

INCIDENT DATA

INCIDENT/INVESTIGATION REPORT

OCA 08-034555

Date / Time Reported				S	M	T	W	T	F	S
Month	Day	Yr	Time							
11	03	2008	21:07	Hrs.						

Last Known Secure				S	M	T	W	T	F	S
Month	Day	Yr	Time							
11	03	2008	21:07	Hrs.						

Agency Name
ASHEVILLE POLICE DEPARTMENT

ORI
NC 0110100

#1	Crime Incident(s) <i>Information Only</i>	<input type="checkbox"/> Att <input checked="" type="checkbox"/> Com	At Found Month Day Yr Time 11 03 2008 21:07 Hrs.	<input type="checkbox"/> Att <input type="checkbox"/> Com	Location of Incident <i>21 Klondyke Ave Apt. 21, Asheville NC 28801</i>	<input type="checkbox"/> Single Family <input type="checkbox"/> Multi Family
#2	Crime Incident					Offense Tract <i>APD</i>
#3	Crime Incident				Premise Type <i>PARKING LOT/AREA</i>	Victim Residence Type

MO How Attacked or Committed
Gang Firearms/Pistol, Weapon/Handgun

Forcible Yes N/A No
Weapon / Tools
Handgun

VICTIM

# of Victims <i>0</i>	Type <input type="checkbox"/> Person <input type="checkbox"/> Business <input type="checkbox"/> Society <input type="checkbox"/> Government <input type="checkbox"/> Financial Institute <input type="checkbox"/> Religious <input type="checkbox"/> L.E. Officer Line of Duty <input type="checkbox"/> Other/Unknown	Injury <input type="checkbox"/> None <input type="checkbox"/> Minor <input type="checkbox"/> Loss of Teeth <input type="checkbox"/> Broken Bones <input type="checkbox"/> Severe Lacerations <input type="checkbox"/> Internal <input type="checkbox"/> Unconscious <input type="checkbox"/> Other Major	Drug/Alcohol Use: <input type="checkbox"/> Yes <input type="checkbox"/> Unknown <input type="checkbox"/> No <input type="checkbox"/> N/A				
V1	Victim/Business Name (Last, First, Middle)	Victim of Crime #	DOB / Age	Race	Sex	Relationship To Offender	Resident Status <input type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <input type="checkbox"/> Unknown
Home Address						Home Phone	
Employer Name/Address				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: <input checked="" type="checkbox"/> Person <input type="checkbox"/> Business <input type="checkbox"/> Society <input type="checkbox"/> Government <input type="checkbox"/> Financial Institute <input type="checkbox"/> Religious <input type="checkbox"/> L.E. Officer Line of Duty <input type="checkbox"/> Other/Unknown				
Code Name (Last, First, Middle)	Victim of Crime #	DOB / Age	Race	Sex
<i>IO LUCAS, SEAN NMN</i>		<i>26</i>	<i>B</i>	<i>M</i>
Home Address <i>88 Klondyke Ave - A Asheville, NC 28801</i>		Home Phone <i>828-318-4500</i>		
Employer Name/Address <i>Unemployed</i>		Business Phone		Mobile Phone
Type: <input checked="" type="checkbox"/> Person <input type="checkbox"/> Business <input type="checkbox"/> Society <input type="checkbox"/> Government <input type="checkbox"/> Financial Institute <input type="checkbox"/> Religious <input type="checkbox"/> L.E. Officer Line of Duty <input type="checkbox"/> Other/Unknown				
Code Name (Last, First, Middle)	Victim of Crime #	DOB / Age	Race	Sex
<i>IO MILLER, JAMAL DESHAUN</i>		<i>22</i>	<i>B</i>	<i>M</i>
Home Address <i>19 Wilson Creek Dr Asheville, NC 28803</i>		Home Phone <i>828-298-1014</i>		
Employer Name/Address <i>Long Silvers, Biltmore Ave</i>		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 <i>SMITH, C. A. (PATR, PATR) (A2291)</i>	Officer Signature	Supervisor Signature <i>MAXWELL, L. (PATR, PATR) (A2606)</i>
Status	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 / Investigation - Case #: 08-034555

I was dispatched to shots being fired near Santee St. After speaking with a resident she advised she heard the shots coming from Klondyke Ave. I located a small group near the 21 building who stated they did not see or hear anything. One female later stated that there was a small incident involving a Jamal Miller who tried causing problems with the group. After searching the area I was unable to locate any shell casings or any persons injured.

