

INCIDENT DATA

INCIDENT/INVESTIGATION REPORT

Agency Name ASHEVILLE POLICE DEPARTMENT

OCA 11-001186

ORI NC 0110100

Date / Time Reported 01/11/2011 19:18 Hrs.

#1 Crime Incident(s) Assault - Simple

At Found 01/11/2011 19:18 Hrs.

Last Known Secure 01/11/2011 19:15 Hrs.

#2 Crime Incident

Location of Incident 375 Haywood Rd, Asheville NC 28806

Offense Tract APD

#3 Crime Incident

Premise Type OTHER RETAIL ESTABLISHMENT

Victim Residence Type Single Family Multi Family

MO How Attacked or Committed

Forcible Yes No

Weapon / Tools Personal Weapons (hands, Feet)

VICTIM # of Victims 1 Type Person Business Society Government Financial Institute Religious L.E. Officer Line of Duty Other/Unknown

Injury None Minor Loss of Teeth Broken Bones Severe Lacerations Internal Unconscious Other Major

Drug/Alcohol Use: Yes Unknown No N/A

VICTIM VI Victim/Business Name (Last, First, Middle) JENKINS, REGINA JURELLE

Victim of Crime # 1

DOB / Age 07/03/1970 40

Race W Sex F

Relationship To Offender ST

Resident Status Resident Non-Resident Unknown

Home Address 18 MIDWOOD DR, Asheville, NC 28804

Home Phone 828-250-0948

Employer Name/Address DR LAUGHLIN FAIRVIEW RD

Business Phone 828-628-3504

Mobile Phone

VYR Make Model Style Color Lic/Lis Vin

OTHERS CODES: V- Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim)

OTHERS Type: Person Business Society Government Financial Institute Religious L.E. Officer Line of Duty Other/Unknown

OTHERS Code Name (Last, First, Middle) Victim of Crime # DOB / Age Race Sex

OTHERS Home Address Home Phone

OTHERS Employer Name/Address Business Phone Mobile Phone

OTHERS Type: Person Business Society Government Financial Institute Religious L.E. Officer Line of Duty Other/Unknown

OTHERS Code Name (Last, First, Middle) Victim of Crime # DOB / Age Race Sex

OTHERS Home Address Home Phone

OTHERS Employer Name/Address Business Phone Mobile Phone

PROPERTY Status Codes L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found

Table with columns: Victim #, DCI, Status, Value, OJ, QTY, Property Description, Make/Model, Serial Number

Number of Vehicles Stolen 0 Number Vehicles Recovered 0

ID Officer ID# MITCHELL, N. R. (PATR, AWST) (A2339) Officer Signature

Supervisor Signature HENSLEY, M. G. (PATR, AWST) (A2008)

Status Complainant Signature

Case Status Further Investigation Inactive Closed/Cleared Closed/Leads Exhausted

Case Disposition: Unfounded Located Extradition Declined Cleared by Arrest Refuse to Cooperate Cleared by Arrest by Another Agency Death of Offender Prosecution Declined

INCIDENT/INVESTIGATION REPORT

Asheville Police Department

Page 1

OCA 11-001186

Status Codes L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found

DCI	Status	Quantity	Type Measure	Suspected Type	Check up to 3 types of activity for each						
					Possess	Buy	Sale	Mfg	Importing	Operating	

O F F E N D E R	Offender Used Alcohol/Drugs <input type="checkbox"/> Yes <input type="checkbox"/> Unk <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Computer <input type="checkbox"/> Yes <input type="checkbox"/> Unk <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	Offender 1 Age: 42 Race: W Sex: F	Offender 2 Age: Race: Sex:	Offender 3 Age: Race: Sex:	Primary Offender Resident Status <input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <input type="checkbox"/> Unknown
	Offender 4 Age: Race: Sex:	Offender 5 Age: Race: Sex:	Offender 6 Age: Race: Sex:		

S U S P E C T	Name (Last, First, Middle) <i>SHOOK, REBECCA JANE</i>				Also Known As <i>CLARK, REBECCA, SHOOK,</i>				Home Address <i>12 Herron Cove Rd, Weaverville NC</i>				
	Occupation				Business Address <i>UNEMPLOYED</i>								
	DOB. / Age		Race	Sex	Hgt	Wgt	Build	Hair Color	Hair Style	Hair Length	Eye Color	Glasses	
	<i>01/13/1968 44</i>		<i>W</i>	<i>F</i>	<i>505</i>	<i>180</i>		<i>BRO</i>			<i>GRN</i>		
	Scars, Marks, Tattoos, or other distinguishing features (i.e. limp, foreign accent, voice characteristics) <i>PRCD: RIGH EAR 02, LEFT EAR 03, NAVEL, TATT: CNTR BACK "LOYAL LOVE", RIGH ANKLE DOLPHIN, LEFT</i>												
Hat		Jacket		Shirt/Blouse		Tie/Scarf		Coat/Suit		Pants/Dress/Skirt		Socks	Shoes
Was Suspect Armed?			Type of Weapon				Direction of Travel				Mode of Travel		
VYR	Make	Model		Style		Color		Lic/Lis		Vin			

WIT NESS	Name (Last, First, Middle)				D.O.B.	Age	Race	Sex	Mobile Phone		
	Home Address				Home Phone		Employer			Phone	

