73		ETH N						
	<input type="checkbox"/> VICTIM #		<input type="checkbox"/> SUSPECT #		<input checked="" type="checkbox"/> SUBJECT # 1		<input type="checkbox"/> WITNESS #		<input type="checkbox"/> WANTED		<input type="checkbox"/> WARRANT		<input type="checkbox"/> ARREST		<input type="checkbox"/> RUNAWAY		<input type="checkbox"/> MISSING PERSON												
	HEIGHT 504		WEIGHT 185		HAIR BLD		EYES HAZ		FACIAL HAIR, SCARS, TATOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC. [REDACTED]																				
	ADDRESS # 3500				STREET NAME Thomas Carlo Blvd.				CITY Mt. Pleasant		STATE SC		ZIP CODE 29466		DAY PHONE [REDACTED]		EVENING PHONE [REDACTED]		SOCIAL SECURITY # Unknown										
<input type="checkbox"/> VISIBLE INJURY <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES				<input type="checkbox"/> COMPLAINT OF NON-VISIBLE INJURIES <input checked="" type="checkbox"/> NO <input 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															
EXPLAIN OCCUPATION Driver				EMPLOYER Durham School Services				ALIAS Unknown		NIC # N/A																			
ARREST	(A) CHARGE N/A				(C) CHARGE																								
	(B) CHARGE				(D) CHARGE																								
NARRATIVE	See Incident Supplement																												
PROPERTY EST.	TYPE (GROUP)										TOTAL VALUE					JURISDICTION OF THEFT LAW ENFORCEMENT AGENCY													
	STOLEN																												
	DAMAGED																												
	BURNED																												
RECOVERED																													
SEIZED																													
ADMINISTRATIVE	SUBJECT IDENTIFIED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO					SUBJECT LOCATED <input checked="" type="checkbox"/> YES <input 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"/> 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) Deputy McLean					DATE 9/22/16					BADGE NUMBER 9299					APPROVING OFFICER Sgt. Brinson					DATE 9/22/16					BADGE NUMBER 9801			
										FOLLOW-UP INVESTIGATION <input type="checkbox"/> YES <input type="checkbox"/> NO										OFFICER									

INCIDENT SUPPLEMENT

J. Al Cannon, Jr.
Sheriff

SC0100000	DISPATCH NUMBER 2016-015192	ORIGINAL CASE NUMBER	PAGE 2 OF 5 PAGES	NCIC ENTRY	ING.	ENT.
ORIGINAL <input checked="" type="checkbox"/> REPORT MODIFIES <input type="checkbox"/> ORIGINAL	SUPPLEMENTAL <input type="checkbox"/> REPORT CASE STATUS <input type="checkbox"/> CHANGE	ADDITIONAL <input type="checkbox"/> VICTIMS ADDITIONAL <input type="checkbox"/> OFFENDERS	ADDITIONAL <input type="checkbox"/> WITNESSES ADDITIONAL <input type="checkbox"/> SUBJECTS	ADDITIONAL <input type="checkbox"/> STOLEN PROPERTY ADDITIONAL <input type="checkbox"/> RECOVERED PROPERTY		