INCIDENT DATA

INCIDENT/INVESTIGATION REPORT

OCA 08-035077

Date / Time Reported

S	M	T	W	T	F	S
Month	Day	Yr	Time			
11	07	2008	16:49	Hrs.		

Last Known Secure

S	M	T	W	T	F	S
Month	Day	Yr	Time			
11	07	2008	16:49	Hrs.		

Agency Name
ASHEVILLE POLICE DEPARTMENT

ORI
NC 0110100

#1	Crime Incident(s) Drug Offense - Felony	<input type="checkbox"/> Att <input checked="" type="checkbox"/> Com	At Found Month Day Yr Time 11 07 2008 16:49 Hrs.	<table border="1" style="font-size: x-small;"> <tr><td>S</td><td>M</td><td>T</td><td>W</td><td>T</td><td>F</td><td>S</td></tr> </table>	S	M	T	W	T	F	S	Last Known Secure Month Day Yr Time 11 07 2008 16:49 Hrs.	<table border="1" style="font-size: x-small;"> <tr><td>S</td><td>M</td><td>T</td><td>W</td><td>T</td><td>F</td><td>S</td></tr> </table>	S	M	T	W	T	F	S
S	M	T	W	T	F	S														
S	M	T	W	T	F	S														
#2	Crime Incident	<input type="checkbox"/> Att <input type="checkbox"/> Com	Location of Incident 3 S Tunnel Rd, Asheville NC 28805			Offense Tract APD														
#3	Crime Incident	<input type="checkbox"/> Att <input type="checkbox"/> Com	Premise Type ENCLOSED PARKING/DECK			Victim Residence Type <input type="checkbox"/> Single Family <input type="checkbox"/> Multi Family														

MO How Attacked or Committed Weapon / Tools
Personal Weapons (hands, Feet,

Forcible Yes No N/A

VICTIM

# of Victims 1	Type <input type="checkbox"/> Person <input checked="" type="checkbox"/> Business <input type="checkbox"/> Society <input type="checkbox"/> Government <input type="checkbox"/> Financial Institute <input type="checkbox"/> Religious <input type="checkbox"/> L.E. Officer Line of Duty <input type="checkbox"/> Other/Unknown	Injury <input type="checkbox"/> None <input type="checkbox"/> Minor <input type="checkbox"/> Loss of Teeth <input type="checkbox"/> Broken Bones <input type="checkbox"/> Severe Lacerations <input type="checkbox"/> Internal <input type="checkbox"/> Unconscious <input type="checkbox"/> Other Major	Drug/Alcohol Use: <input type="checkbox"/> Yes <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
Victim/Business Name (Last, First, Middle) V1 STATE OF NC		Victim of Crime # I,	DOB / Age ST
Home Address 100 COURT PLAZA, Asheville, NC 28801			Home Phone 828-259-5877
Employer Name/Address		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:	<input type="checkbox"/> Person <input type="checkbox"/> Business <input type="checkbox"/> Society <input type="checkbox"/> Government <input type="checkbox"/> Financial Institute <input type="checkbox"/> Religious <input type="checkbox"/> L.E. Officer Line of Duty <input type="checkbox"/> 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:	<input type="checkbox"/> Person <input type="checkbox"/> Business <input type="checkbox"/> Society <input type="checkbox"/> Government <input type="checkbox"/> Financial Institute <input type="checkbox"/> Religious <input type="checkbox"/> L.E. Officer Line of Duty <input type="checkbox"/> 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		