Suspect Hate / Bias Motivated: Yes No *None*

N A R R A T I V E	Officers responded to the report of a simple assault.
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Incident Report Additional Suspect List

Asheville Police Department

OCA: 11001186

Additional Suspect List

S U S P E C T	Name (Last, First, Middle) <i>Shook, Rebecca Jane</i>		Also Known As <i>CLARK, REBECCA SHOOK; SHOOK, REBECCA HANEY;</i>			Home Address <i>12 HERRON COVE RD WEAVERVILLE, NC 28787</i>	
	Empl/Occu <i>UNEMPLOYED,</i>			Business Address			
	DOB. / Age <i>01/13/1968 42-</i>	Race <i>W</i>	Sex <i>F</i>	Eth <i>N</i>	Hgt	Wgt	Physical Char
	Scars, Marks, Tattoos, or other distinguishing features <i>TATT CNTR BACK / "LOYAL LOVE"; PRCD NAVEL; PRCD LEFT EAR / 03; PRCD RIGH EAR / 02; TATT LEFT HAND /</i>						
	Type of Weapon						
Dir of Travel			Mode of Travel				
VehYr/Make/Model		Style	Color	Lic/Lis		Vin	

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Agency Name
ASHEVILLE POLICE DEPARTMENT

INCIDENT/INVESTIGATION REPORT

OCA
11-014747

Date / Time Reported S M T W T F S
Month Day Yr Time
06 | 04 | 2011 | 01:43 Hrs.

Last Known Secure S M T W T F S
Month Day Yr Time
06 | 04 | 2011 | 01:30 Hrs.

ORI
NC 0110100

#1 Crime Incident(s) *Assault Inflicting Serious Injury* Att Com At Found S M T W T F S
Month Day Yr Time *06 | 04 | 2011 | 01:40 Hrs.*

#2 Crime Incident Att Com Location of Incident *375 Haywood Rd, Asheville NC 28806* Offense Tract *APD*

#3 Crime Incident Att Com Premise Type *BAR/NIGHTCLUB/LOUNGE* Victim Residence Type Single Family Multi Family

MO

How Attacked or Committed Forcible Yes No N/A Weapon / Tools *Personal Weapons (hands, Feet)*

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of Victims *1* Type Person Business Society Government Financial Institute Religious L.E. Officer Line of Duty Other/Unknown Injury None Minor Loss of Teeth Broken Bones Severe Lacerations Internal Unconscious Other Major Drug/Alcohol Use: Yes Unknown No N/A

V1 Victim/Business Name (Last, First, Middle) *YERMAN, EDWARD LANE* Victim of Crime # *1,* DOB / Age *31* Race *W* Sex *M* Relationship To Offender *ST* Resident Status Resident Non-Resident Unknown

Home Address *6 SNYDER DR, Asheville, NC 28804* Home Phone *828-423-4534*

Employer Name/Address *MELLOW MUSHROOM* Business Phone *828-236-9800* Mobile Phone

VYR Make Model Style Color Lic/Lis Vin

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CODES: V- Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim)

Type: Person Business Society Government Financial Institute Religious L.E. Officer Line of Duty Other/Unknown

Code *IO* Name (Last, First, Middle) *BALLARD, ANGELA RENE* Victim of Crime # Home Address *84 Queen Rd Candler, NC 28715* Home Phone *828-450-0108*

Employer Name/Address *Mikes Side Pocket, 375 Haywood Rd* Business Phone Mobile Phone *828-329-9149*

Type: Person Business Society Government Financial Institute Religious L.E. Officer Line of Duty Other/Unknown

Code *IO* Name (Last, First, Middle) *COOK, BETTY KING* Victim of Crime # DOB / Age *55* Race *W* Sex *F*

Home Address *520 East St Candler, NC 28715* Home Phone *828-665-7715*

Employer Name/Address *Mikes Side Pocket, 375 Haywood Rd Asheville, Nc 28806* Business Phone *828-273-8480* Mobile Phone *828-273-5156*

Status Codes

L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found (Check "OJ" column if recovered for other jurisdiction)

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Victim #	DCI	Status	Value	OJ	QTY	Property Description	Make/Model	Serial Number

Number of Vehicles Stolen *0* Number Vehicles Recovered *0*

ID

Officer *HALFORD, E. L. (PATR, AWST) (A2316)* Officer Signature Supervisor Signature *WELBORN, E. F. (CID, CID) (A2520)*

Status

Complainant Signature Case Status Further Investigation Inactive Closed/Cleared Closed/Leads Exhausted Case Disposition: Unfounded Located Extradition Declined Cleared by Arrest Refuse to Cooperate Cleared by Arrest by Another Agency Death of Offender Prosecution Declined

Incident Report Additional Name List

Asheville Police Department

OCA: 11-014747

Additional Name List

Page 1

NameCode/#	Name (Last, First, Middle)	Victim of Crime #	DOB	Age	Race	Sex
1) IO 3	JONES, SHARON LYNN		03/28/1963	48	W	F
	Address 109 Brookshire Rd , Leicester, NC 28748		H: 828-458-3009			
	Empl/Addr Disabled		B:			
			Mobile #:			
2) WI 1	RICE, ROY LEE		01/04/1973	38	W	M
	Address 1521 E Franklin St Apt. C103, Chapel Hill, NC 2751		H: 919-260-7695			
	Empl/Addr		B:			
			Mobile #:			