On 9-21-16 at school dismissal while students were boarding the bus two juveniles, 10 year old 5th grader [REDACTED] and 9 year old 4th grader [REDACTED] had a physical altercation towards the rear of the bus. As their older siblings entered the bus, 12 year old 7th grader [REDACTED] and 13 year old 8th grader [REDACTED] they both rushed to the rear of the bus as well. The Durham bus security video captured the incident and showed [REDACTED] beginning to assault [REDACTED] and [REDACTED] being pulled away by his brother [REDACTED] and placed behind [REDACTED] towards the front of the bus. During this incident [REDACTED] and [REDACTED] brother, 11 year old 6th grader [REDACTED] entered the bus as the bus driver is trying to get students to exit the bus for their safety. [REDACTED] ignoring the drivers instructions attempted to push past her as she used her body to block him. [REDACTED] held onto the bus stairway handrail and refused to move. Mrs. Sheppard had entered the bus and told the students involved to exit the bus so students [REDACTED] and [REDACTED] walked to the front but could not exit due to the disturbance on the stairway. The driver honked the horn several times to get the attention of staff members in the bus loop. Mrs. Sheppard was in the aisle of the bus trying to keep [REDACTED] back as he was still trying to get to the [REDACTED] brothers. At this time the bus driver and several students were standing in front of the drivers area unable to move in either direction. Mr. Graham and Mr. Zirrillo responded and due to [REDACTED] blocking the doorway told him to move so they could assist Mrs. Sheppard. [REDACTED] continued to hold onto the railing and refused to exit the stairwell. Mr. Graham squeezed by him and again told him to exit the bus. At this time students were still trapped in the drivers area and aisle. [REDACTED] ignored the staff and continued to block the stairs. Mr. Graham was standing on the stair above [REDACTED] began to take [REDACTED] by the hands removing them from the handrail to escort him off. As he was stepping down to escort him off the bus, still holding his hands, [REDACTED] yelled for Mr. Graham to get off him. At that point [REDACTED] using his arm and elbow to push into Mrs. Sheppard's shoulder and neck area, forced her to the side and he jumped up to the front seat. The security video shows [REDACTED] arm extended, making contact with Mr. Graham's shoulder while yelling at him. [REDACTED] continued to yell at Mr. Graham and then turned his attention to [REDACTED] who was still stuck at the front of the bus. Darrin appears to be standing on the bus seat and moves towards [REDACTED] in a threatening manner. After seeing this Mr. Graham walked back to the stairs and took [REDACTED] by his torso under his armpits moving him away from [REDACTED] as [REDACTED] is telling [REDACTED] he isn't scared of him. [REDACTED] begins to yell at Mr. Graham again and swings once missing him and a second time making contact with the top of Mr. Grahams shoulder. Once [REDACTED] struck Mr. Graham with his closed fist he then came off the seat and pushed past Mr. Graham to exit the bus. Mr. Graham told staff to let him go however the staff had not secured the [REDACTED] brothers safely in the building so staff had to again block [REDACTED] from them. Once the juveniles were secured the staff notified the parents and arrangements were made to have a meeting the following morning with the Principal who was not at the school during the incident. Durham Bus Services provided the bus video the following morning. This investigation is ongoing.

PROPERTY EST.	TYPE (GROUP)						TOTAL VALUE	JURISDICTION OF THEFT LAW ENFORCEMENT AGENCY
	STOLEN							
	DAMAGED							
	BURNED							
	RECOVERED							JURISDICTION OF RECOVERY LAW ENFORCEMENT AGENCY
	SEIZED							
ADMINISTRATIVE	SUBJECT IDENTIFIED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	SUBJECT LOCATED <input checked="" type="checkbox"/> YES <input 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		
	Deputy McLean	9/22/16	9299	Sgt. Brinson	9/22/16	9801		
				FOLLOW-UP INVESTIGATION <input type="checkbox"/> YES <input type="checkbox"/> NO	OFFICER			

PERSON SUPPLEMENT

SC0100000		DISPATCH NUMBER 2016-015192		ORIGINAL CASE NUMBER		PAGE 3 OF 5 PAGES		NCIC ENTRY		INO. ENT.	
<input checked="" type="checkbox"/> ORIGINAL REPORT <input type="checkbox"/> MODIFIES REPORT		<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			