INVOLVED

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
1	61	Z	\$412.00		0	MONEY		
1	36	Z	\$1.00		1	CELL PHONES		
	PC	IMPD	\$20,000.00		1	2008 WHI, TYK9194 NC	MIIS Galant	4A3AB3GF38E022405

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

Officer ID# MORGAN, B. (PATR, DSU) (A2263)	Officer Signature	Supervisor Signature LAUFFER, E. (PATR, DSU) (A2580)
Complainant Signature	Case Status <input type="checkbox"/> Further Investigation <input type="checkbox"/> Inactive <input checked="" type="checkbox"/> Closed/Cleared <input type="checkbox"/> Closed/Leads Exhausted	Case Disposition: <input type="checkbox"/> Unfounded <input type="checkbox"/> Located <input type="checkbox"/> Extradition Declined <input checked="" 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 / Investigation - Case #: 08-035077

Officers set up a controlled buy at the Asheville Mall from the offender.

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INCIDENT/INVESTIGATION REPORT

Agency Name
ASHEVILLE POLICE DEPARTMENT

ORI
NC 0110100

OCA 08-036153

Date / Time Reported S M T W T F S
Month Day Yr Time
11 | 17 | 2008 | 14:08 Hrs.

#1	Crime Incident(s)	<input type="checkbox"/> Att	At Found	S M T W T F S	Last Known Secure	S M T W T F S
	Damage To Real Property	<input checked="" type="checkbox"/> Com	Month Day Yr Time	11 17 2008 08:00 Hrs.		Month Day Yr Time
#2	Crime Incident	<input type="checkbox"/> Att	Location of Incident			Offense Tract
#3	Crime Incident	<input type="checkbox"/> Att	Premise Type			Victim Residence Type
		<input type="checkbox"/> Com	100 Atkinson St, Asheville NC 28801			APD
		<input type="checkbox"/> Com	OTHER RESIDENCE - OTHER			<input type="checkbox"/> Single Family <input checked="" type="checkbox"/> Multi Family

MO How Attacked or Committed Forcible Yes N/A No Weapon / Tools **Not Applicable/none**

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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 **ASHEVILLE, HOUSING AUTHORITY** Victim of Crime # **1,** DOB / Age _____ Race _____ Sex _____ Relationship To Offender **ST** Resident Status Resident Non-Resident Unknown

Home Address **165 S FRENCH BROAD AVE, Asheville, NC 28801** Home Phone _____
Employer Name/Address _____ Business Phone _____ 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	Name (Last, First, Middle)	Victim of Crime #	DOB / Age	Race	Sex

Home Address _____ Home Phone _____
Employer Name/Address _____ Business Phone _____ Mobile Phone _____

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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)

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Victim #	DCI	Status	Value	OJ	QTY	Property Description	Make/Model	Serial Number
1	75	D	\$100.00		1	APARTMENT BUILDING		

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

ID	Officer DAVIS, M. H. (PATR, PATR) (A2246)	Officer Signature _____	Supervisor Signature BUDD, E. (PATR, PATR) (A2581)
Status	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 / Investigation - Case #: 08-036153

Unknown suspects spray painted graffiti on the outside of several apartment buildings at 100 Atkinson St.

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Agency Name
ASHEVILLE POLICE DEPARTMENT

ORI
NC 0110100

INCIDENT/INVESTIGATION REPORT

OCA
08-036146

Date / Time Reported S M T W T F S
 Month Day Yr Time
11 | 17 | 2008 | 12:53 Hrs.