INCIDENT/INVESTIGATION REPORT

Asheville Police Department

OCA 11-014747

Status Codes	L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found												
D R U G S	DCI	Status	Quantity	Type Measure	Suspected Type	Check up to 3 types of activity for each							
						Possess	Buy	Sale	Mfg	Importing	Operating		
O F F E N D E R	Offender Used		Offender 1			Offender 2			Offender 3			Primary Offender Resident Status <input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <input type="checkbox"/> Unknown	
	Alcohol/Drugs <input type="checkbox"/> Yes <input type="checkbox"/> Unk <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A		Age: 49 Race: W Sex: M			Age: Race: Sex:			Age: Race: Sex:				
	Computer <input type="checkbox"/> Yes <input type="checkbox"/> Unk <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A		Offender 4 Age: Race: Sex:			Offender 5 Age: Race: Sex:			Offender 6 Age: Race: Sex:				
S U S P E C T	Name (Last, First, Middle) <i>JONES, RONALD DEAN</i>				Also Known As <i>ZZZCONSOLIDATED,</i>				Home Address <i>109 Brookshire Rd, Leicester NC 28748</i>				
	Occupation <i>ROOFING</i>				Business Address <i>SELF EMPLOYED</i>								
	DOB. / Age <i>01/17/1962 / 50</i>		Race <i>W</i>	Sex <i>M</i>	Hgt <i>507</i>	Wgt <i>196</i>	Build	Hair Color <i>SALT</i>	Hair Style	Hair Length	Eye Color <i>BRO</i>	Glasses	
	Scars, Marks, Tattoos, or other distinguishing features (i.e. limp, foreign accent, voice characteristics) <i>TATT: UPPL ARM PANTHER, LFOR ARM SKULL, UPPR ARM SKULL, UPPL BACK SKULL, RFOR ARM NAKED</i>												
	Hat	Jacket	Shirt/Blouse	Tie/Scarf	Coat/Suit	Pants/Dress/Skirt	Socks	Shoes					
	Was Suspect Armed?		Type of Weapon				Direction of Travel			Mode of Travel			
	VYR	Make	Model	Style	Color	Lic/Lis	Vin						
WIT NESS	Name (Last, First, Middle) <i>RICE, ROY LEE</i>				D.O.B. <i>01/04/1973</i>	Age <i>38</i>	Race <i>W</i>	Sex <i>M</i>	Mobile Phone				
	Home Address <i>1521 E FRANKLIN ST C103, CHAPEL HILL NC 27514</i>				Home Phone <i>919-260-7695</i>		Employer			Phone <i>- - -</i>			
Suspect Hate / Bias Motivated: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>Unknown (Offender's motivation not known)</i>													
N A R R A T I V E	At approximately 0140hrs on 06/04/2011, victim was confronted and assaulted by an unknown subject.												

Incident Report Additional Suspect List

Asheville Police Department

OCA: 11014747

Additional Suspect List

Name (Last, First, Middle) <i>Jones, Ronald Dean</i>		Also Known As <i>ZZZCONSOLIDATED, 000000469; JONES, ARNOLD</i>			Home Address <i>109 BROOKSHIRE RD LEICESTER, NC 28748</i>	
Empl/Occu <i>SELF EMPLOYED ,ROOFING</i>		Business Address				
DOB. / Age <i>01/17/1962 49-</i>	Race <i>W</i>	Sex <i>M</i>	Eth <i>N</i>	Hgt	Wgt	Physical Char
Scars, Marks, Tattoos, or other distinguishing features <i>TATT RFOR ARM / NAKED WOMAN; TATT UPPL BACK / SKULL; TATT UPPR ARM / SKULL; TATT LFOR ARM / SKULL; TATT</i>						
Type of Weapon						
Dir of Travel		Mode of Travel				
VehYr/Make/Model	Style	Color	Lic/Lis		Vin	

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INCIDENT DATA

INCIDENT/INVESTIGATION REPORT

Agency Name
ASHEVILLE POLICE DEPARTMENT

ORI
NC 0110100

OCA
12-003492

Date / Time Reported
Month Day Yr Time
02 | 04 | 2012 | 22:14 Hrs.

Last Known Secure
Month Day Yr Time
02 | 04 | 2012 | 22:14 Hrs.

#1	Crime Incident(s) Assault - Simple	<input type="checkbox"/> Att	At Found Month Day Yr Time 02 04 2012 22:14 Hrs.	<input checked="" type="checkbox"/> Com	Location of Incident 375 Haywood Rd, Asheville NC 28806	Offense Tract APD
#2	Crime Incident	<input type="checkbox"/> Att		<input type="checkbox"/> Com		
#3	Crime Incident	<input type="checkbox"/> Att		<input type="checkbox"/> Com	Premise Type BAR/NIGHTCLUB/LOUNGE	Victim Residence Type <input type="checkbox"/> Single Family <input type="checkbox"/> Multi Family

MO How Attacked or Committed

Forcible Yes No N/A

Weapon / Tools
Personal Weapons (hands, Feet,

VICTIM

of Victims **1** Type Person Business
 Society Government Financial Institute
 Religious L.E. Officer Line of Duty Other/Unknown