SUBJ. I.D. ARREST SUBJ. I.D. ARREST SUBJ. I.D. ARREST REMARKS ADMINISTRATIVE	<input type="checkbox"/> COMPLAINANT <input type="checkbox"/> VICTIM # <input checked="" type="checkbox"/> SUSPECT # 3 <input type="checkbox"/> WITNESS # <input type="checkbox"/> WANTED <input type="checkbox"/> WARRANT <input type="checkbox"/> ARREST <input type="checkbox"/> RUNAWAY <input type="checkbox"/> MISSING PERSON	NAME: (LAST, FIRST, MIDDLE) Zirrillo, Vincent			RELATIONSHIP TO SUBJECT #1 Aquaintance #2 Aquaintance #3 Aquaintance			RESIDENT	RACE	SEX	AGE	DOB	ETH	
	HEIGHT WEIGHT HAIR EYES 610 177 BLK BRO			FACIAL HAIR, SCARS, TATTOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC.			DRIVERS LIC / ID & STATE			SOCIAL SECURITY # Unknown				
	ADDRESS # 8900			STREET NAME Hwy 17S			CITY McCellanville			STATE SC			ZIP CODE 29458	
	DAY PHONE [REDACTED]			EVENING PHONE [REDACTED]			B			B				
	<input type="checkbox"/> VISIBLE INJURY YES <input checked="" type="checkbox"/> NO			<input type="checkbox"/> COMPLAINT OF NON-VISIBLE INJURIES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES			USING ALCOHOL UNK			<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> UNK				
	EXPLAIN			DRUGS <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES TYPE <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"/>				
	OCCUPATION Teacher			EMPLOYER CCSD			ALIAS Unknown			NIC # N/A				
	(A) CHARGE N/A			(C) CHARGE			(B) CHARGE			(D) CHARGE				
	(A) CHARGE N/A			(C) CHARGE			(B) CHARGE			(D) CHARGE				

SUBJ. I.D. ARREST SUBJ. I.D. ARREST SUBJ. I.D. ARREST REMARKS ADMINISTRATIVE	<input type="checkbox"/> COMPLAINANT <input type="checkbox"/> VICTIM # <input checked="" type="checkbox"/> SUSPECT # 1 <input type="checkbox"/> WITNESS # <input type="checkbox"/> WANTED <input type="checkbox"/> WARRANT <input type="checkbox"/> ARREST <input type="checkbox"/> RUNAWAY <input type="checkbox"/> MISSING PERSON	NAME: (LAST, FIRST, MIDDLE) [REDACTED]			RELATIONSHIP TO SUBJECT #1 [REDACTED] #2 Aquaintance #3 Aquaintance			RESIDENT	RACE	SEX	AGE	DOB	ETH	
	HEIGHT WEIGHT HAIR EYES [REDACTED]			FACIAL HAIR, SCARS, TATTOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC.			DRIVERS LIC / ID & STATE None			SOCIAL SECURITY # Unknown				
	ADDRESS # [REDACTED]			STREET NAME [REDACTED]			CITY [REDACTED]			STATE SC			ZIP CODE [REDACTED]	
	DAY PHONE [REDACTED]			EVENING PHONE [REDACTED]			B			H				
	<input type="checkbox"/> VISIBLE INJURY YES <input checked="" type="checkbox"/> NO			<input type="checkbox"/> COMPLAINT OF NON-VISIBLE INJURIES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES			USING ALCOHOL UNK			<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> UNK				
	EXPLAIN			DRUGS <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES TYPE <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"/>				
	OCCUPATION Student 4th grade			EMPLOYER CCSD			ALIAS Unknown			NIC # N/A				
	(A) CHARGE N/A			(C) CHARGE			(B) CHARGE			(D) CHARGE				
	(A) CHARGE N/A			(C) CHARGE			(B) CHARGE			(D) CHARGE				