#1	Crime Incident(s)	<input type="checkbox"/> Att <input checked="" type="checkbox"/> Com	At Found Month Day Yr Time 11 17 2008 12:53 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 11 17 2008 12:53 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
	Information Only					
#2	Crime Incident	<input type="checkbox"/> Att <input type="checkbox"/> Com	Location of Incident 50 Wilbar Ave, Asheville NC 28801			Offense Tract APD
#3	Crime Incident	<input type="checkbox"/> Att <input type="checkbox"/> Com	Premise Type PARKING LOT/AREA	Victim Residence Type <input type="checkbox"/> Single Family <input type="checkbox"/> Multi Family		

MO

How Attacked or Committed

Forcible Yes N/A No

Weapon / Tools
Unknown/not Stated

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# of Victims 0	Type <input type="checkbox"/> Person <input type="checkbox"/> Business <input type="checkbox"/> Society <input type="checkbox"/> Government <input type="checkbox"/> Financial Institute <input type="checkbox"/> Religious <input type="checkbox"/> L.E. Officer Line of Duty <input type="checkbox"/> Other/Unknown	Injury <input type="checkbox"/> None <input type="checkbox"/> Minor <input type="checkbox"/> Loss of Teeth <input type="checkbox"/> Broken Bones <input type="checkbox"/> Severe Lacerations <input type="checkbox"/> Internal <input type="checkbox"/> Unconscious <input type="checkbox"/> Other Major	Drug/Alcohol Use: <input type="checkbox"/> Yes <input type="checkbox"/> Unknown <input type="checkbox"/> No <input type="checkbox"/> N/A				
V1	Victim/Business Name (Last, First, Middle)	Victim of Crime #	DOB / Age	Race	Sex	Relationship To Offender	Resident Status <input type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <input type="checkbox"/> Unknown
Home Address						Home Phone	
Employer Name/Address					Business Phone	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 RP	Name (Last, First, Middle) HALLUM, LYDIA NANETTE	Victim of Crime #	DOB / Age 38	Race B	Sex F
Home Address 110 Spruce Hill Ln - Ap D Asheville, NC 28805			Home Phone 828-298-6257		
Employer Name/Address Housing Authority			Business Phone 828-582-7061	Mobile Phone	

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

Code IO	Name (Last, First, Middle) YOUNG, BOBBY JOE	Victim of Crime #	DOB / Age 19	Race B	Sex M
Home Address 50 Wilbar Ave - Ap4c Asheville, NC 28801			Home Phone 828-225-8160		
Employer Name/Address Unemployed			Business Phone	Mobile Phone	

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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 ID# **TOMASETTI, L. (CID, GSU) (A2247)** Officer Signature

Supervisor Signature **WELBORN, E. (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 / Investigation - Case #: 08-036146

Officers were called to a civil disturbance at Lee Walker Heights Apartments involving the apartment manager and a visitor to the complex. No enforcement action was taken.

INCIDENT DATE

Agency Name
ASHEVILLE POLICE DEPARTMENT

INCIDENT/INVESTIGATION REPORT

OCA
08-036363

ORI
NC 0110100

Date / Time Reported
Month Day Yr Time
11 | 19 | 2008 | 12:36 Hrs.

#1 Crime Incident(s)
Drug Offense - Felony

At Found
Month Day Yr Time
11 | 19 | 2008 | 12:36 Hrs.

Last Known Secure
Month Day Yr Time
11 | 19 | 2008 | 12:36 Hrs.

#2 Crime Incident
Drug Offense - Misdemeanor

Location of Incident
89 Rock Hill Rd/rock Hill Pl, Asheville NC 28803

Offense Tract
APD

#3 Crime Incident

Premise Type
HIGHWAY/ROAD/STREET, ETC.

Victim Residence Type
 Single Family Multi Family

MO How Attacked or Committed

Forcible
 Yes N/A No
Weapon / Tools
Not Applicable/none

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)
STATE OF NORTH CAROLINA

Victim of Crime #
1,2

DOB / Age

Race Sex

Relationship To Offender
OK

Resident Status
 Resident
 Non-Resident
 Unknown

Home Address

Home Phone

Employer Name/Address

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)

Victim of Crime #

DOB / Age

Race Sex

Home Address

Home Phone

Employer Name/Address

Business Phone

Mobile Phone

INVOLVED

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 **MALTY, B. (PATR, DSU) (A2162)**

Officer Signature

Supervisor Signature
LAUFFER, E. (PATR, DSU) (A2580)

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 DATA

Agency Name
ASHEVILLE POLICE DEPARTMENT

INCIDENT/INVESTIGATION REPORT

OCA 08-036886
Date/Time Reported: 11/23/2008 19:19 Hrs.