Injury None Minor Loss of Teeth
 Broken Bones Severe Lacerations
 Internal Unconscious Other Major

Drug/Alcohol Use:
 Yes Unknown
 No N/A

V1 Victim/Business Name (Last, First, Middle)
LLOYD, DONNIE EDWIN

Victim of Crime # **1** DOB / Age **09/13/1952 59** Race **W** Sex **M** Relationship To Offender **AQ** Resident Status
 Resident Non-Resident Unknown

Home Address
20 DAVIDSON DR, Asheville, NC 28801 Home Phone

Employer Name/Address
UNEMPLOYED Business Phone Mobile Phone

VYR Make Model Style Color Lic/Lis Vin

OTHERS

INVOLED

CODES: V- Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim)

Type: Person Business Society Government Financial Institute Religious L.E. Officer Line of Duty Other/Unknown

Code	Name (Last, First, Middle)	Victim of Crime #	DOB / Age	Race	Sex

Home Address Home Phone

Employer Name/Address Business Phone Mobile Phone

Type: Person Business Society Government Financial Institute Religious L.E. Officer Line of Duty Other/Unknown

Code	Name (Last, First, Middle)	Victim of Crime #	DOB / Age	Race	Sex

Home Address Home Phone

Employer Name/Address Business Phone Mobile Phone

Status Codes L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found
 (Check "OJ" column if recovered for other jurisdiction)

PROPERTY

Victim #	DCI	Status	Value	OJ	QTY	Property Description	Make/Model	Serial Number

Number of Vehicles Stolen **0** Number Vehicles Recovered **0**

ID Officer **CREASMAN, K. W. (PATR, AWST) (A2822)** ID# **(A2822)** Officer Signature

Supervisor Signature
PETERSON, J. A. (PATR, AWST) (A2609)

Status Complainant Signature

Case Status Further Investigation Inactive Closed/Cleared Closed/Leads Exhausted

Case Disposition: Unfounded Located Extradition Declined
 Cleared by Arrest Refuse to Cooperate
 Cleared by Arrest by Another Agency
 Death of Offender Prosecution Declined

INCIDENT/INVESTIGATION REPORT

Asheville Police Department

OCA 12-003492

Status Codes L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found

DCI	Status	Quantity	Type Measure	Suspected Type	Check up to 3 types of activity for each						
					Possess	Buy	Sale	Mfg	Importing	Operating	

OFFENDER	Offender Used Alcohol/Drugs <input type="checkbox"/> Yes <input type="checkbox"/> Unk <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Computer <input type="checkbox"/> Yes <input type="checkbox"/> Unk <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	Offender 1 Age: 58 Race: W Sex: M	Offender 2 Age: Race: Sex:	Offender 3 Age: Race: Sex:	Offender 4 Age: Race: Sex:	Offender 5 Age: Race: Sex:	Offender 6 Age: Race: Sex:	Primary Offender Resident Status <input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <input type="checkbox"/> Unknown
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S U S P E C T	Name (Last, First, Middle) <i>JORDAN, DONALD EUGENE</i>				Also Known As <i>ZZZCONSOLIDATED,</i>				Home Address <i>19 Monte Vista Rd - 2, Candler NC</i>				
	Occupation				Business Address <i>UNEMPLOYED</i>								
	DOB. / Age <i>12/23/1953 58</i>		Race <i>W</i>	Sex <i>M</i>	Hgt <i>511</i>	Wgt <i>210</i>	Build	Hair Color <i>GRY</i>	Hair Style	Hair Length	Eye Color <i>BLU</i>	Glasses	
	Scars, Marks, Tattoos, or other distinguishing features (i.e. limp, foreign accent, voice characteristics) <i>TATT: LFOR ARM EAGLE</i>												
	Hat		Jacket		Shirt/Blouse		Tie/Scarf		Coat/Suit		Pants/Dress/Skirt		Socks
Was Suspect Armed?			Type of Weapon				Direction of Travel				Mode of Travel		
VYR	Make	Model	Style	Color	Lic/Lis	Vin							

WIT NESS	Name (Last, First, Middle)				D.O.B.	Age	Race	Sex	Mobile Phone
	Home Address				Home Phone	Employer			Phone

Suspect Hate / Bias Motivated: Yes No *Unknown (Offender`s motivation not known)*

N A R R A T I V E	<p>On Saturday, 02/04/2012 at 2214 Hours Officer Creasman was dispatched to 375 Haywood Rd in reference to a simple assault.</p>
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Incident Report Additional Suspect List

Asheville Police Department

OCA: 12003492

Additional Suspect List

S U S P E C T	Name (Last, First, Middle) <i>Jordan, Donald Eugene</i>		Also Known As <i>ZZZCONSOLIDATED, 000000297; JORDAN, GENE;</i>			Home Address <i>19 MONTE VISTA RD - 2 CANDLER, NC 28715-9602</i>	
	Empl/Occu <i>UNEMPLOYED,</i>			Business Address			
	DOB. / Age <i>12/23/1953 58-</i>	Race <i>W</i>	Sex <i>M</i>	Eth <i>N</i>	Hgt	Wgt	Physical Char
	Scars, Marks, Tattoos, or other distinguishing features <i>TATT LFOR ARM / EAGLE</i>						
	Type of Weapon						
	Dir of Travel			Mode of Travel			
VehYr/Make/Model	Style	Color	Lic/Lis		Vin		

INCIDENT DATA

INCIDENT/INVESTIGATION REPORT

Agency Name
ASHEVILLE POLICE DEPARTMENT

ORI
NC 0110100

OCA
12-003496

Date / Time Reported S M T W T F S
 Month Day Yr Time
02 | 04 | 2012 | 22:52 Hrs.