SUBJ. I.D. ARREST SUBJ. I.D. ARREST SUBJ. I.D. ARREST REMARKS ADMINISTRATIVE	<input type="checkbox"/> COMPLAINANT <input type="checkbox"/> VICTIM # <input checked="" type="checkbox"/> SUSPECT # 2 <input type="checkbox"/> WITNESS # <input type="checkbox"/> WANTED <input type="checkbox"/> WARRANT <input type="checkbox"/> ARREST <input type="checkbox"/> RUNAWAY <input type="checkbox"/> MISSING PERSON	NAME: (LAST, FIRST, MIDDLE) [REDACTED]			RELATIONSHIP TO SUBJECT #1 [REDACTED] #2 [REDACTED] #3 [REDACTED]			RESIDENT	RACE	SEX	AGE	DOB	ETH	
	HEIGHT WEIGHT HAIR EYES [REDACTED]			FACIAL HAIR, SCARS, TATTOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC.			DRIVERS LIC / ID & STATE None			SOCIAL SECURITY # Unknown				
	ADDRESS # [REDACTED]			STREET NAME [REDACTED]			CITY [REDACTED]			STATE [REDACTED]			ZIP CODE [REDACTED]	
	DAY PHONE [REDACTED]			EVENING PHONE [REDACTED]			B			H				
	<input type="checkbox"/> VISIBLE INJURY YES <input checked="" type="checkbox"/> NO			<input type="checkbox"/> COMPLAINT OF NON-VISIBLE INJURIES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES			USING ALCOHOL UNK			<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> UNK				
	EXPLAIN			DRUGS <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES TYPE <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"/>				
	OCCUPATION Student 5th grade			EMPLOYER CCSD			ALIAS Unknown			NIC # N/A				
	(A) CHARGE N/A			(C) CHARGE			(B) CHARGE			(D) CHARGE				
	(A) CHARGE N/A			(C) CHARGE			(B) CHARGE			(D) CHARGE				

SUBJECT IDENTIFIED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		SUBJECT LOCATED <input checked="" type="checkbox"/> YES <input 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) Deputy Mclean			DATE 9/22/2016		BADGE NUMBER 9299		APPROVING OFFICER Sgt. Brinson			DATE 9/22/2016		BADGE NUMBER 9801	
FOLLOW-UP INVESTIGATION			<input type="checkbox"/> YES <input type="checkbox"/> NO		OFFICER								

PERSON SUPPLEMENT

SC0100000		DISPATCH NUMBER 2016-015192		ORIGINAL CASE NUMBER		PAGE 4 OF 5 PAGES		NIC ENTRY		INQ. ENT.	
<input checked="" type="checkbox"/> ORIGINAL REPORT <input type="checkbox"/> MODIFIES REPORT		<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			

SUBJ. I.D.	<input type="checkbox"/> COMPLAINANT		NAME (LAST, FIRST, MIDDLE)		RELATIONSHIP TO SUBJECT			RESIDENT	RACE	SEX	AGE	DOB	ETH
	<input type="checkbox"/> VICTIM #				#1	#2	#3						
	<input checked="" type="checkbox"/> SUSPECT # 3		FACIAL HAIR, SCARS, TATOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC.		DRIVERS LIC / ID & STATE			SOCIAL SECURITY					
	<input type="checkbox"/> SUBJECT #				None			Unknown					
	<input type="checkbox"/> WITNESS #												
	<input type="checkbox"/> WANTED												
	<input type="checkbox"/> WARRANT												
	<input type="checkbox"/> ARREST												
	<input type="checkbox"/> RUNAWAY												
	<input type="checkbox"/> MISSING PERSON												
		STREET NAME		CITY	STATE	ZIP CODE	DAY PHONE	EVENING PHONE					
		<input type="checkbox"/> VISIBLE INJURY		<input checked="" type="checkbox"/> NO	<input type="checkbox"/> NON-VISIBLE INJURIES		<input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES		<input type="checkbox"/> TWO-MAN VEHICLE			
		EXPLAIN		<input checked="" type="checkbox"/> NO		<input type="checkbox"/> YES		<input type="checkbox"/> DETECTIVE SPLASMIT		<input type="checkbox"/> ALONE			
		OCCUPATION		EMPLOYER		ALIAS		NIC #					
		Student 7 th grade		CCSD		Unknown		N/A					
(A) CHARGE		N/A		(C) CHARGE									
(B) CHARGE				(D) CHARGE									