ORI NC 0110100
#1 Crime Incident(s)
Possession Of Stolen Vehicle

**** Contains Restricted Names ****
At Found: 11/23/2008 19:19 Hrs.
Last Known Secure: 11/23/2008 19:19 Hrs.

#2 Crime Incident

Location of Incident: 50 Wilbar Ave, Asheville NC 28801
Offense Tract: APD

#3 Crime Incident

Premise Type: PARKING LOT/AREA
Victim Residence Type: Single Family Multi Family

MO

How Attacked or Committed: Forcible Yes No
Weapon / Tools: Not Applicable/none

VICTIM

of Victims: 1
Type: Person Business
Injury: None Minor Loss of Teeth
Drug/Alcohol Use: No N/A
Victim/Business Name: P V HOLDING CORP
Home Address: 1016 RENTAL CAR DR, Raleigh, NC 27623
Employer Name/Address: [Blank]
VYR: 2008 Make: HYUN Model: SENATA Style: 4D Color: BLU Lic/Lis: N233248, LA Vin: KMHDU46D58U423129

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: RESTRICTED
Home Address: [Blank]
Employer Name/Address: [Blank]

INVOLVED

Type: Person Business Society Government Financial Institute Religious L.E. Officer Line of Duty Other/Unknown
Code: IO Name: BECK, LATOSHA RENEE
Home Address: 50 Wilbar Ave - Ap 4c Asheville, NC 28801
Employer Name/Address: Best Western, Asheville

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
1	PC	R	\$10,000.00		1	2008 BLU, N233248 LA	HYUN Senata	KMHDU46D58U423129

Number of Vehicles Stolen: 0 Number Vehicles Recovered: 1 Total Recovered Value: \$10,000.00

ID

Officer: COWARD, E. (PATR, PATR) (A2277) Officer Signature: [Blank] Supervisor Signature: WILKE, W. (PATR, PATR) (A2160)

Status

Complainant Signature: [Blank] 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 - Case #: 08-036886

At about 7:19pm on November 23 officers located a vehicle reported stolen in Lee Walker Heights. The vehicle was recovered and the driver arrested.

INCIDENT DATA

INCIDENT/INVESTIGATION REPORT

OCA 08-036869

Agency Name
ASHEVILLE POLICE DEPARTMENT

ORI
NC 0110100

Date / Time Reported
Month Day Yr Time
11 | 23 | 2008 | 18:15 Hrs.

** Contains Restricted Names **

#1 Crime Incident(s)
Assault - Simple

At Found
Month Day Yr Time
11 | 23 | 2008 | 17:47 Hrs.

Last Known Secure
Month Day Yr Time
11 | 23 | 2008 | 17:47 Hrs.

#2 Crime Incident

Location of Incident
414 Depot St, Asheville NC 28801

Offense Tract
APD

#3 Crime Incident

Premise Type
ALL OTHER

Victim Residence Type
 Single Family Multi Family

MO How Attacked or Committed
Gang Assaults/Simple, Force Used/Hit During Act, Presence Of Victim/On Premises,

Forcible Yes No N/A
Weapon / Tools
Personal Weapons (hands, Feet,

VICTIM # of Victims 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 **RESTRICTED** Victim of Crime # **1,** DOB / Age **//** Race Sex Relationship To Offender Resident Status
 Resident Non-Resident Unknown

Home Address Home Phone
Employer Name/Address 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) Victim of Crime # DOB / Age Race Sex

Home Address Home Phone
Employer Name/Address Business Phone Mobile Phone

INVOLED 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)

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

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

ID Officer **COWARD, E. (PATR, PATR) (A2277)** ID# **(A2277)** Officer Signature **(Signature)** Supervisor Signature **WILKE, W. (PATR, PATR) (A2160)**

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 - Case #: 08-036869

At about 5:45pm on November 23 a male suspect assaulted the victim at 414 Depot St.