#1	Crime Incident(s) Assault - Simple	<input type="checkbox"/> Att <input checked="" type="checkbox"/> Com	At Found Month Day Yr Time 02 04 2012 22:51 Hrs.	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> T <input type="checkbox"/> F <input type="checkbox"/> S	Last Known Secure Month Day Yr Time 02 04 2012 22:50 Hrs.
#2	Crime Incident	<input type="checkbox"/> Att <input type="checkbox"/> Com	Location of Incident 375 Haywood Rd, Asheville NC 28806		Offense Tract APD
#3	Crime Incident	<input type="checkbox"/> Att <input type="checkbox"/> Com	Premise Type RESTAURANT	Victim Residence Type <input type="checkbox"/> Single Family <input type="checkbox"/> Multi Family	

MO How Attacked or Committed
Weapon/Hands, Fist, Feet, Etc., Presence Of Victim/On Premises, Force Used/Pushed / Shoved.

Forcible Yes No N/A

Weapon / Tools
Personal Weapons (hands, Feet,

VICTIM

of Victims **1** Type Person Business
 Society Government Financial Institute
 Religious L.E. Officer Line of Duty Other/Unknown

Injury None Minor Loss of Teeth
 Broken Bones Severe Lacerations
 Internal Unconscious Other Major

Drug/Alcohol Use:
 Yes Unknown
 No N/A

V1 Victim/Business Name (Last, First, Middle)
JONES, RONALD DEAN

Victim of Crime # **1** DOB / Age **50** Race **W** Sex **M** Relationship To Offender **UN** Resident Status
 Resident Non-Resident Unknown

Home Address **109 BROOKSHIRE RD, Leicester, NC 28748** Home Phone **828-669-2693**

Employer Name/Address **SELF EMPLOYED** Business Phone _____ Mobile Phone _____

VYR _____ Make _____ Model _____ Style _____ Color _____ Lic/Lis _____ Vin _____

CODES: V- Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim)

Type: Person Business Society Government Financial Institute Religious L.E. Officer Line of Duty Other/Unknown

OTHERS

Code	Name (Last, First, Middle)	Victim of Crime #	DOB / Age	Race	Sex
Home Address		Home Phone			
Employer Name/Address		Business Phone		Mobile Phone	

INVOLED

Code	Name (Last, First, Middle)	Victim of Crime #	DOB / Age	Race	Sex
Home Address		Home Phone			
Employer Name/Address		Business Phone		Mobile Phone	

Status Codes L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found
 (Check "OJ" column if recovered for other jurisdiction)

PROPERTY

Victim #	DCI	Status	Value	OJ	QTY	Property Description	Make/Model	Serial Number
	PC	NONR	\$0.00		1	2004 RED, XTV6375 NC	CHEV Cavalier	1G1JC12FX47367514

Number of Vehicles Stolen **0** Number Vehicles Recovered **0**

Officer ID# SIMPSON, D. G. (PATR, AWST) (A2834)	Officer Signature	Supervisor Signature PETERSON, J. A. (PATR, AWST) (A2609)
Complainant Signature	Case Status <input type="checkbox"/> Further Investigation <input type="checkbox"/> Inactive <input type="checkbox"/> Closed/Cleared <input checked="" type="checkbox"/> Closed/Leads Exhausted	Case Disposition: <input type="checkbox"/> Unfounded <input type="checkbox"/> Located <input type="checkbox"/> Extradition Declined <input type="checkbox"/> Cleared by Arrest <input type="checkbox"/> Refuse to Cooperate <input type="checkbox"/> Cleared by Arrest by Another Agency <input type="checkbox"/> Death of Offender <input type="checkbox"/> Prosecution Declined

Incident Report Additional Name List

Asheville Police Department

OCA: 12-003496

NameCode/#	Name (Last, First, Middle)	Victim of Crime #	DOB	Age	Race	Sex
1) WI 1	MILLS, WILLIAM DAVID		06/10/1980	31	W	M
	Address 302 New Leicester Hwy Apt H Apt. C, Asheville					H: 828-712-6894
	Empl/Addr Dominoes, Patton Ave, Asheville, Nc					B: 828-253-3311
						Mobile #:

INCIDENT/INVESTIGATION REPORT

Asheville Police Department

OCA 12-003496

Status Codes	L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found																			
D R U G S	DCI	Status	Quantity	Type Measure	Suspected Type					Check up to 3 types of activity for each										

O F F E N D E R	Offender Used	<input type="checkbox"/> Yes <input type="checkbox"/> Unk <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	Offender 1	Offender 2	Offender 3	Primary Offender Resident Status <input type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <input type="checkbox"/> Unknown
	Alcohol/Drugs	Age: Race: Sex:	Age: Race: Sex:	Age: Race: Sex:		
	Computer	<input type="checkbox"/> Yes <input type="checkbox"/> Unk <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	Offender 4	Offender 5	Offender 6	
			Age: Race: Sex:	Age: Race: Sex:	Age: Race: Sex:	

