INCIDENT/INVESTIGATION REPORT

OCA
0702030021

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

DRUGS

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 ☐ Yes ☐ Unk ☐ No ☐ N/A
Computer ☐ Yes ☐ Unk ☐ No ☐ N/A

Age: Race: Sex:	Age: Race: Sex:	Age: Race: Sex:
Age: Race: Sex:	Age: Race: Sex:	Age: Race: Sex:

Primary Offender Resident Status
☐ Resident
☐ Non-Resident
☐ Unknown

SUSPECT

Name (Last, First, Middle)	Alias or Nickname	Home Address
BRODIE, JEFFERY LAMONT		1942 W RIVER ROAD, LOUISBURG, NC 2754

Occupation	Business Address
CARPENTER	

DOB / Age	Race	Sex	Height	Weight	Build	Hair Color	Hair Style	Hair Length	Eye Color	Glasses
02/27/1979 | 27	B	M	5'09"	155	MED	BLK			BRN	

Scars, Marks, Tatoos, 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

WITNESS

Name (last, first, middle)	DOB / Age	Race	Sex	OCA

Home Address	Home Phone	Employer	Phone

Suspect Hate / Bias Motivated: Yes ☐ No ☐

NARRATIVE

Narrative

ON 2/3/2007 I WAS DISPATCHED TO 10 SIMS BRIDGE RD. REF. DAMAGE TO PROPERTY. UPON MY ARRIVAL I SPOKE WITH STORE OWNER ED WILSON. HE SAID JEFFREY BRODIE CAME INTO THE STORE AND PURCHASED A CIGAR AND A LOTTERY TICKET. MR. BRODIE PUMPED $5.08 WORTH OF GAS AND DROVE OFF BREAKING THE PUMP OFF EVEN WITH THE GROUND. I ADVISED MR. WILSON I WOULD OBTAIN WARRANTS IN MR.BRODIE FOR LARCENY GAS AND DAMAGE TO PERSONAL PROPERTY. MR.WILSON ALSO GAVE ME A TAPE OF MR. BRODIE DRIVING OFF FROM THE GAS PUMP. THE TAPE WAS TURNED OVER TO EVIDENCE. NO FURTHER.

INCIDENT/INVESTIGATION REPORT

INCIDENT DATA

Agency Name: Franklin County Sheriff's Office
ORI: NC0350000
OCA: 0702030021
Date / Time Reported: S M T W T F (S) — Month 02 | Day 03 | Yr 2007 | Time 20:59 Hrs.

	Crime / Incident(s)	Attempt / Complete	At Found (S M T W T F S) Month / Day / Yr / Time Hrs.	Last Known Secure (S M T W T F S) Month / Day / Yr / Time Hrs.
#1	2690 - DAMAGE TO PROPERTY	☐ Attempt ■ Complete		
#2	Crime Incident	☐ Attempt ☐ Complete	Location of Incident: 10 SIMS BRIDGE RD. OFF OF W.RIVER RD.	Offense Tract: Z3
#3	Crime Incident	☐ Attempt ☐ Complete	Premise Type: 29 - Other Retail Establishment	Victim Residence Type: ☐ Single Family ☐ Multi Family

MO

How Attacked or Committed: DRIVING OFF WITH GAS NOZZLE IN CAR. NOT PAYING FOR GAS.
Forcible: ☐ Yes ☐ No ☐ N/A
Weapon / Tools:

VICTIM

# of Victims: 1
Type: ■ Person ☐ Business ☐ Society ☐ Government ☐ Financial Institute ☐ Religious ☐ L.E. Officer Line of Duty ☐ Other/Unk
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)	Victim of Crime #	DOB / Age	Race	Sex	Relationship To Offender	Resident Status
V1	WILSON, EDMOND		05/09/1943 / 64	W	M		☐ Resident ☐ Non-Resident ☐ Unknown

Home Address: 1740 N WHITE ST, Wake Forest, NC 27587
Home Phone: (919) 556-1717
Employer Name/Address:
Business Phone:

VYR	Make	Model	Style	Color	Lic/Lis	Vin

OTHERS INVOLVED

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:

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:

PROPERTY

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(Check "OJ" column if recovered for other jurisdiction)

Victim #	DCI	Status	Value	OJ	QTY	Property Description	Make/Model	Serial Number
1	99	D	3000.00		1	GAS PUMP		
1	99	S	5.08			MOTOR FUEL		

Number of Vehicles Stolen:
Number of Vehicles Recovered:

ID

Officer Name: BILLY R. AYSCUE
ID#: A21
Officer Signature:
Supervisor Signature:

STATUS

Complainant Signature:

Case Status:
☐ Further Investigation
☐ Inactive
■ Closed/Cleared
☐ Closed/Leads Exhausted

Case Disposition:
☐ Unfounded ☐ Juvenile/No Custody ☐ Extradition Declined
☐ Cleared by Arrest ☐ Refuse to Cooperate ☐ Located
☐ Cleared by Arrest by Another Agency
☐ Death of Offender ☐ Prosecution Declined

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