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Agency Name
ASHEVILLE POLICE DEPARTMENT

INCIDENT/INVESTIGATION REPORT

OCA 08-037257

ORI
NC 0110100

Date / Time Reported
Month Day Yr Time
11 | 26 | 2008 | 14:02 Hrs.

**** Contains Restricted Names ****

#1 Crime Incident(s)
Child Abuse (non-assaultive)

Att Com
At Found
Month Day Yr Time
11 | 26 | 2008 | 14:02 Hrs.

Last Known Secure
Month Day Yr Time
11 | 26 | 2008 | 14:02 Hrs.

#2 Crime Incident
Resist, Delay, Obstruct Officer

Att Com
Location of Incident
700 Haywood Rd/fairfax Ave, Asheville NC 28806

Offense Tract
APD

#3 Crime Incident
Elude Arrest Felony

Att Com
Premise Type
HIGHWAY/ROAD/STREET, ETC.

Victim Residence Type
 Single Family Multi Family

MO

How Attacked or Committed
Forcible Yes No N/A

Weapon / Tools
Not Applicable/none

V
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of Victims **4**
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/Business Name (Last, First, Middle)
V1 State Of North Carolina

Victim of Crime # **2,3**
DOB / Age

Race Sex Relationship To Offender Resident Status
 Resident Non-Resident Unknown

Home Address

Home Phone

Employer Name/Address

Business Phone

Mobile Phone

VYR Make Model Style Color Lic/Lis

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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 **VI 2** Name (Last, First, Middle) **RESTRICTED**
Victim of Crime # **1** DOB / Age **//** Race Sex

Home Address

Home Phone

Employer Name/Address

Business Phone

Mobile Phone

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

Code **VI 3** Name (Last, First, Middle) **RESTRICTED**
Victim of Crime # **1** 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)

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Victim #	DCI	Status	Value	OJ	QTY	Property Description	Make/Model	Serial Number
	PC	NONR	\$0.00		1	1996 GRN, YRS1669 NC	CADI Deville	1G6KF29XTU239877

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

ID

Officer **TOMASETTI, L. (CID, GSU) (A2247)**

Officer Signature

Supervisor Signature **ROMICK, D. (CID, CID) (A2611)**

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 - Case #: 08-037257

Vehicle stop was initiated because the front passenger had multiple felony warrants. Vehicle failed to yield to blue light and siren over a considerable distance. Vehicle stopped at Fairfax and Haywood Road. The driver, Domanik Austin, was arrested. The passenger, Deshone Austin, fled on foot and was not apprehended.

INCIDENT DATA

Agency Name: ASHEVILLE POLICE DEPARTMENT
ORI: NC 0110100

INCIDENT/INVESTIGATION REPORT

OCA: 08-037419
Date/Time Reported: 11/28/2008 14:17 Hrs.

#1	Crime Incident(s) <i>Possession Of Firearm By Felon</i>	<input type="checkbox"/> Att <input checked="" type="checkbox"/> Com	At Found Month Day Yr Time 11 28 2008 14:17 Hrs.	<input type="checkbox"/> Att <input type="checkbox"/> Com	Location of Incident <i>49 Phifer St/blanton St, Asheville NC 28801</i>	Last Known Secure Month Day Yr Time 11 28 2008 14:17 Hrs.	Offense Tract <i>APD</i>	
#2	Crime Incident	<input type="checkbox"/> Att <input type="checkbox"/> Com	Premise Type <i>HIGHWAY/ROAD/STREET, ETC.</i>	Victim Residence Type <input type="checkbox"/> Single Family <input type="checkbox"/> Multi Family				
#3	Crime Incident	<input type="checkbox"/> Att <input type="checkbox"/> Com	How Attacked or Committed <i>Gang Firearms/Revolver</i>					Weapon / Tools <i>Handgun</i>