S U S P E C T	Name (Last, First, Middle)				Also Known As				Home Address					
	Occupation				Business Address									
	DOB. / Age		Race	Sex	Hgt	Wgt	Build	Hair Color	Hair Style	Hair Length	Eye Color	Glasses		
	Scars, Marks, Tattoos, or other distinguishing features (i.e. limp, foreign accent, voice characteristics)													
	Hat		Jacket		Shirt/Blouse		Tie/Scarf		Coat/Suit		Pants/Dress/Skirt		Socks	Shoes
	Was Suspect Armed?		Type of Weapon				Direction of Travel				Mode of Travel			
	VYR	Make	Model	Style	Color	Lic/Lis			Vin					
	Name (Last, First, Middle)				D.O.B.	Age	Race	Sex	Mobile Phone					
	Home Address				Home Phone		Employer			Phone				

WIT NESS	Name (Last, First, Middle) D.O.B. Age Race Sex Mobile Phone <i>MILLS, WILLIAM DAVID</i> <i>06/10/1980</i> <i>31</i> <i>W</i> <i>M</i>										
	Home Address				Home Phone		Employer			Phone	
	<i>302 NEW LEICESTER HWY APT H APT C, ASHEVILLE</i>				<i>828-712-6894</i>		<i>DOMINOES</i>			<i>828-253-3311</i>	

N A R R A T I V E	Suspect Hate / Bias Motivated: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>Unknown (Offender`s motivation not known)</i>										
	On 2-4-2012, an assault was reported by said reporting party at said location.										

INCIDENT DATE

INCIDENT/INVESTIGATION REPORT

Agency Name
ASHEVILLE POLICE DEPARTMENT

ORI
NC 0110100

OCA
12-006312

Date / Time Reported
Month Day Yr **03 | 02 | 2012** Time **21:35** Hrs.

Last Known Secure
Month Day Yr **03 | 02 | 2012** Time **21:35** Hrs.

#1 Crime Incident(s)
Assault W/deadly Weapon

#2 Crime Incident

#3 Crime Incident

Att Com

At Found
Month Day Yr **03 | 02 | 2012** Time **21:35** Hrs.

Location of Incident
375 Haywood Rd, Asheville NC 28806

Premise Type
OTHER RETAIL ESTABLISHMENT

Offense Tract
APD

Victim Residence Type
 Single Family Multi Family

MO How Attacked or Committed

Forcible Yes No N/A

Weapon / Tools
Blunt Object (club, Hammer, Et

VICTIM # of Victims **2** Type Person Business Society Government Financial Institute Religious L.E. Officer Line of Duty Other/Unknown

Injury None Minor Loss of Teeth Broken Bones Severe Lacerations Internal Unconscious Other Major

Drug/Alcohol Use:
 Yes Unknown No N/A

VI Victim/Business Name (Last, First, Middle)
GRANIERI, MITCHELL DANE

Victim of Crime # **I,** DOB / Age **29** Race **W** Sex **M** Relationship To Offender **UN** Resident Status Resident Non-Resident Unknown

Home Address
33 UDELL CT, Asheville, NC 28806

Employer Name/Address
UNEMPLOYED Business Phone Mobile Phone

VYR Make Model Style Color Lic/Lis Vin

OTHERS CODES: V- Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim)

Type: Person Business Society Government Financial Institute Religious L.E. Officer Line of Duty Other/Unknown

Code Name (Last, First, Middle)
VI 2 SHELTON, JACQUELYN LEE-ESTHER

Victim of Crime # **I,** DOB / Age **20** Race **W** Sex **F**

Home Address
106 Riverview Dr Asheville, NC 28806

Employer Name/Address Business Phone Mobile Phone

Type: Person Business Society Government Financial Institute Religious L.E. Officer Line of Duty Other/Unknown

Code Name (Last, First, Middle)
RP SHELTON, JACQUELYN LEE-ESTHER

Victim of Crime # **20** DOB / Age **20** Race **W** Sex **F**

Home Address
106 Riverview Dr Asheville, NC 28806

Employer Name/Address Business Phone Mobile Phone

Status Codes L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found (Check "OJ" column if recovered for other jurisdiction)

Victim #	DCI	Status	Value	OJ	QTY	Property Description	Make/Model	Serial Number

Number of Vehicles Stolen **0** Number Vehicles Recovered **0**

ID Officer **RADFORD, K. T. (PATR, AWST) (A2362)** ID# **(A2362)** Officer Signature _____ Supervisor Signature **PETERSON, J. A. (PATR, AWST) (A2609)**

Status Complainant Signature _____ Case Status Further Investigation Inactive Closed/Cleared Closed/Leads Exhausted

Case Disposition: Unfounded Located Extradition Declined Cleared by Arrest Refuse to Cooperate Cleared by Arrest by Another Agency Death of Offender Prosecution Declined

INCIDENT/INVESTIGATION REPORT

Asheville Police Department

Page 1

OCA 12-006312

Status Codes L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found

DCI	Status	Quantity	Type Measure	Suspected Type	Check up to 3 types of activity for each					
					Possess	Buy	Sale	Mfg	Importing	Operating