SUBJ. I.D.	<input type="checkbox"/> COMPLAINANT		NAME (LAST, FIRST, MIDDLE)		RELATIONSHIP TO SUBJECT			RESIDENT	RACE	SEX	AGE	DOB	ETH
	<input type="checkbox"/> VICTIM #				#1	#2	#3						
	<input checked="" type="checkbox"/> SUSPECT # 4		FACIAL HAIR, SCARS, TATOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC.		DRIVERS LIC / ID & STATE			SOCIAL SECURITY					
	<input type="checkbox"/> SUBJECT #				None			Unknown					
	<input type="checkbox"/> WITNESS #												
	<input type="checkbox"/> WANTED												
	<input type="checkbox"/> WARRANT												
	<input type="checkbox"/> ARREST												
	<input type="checkbox"/> RUNAWAY												
	<input type="checkbox"/> MISSING PERSON												
		STREET NAME		CITY	STATE	ZIP CODE	DAY PHONE	EVENING PHONE					
		<input type="checkbox"/> VISIBLE INJURY		<input checked="" type="checkbox"/> NO	<input type="checkbox"/> NON-VISIBLE INJURIES		<input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES		<input type="checkbox"/> TWO-MAN VEHICLE			
		EXPLAIN		<input checked="" type="checkbox"/> NO		<input type="checkbox"/> YES		<input type="checkbox"/> DETECTIVE SPLASMIT		<input type="checkbox"/> ALONE			
		OCCUPATION		EMPLOYER		ALIAS		NIC #					
		Student 6 th grade		CCSD		Unknown		N/A					
(A) CHARGE		N/A		(C) CHARGE									
(B) CHARGE				(D) CHARGE									

SUBJ. I.D.	<input type="checkbox"/> COMPLAINANT		NAME (LAST, FIRST, MIDDLE)		RELATIONSHIP TO SUBJECT			RESIDENT	RACE	SEX	AGE	DOB	ETH
	<input type="checkbox"/> VICTIM #				#1	#2	#3						
	<input checked="" type="checkbox"/> SUSPECT # 3		FACIAL HAIR, SCARS, TATOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC.		DRIVERS LIC / ID & STATE			SOCIAL SECURITY					
	<input type="checkbox"/> SUBJECT #				None			Unknown					
	<input type="checkbox"/> WITNESS #												
	<input type="checkbox"/> WANTED												
	<input type="checkbox"/> WARRANT												
	<input type="checkbox"/> ARREST												
	<input type="checkbox"/> RUNAWAY												
	<input type="checkbox"/> MISSING PERSON												
		STREET NAME		CITY	STATE	ZIP CODE	DAY PHONE	EVENING PHONE					
		<input type="checkbox"/> VISIBLE INJURY		<input checked="" type="checkbox"/> NO	<input type="checkbox"/> NON-VISIBLE INJURIES		<input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES		<input type="checkbox"/> TWO-MAN VEHICLE			
		EXPLAIN		<input checked="" type="checkbox"/> NO		<input type="checkbox"/> YES		<input type="checkbox"/> DETECTIVE SPLASMIT		<input type="checkbox"/> ALONE			
		OCCUPATION		EMPLOYER		ALIAS		NIC #					
		Student 8 th grade		CCSD		Unknown		N/A					
(A) CHARGE		N/A		(C) CHARGE									
(B) CHARGE				(D) CHARGE									

SUBJECT IDENTIFIED		SUBJECT LOCATED		ACTIVE		ADM. CLOSED		ARRESTED UNDER 16		EX-CLEAR UNDER 16			
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> UNFOUNDED		<input type="checkbox"/> ADM. CLOSED		<input type="checkbox"/> ARRESTED 16 AND OVER		<input type="checkbox"/> EX-CLEAR 16 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	
Deputy McLean				9/22/2016		9299		Sgt. Brinson				9/22/2016	
								FOLLOW-UP INVESTIGATION				BADGE NUMBER	
								<input type="checkbox"/> YES <input type="checkbox"/> NO				9801	