VICTIM

# of Victims <i>1</i>	Type <input checked="" type="checkbox"/> Person <input type="checkbox"/> Business <input checked="" type="checkbox"/> Society <input type="checkbox"/> Government <input type="checkbox"/> Financial Institute <input type="checkbox"/> Religious <input type="checkbox"/> L.E. Officer Line of Duty <input type="checkbox"/> Other/Unknown	Injury <input checked="" type="checkbox"/> None <input type="checkbox"/> Minor <input type="checkbox"/> Loss of Teeth <input type="checkbox"/> Broken Bones <input type="checkbox"/> Severe Lacerations <input type="checkbox"/> Internal <input type="checkbox"/> Unconscious <input type="checkbox"/> Other Major	Drug/Alcohol Use: <input type="checkbox"/> Yes <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A				
V1	Victim/Business Name (Last, First, Middle) <i>State Of North Carolina</i>	Victim of Crime # <i>1,</i>	DOB / Age	Race	Sex	Relationship To Offender	Resident Status <input type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <input type="checkbox"/> Unknown
Home Address						Home Phone	
Employer Name/Address						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:	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Business <input type="checkbox"/> Society <input type="checkbox"/> Government <input type="checkbox"/> Financial Institute <input type="checkbox"/> Religious <input type="checkbox"/> L.E. Officer Line of Duty <input type="checkbox"/> Other/Unknown					
Code	Name (Last, First, Middle)	Victim of Crime #	DOB / Age	Race	Sex	
<i>IO</i>	<i>FIELDS, KIMANI MIKHAIL</i>			<i>B</i>	<i>M</i>	
Home Address <i>4 Syrlin St - 45 Asheville, NC 28801</i>					Home Phone <i>828-216-5994</i>	
Employer Name/Address <i>Ingles Warehouse, Swannanoa Nc</i>					Business Phone	Mobile Phone
Type:	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Business <input type="checkbox"/> Society <input type="checkbox"/> Government <input type="checkbox"/> Financial Institute <input type="checkbox"/> Religious <input type="checkbox"/> L.E. Officer Line of Duty <input type="checkbox"/> Other/Unknown					
Code	Name (Last, First, Middle)	Victim of Crime #	DOB / Age	Race	Sex	
<i>IO</i>	<i>YOUNG, BOBBY JOE</i>		<i>19</i>	<i>B</i>	<i>M</i>	
Home Address <i>50 Wilbar Ave - Ap4c Asheville, NC 28801</i>					Home Phone <i>828-225-8160</i>	
Employer Name/Address <i>Unemployed</i>					Business Phone	Mobile Phone

INVOLED

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 ID# <i>LAMB, M. (CID, GSU) (A2108)</i>	Officer Signature	Supervisor Signature <i>ROMICK, D. (CID, CID) (A2611)</i>
Status	Complainant Signature	Case Status <input type="checkbox"/> Further Investigation <input type="checkbox"/> Inactive <input checked="" type="checkbox"/> Closed/Cleared <input type="checkbox"/> Closed/Leads Exhausted	Case Disposition: <input type="checkbox"/> Unfounded <input type="checkbox"/> Located <input type="checkbox"/> Extradition Declined <input checked="" 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 / Investigation - Case #: 08-037419

On Friday November 28, 2008 Communications received a call of a suspicious vehicle in the parking lot of Green's Mini-Mart. Subjects inside the car were allegedly wearing masks. The vehicle left and a bolo was put out for a black Dodge Durango. Officers located the Durango and conducted a vehicle stop on it at Blanton Street and Phifer Street. During the investigation a revolver was located in the engine compartment. The driver, Tyqon Moore was charged with Possession of Firearm by Felon. [12/03/2008 11:12, LAMBM, 845, APD]