O F F E N D E R	Offender Used		Offender 1			Offender 2			Offender 3			Primary Offender Resident Status <input type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <input checked="" type="checkbox"/> Unknown
	Alcohol/Drugs	<input type="checkbox"/> Yes <input type="checkbox"/> Unk <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	Age:	Race: <i>W</i>	Sex: <i>F</i>	Age:	Race: <i>W</i>	Sex: <i>M</i>	Age:	Race: <i>W</i>	Sex: <i>M</i>	
	Computer	<input type="checkbox"/> Yes <input type="checkbox"/> Unk <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	Offender 4			Offender 5			Offender 6			
			Age:	Race:	Sex:	Age:	Race:	Sex:	Age:	Race:	Sex:	

S U S P E C T	Name (Last, First, Middle)				Also Known As				Home Address					
	Occupation				Business Address									
	DOB. / Age		Race	Sex	Hgt	Wgt	Build	Hair Color	Hair Style	Hair Length	Eye Color	Glasses		
			<i>W</i>	<i>M</i>										
	Scars, Marks, Tattoos, or other distinguishing features (i.e. limp, foreign accent, voice characteristics)													
	Hat		Jacket		Shirt/Blouse		Tie/Scarf		Coat/Suit		Pants/Dress/Skirt		Socks	Shoes
	Was Suspect Armed?		Type of Weapon				Direction of Travel				Mode of Travel			
VYR	Make	Model	Style		Color	Lic/Lis		Vin						
<i>0</i>														

WIT NESS	Name (Last, First, Middle)				D.O.B.	Age	Race	Sex	Mobile Phone
	Home Address				Home Phone	Employer			Phone

Suspect Hate / Bias Motivated: Yes No *None*

N A R R A T I V E	<p>On the dates and times listed in the report, Officers responded to Memorial Mission Hospital, and subsequently to 375 Haywood Rd, Mike`s Tavern, in reference to an assault.</p>
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Incident Report Additional Suspect List

Asheville Police Department

OCA: 12006312

Additional Suspect List

S U S P E C T	Name (Last, First, Middle) <i>* No name *</i>			Also Known As			Home Address			
	Empl/Occu				Business Address					
	DOB. / Age		Race <i>W</i>	Sex <i>F</i>	Eth	Hgt	Wgt	Physical Char		
	Scars, Marks, Tattoos, or other distinguishing features									
	Type of Weapon									
	Dir of Travel			Mode of Travel						
Veh Yr/Make/Model		Style	Color	Lic/Lis		Vin				

Incident Report Additional Suspect List

Asheville Police Department

OCA: 12006312

Additional Suspect List

Page 3

S U S P E C T	Name (Last, First, Middle) <i>* No name *</i>		Also Known As			Home Address		
	Empl/Occu			Business Address				
	DOB. / Age		Race <i>W</i>	Sex <i>M</i>	Eth	Hgt	Wgt	Physical Char
	Scars, Marks, Tattoos, or other distinguishing features							
	Type of Weapon							
	Dir of Travel			Mode of Travel				
Veh Yr/Make/Model		Style	Color	Lic/Lis		Vin		

Incident Report Additional Suspect List

Asheville Police Department

OCA: 12006312

Additional Suspect List Page 4

S U S P E C T	Name (Last, First, Middle) <i>* No name *</i>			Also Known As			Home Address			
	Empl/Occu				Business Address					
	DOB. / Age		Race <i>W</i>	Sex <i>M</i>	Eth	Hgt	Wgt	Physical Char		
	Scars, Marks, Tattoos, or other distinguishing features									
	Type of Weapon									
	Dir of Travel				Mode of Travel					
	Veh Yr/Make/Model			Style	Color	Lic/Lis		Vin		

INCIDENT DATE

INCIDENT/INVESTIGATION REPORT

Agency Name
ASHEVILLE POLICE DEPARTMENT

ORI
NC 0110100

OCA
12-007937

Date / Time Reported
Month Day Yr Time
03 | 19 | 2012 | 17:55 Hrs.

#1 Crime Incident(s)
Assault - Simple

Att
 Com

At Found
Month Day Yr Time
03 | 19 | 2012 | 17:50 Hrs.

Location of Incident
375 Haywood Rd, Asheville NC 28806

Premise Type
BAR/NIGHTCLUB/LOUNGE

How Attacked or Committed

Forcible
 Yes
 No

Weapon / Tools
Personal Weapons (hands, Feet,

VICTIM

of Victims
1

Type
 Person
 Business
 Society
 Government
 Financial Institute
 Religious
 L.E. Officer Line of Duty
 Other/Unknown

Victim/Business Name (Last, First, Middle)
V1 TYREE, DONNA LESSER

Home Address
8 VIOLA LN, Swannanoa, NC 28778

Employer Name/Address
UNEMPLOYED

Injury
 None
 Minor
 Loss of Teeth
 Broken Bones
 Severe Lacerations
 Internal
 Unconscious
 Other Major

Drug/Alcohol Use:
 Yes
 Unknown
 No
 N/A

Victim of Crime #
1

DOB / Age
11/26/1965 46

Race
W

Sex
F

Relationship To Offender
ST

Resident Status
 Resident
 Non-Resident
 Unknown

Business Phone

Mobile Phone

Vin

OTHERS

CODES: V- Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim)

Type: Person Business Society Government Financial Institute Religious L.E. Officer Line of Duty Other/Unknown

Code
IO

Name (Last, First, Middle)
COOK, BETTY KING

Victim of Crime #

DOB / Age
55

Race
W

Sex
F

Home Address
520 East St Candler, NC 28715

Home Phone
828-665-7715

Employer Name/Address
Mikes Side Pocket, 375 Haywood Rd Asheville, Nc 28806

Business Phone
828-273-8480

Mobile Phone
828-273-5156

Type: Person Business Society Government Financial Institute Religious L.E. Officer Line of Duty Other/Unknown

Code

Name (Last, First, Middle)

Victim of Crime #

DOB / Age

Race

Sex

Home Address

Home Phone

Employer Name/Address

Business Phone

Mobile Phone

INVOLE

Status Codes L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found (Check "OJ" column if recovered for other jurisdiction)

PROPERTY

Victim #	DCI	Status	Value	OJ	QTY	Property Description	Make/Model	Serial Number

Number of Vehicles Stolen *0* Number Vehicles Recovered *0*

ID Officer *MITCHELL, N. R. (PATR, AWST) (A2339)* ID# *(A2339)* Officer Signature
Supervisor Signature
HENSLEY, M. G. (PATR, AWST) (A2008)

Status Complainant Signature
Case Status
 Further Investigation
 Inactive
 Closed/Cleared
 Closed/Leads Exhausted
Case Disposition:
 Unfounded
 Located
 Extradition Declined
 Cleared by Arrest
 Refuse to Cooperate
 Cleared by Arrest by Another Agency
 Death of Offender
 Prosecution Declined

INCIDENT/INVESTIGATION REPORT

Asheville Police Department

OCA 12-007937

Status Codes L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found

DCI	Status	Quantity	Type Measure	Suspected Type	Check up to 3 types of activity for each						
					Possess	Buy	Sale	Mfg	Importing	Operating	

O F F E N D E R	Offender Used	<input type="checkbox"/> Yes <input type="checkbox"/> Unk	Offender 1			Offender 2			Offender 3			Primary Offender Resident Status <input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <input type="checkbox"/> Unknown
	Alcohol/Drugs	<input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	Age: 43	Race: W	Sex: F	Age:	Race:	Sex:	Age:	Race:	Sex:	
	Computer	<input type="checkbox"/> Yes <input type="checkbox"/> Unk <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	Offender 4			Offender 5			Offender 6			
			Age:	Race:	Sex:	Age:	Race:	Sex:	Age:	Race:	Sex:	

S U S P E C T	Name (Last, First, Middle) <i>PEGG, DONNA MARIE</i>				Also Known As <i>STANLEY, DONNA,</i>				Home Address <i>344 Old Mars Hill Hwy, Weaverville NC</i>			
	Occupation				Business Address <i>UNEMPLOYED</i>							
	DOB. / Age	Race	Sex	Hgt	Wgt	Build	Hair Color	Hair Style	Hair Length	Eye Color	Glasses	
	<i>08/16/1968</i>	<i>43</i>	<i>W</i>	<i>F</i>	<i>507</i>	<i>143</i>	<i>BRO</i>			<i>BRO</i>		
	Scars, Marks, Tattoos, or other distinguishing features (i.e. limp, foreign accent, voice characteristics) <i>PRCD: EAR TWICE EACH, SCAR: RIGH EYE BROW, RIGH ABDOMEN SURGERY, RIGH BUTTOCKS</i>											
	Hat	Jacket	Shirt/Blouse	Tie/Scarf	Coat/Suit	Pants/Dress/Skirt	Socks	Shoes				
Was Suspect Armed?	Type of Weapon				Direction of Travel				Mode of Travel			
VYR	Make	Model	Style	Color	Lic/Lis	Vin						

WIT NESS	Name (Last, First, Middle)				D.O.B.	Age	Race	Sex	Mobile Phone
	Home Address				Home Phone	Employer			Phone

Suspect Hate / Bias Motivated: Yes No *None*

N A R R A T I V E	<p>On March 19, 2012 Officers responded to a report of an assault at Mikes bar on Haywood Rd. Upon the Officers arrival they found that one of the parties involved received minor injuries.</p>
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Incident Report Additional Suspect List

Asheville Police Department

OCA: 12007937

Additional Suspect List

S U S P E C T	Name (Last, First, Middle) <i>Pegg, Donna Marie</i>		Also Known As <i>STANLEY, DONNA TESNER; TESNER, DONNA MARIE;</i>			Home Address <i>344 OLD MARS HILL HWY WEAVERVILLE, NC 28787</i>	
	Empl/Occu <i>UNEMPLOYED,</i>			Business Address			
	DOB. / Age <i>08/16/1968 43-</i>	Race <i>W</i>	Sex <i>F</i>	Eth <i>N</i>	Hgt	Wgt	Physical Char
	Scars, Marks, Tattoos, or other distinguishing features <i>SCAR RIGH EYE BROW; PRCD EAR / TWICE EACH; SCAR RIGH BUTTOCKS; SCAR RIGH ABDOMEN / SURGERY</i>						
	Type of Weapon						
Dir of Travel		Mode of Travel					
VehYr/Make/Model	Style	Color	Lic/Lis		Vin		