

Richmond County Sheriff's Office Internal Incident Report

231

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|--|---|----------------|--|----------------|----------|
| Case No.: | 21-292324 | Incident Date: | 10/11/2021 | Incident Time: | 1925 |
| <input checked="" type="checkbox"/> Original Report <input type="checkbox"/> Corrected Copy <input type="checkbox"/> Supplemental Report | | | | | |
| Incident Location: | Clifton Street at Highland Avenue | | | County: | RICHMOND |
| Incident Type(s): (Check all that apply) | <input type="checkbox"/> DUI <input checked="" type="checkbox"/> Use of Force | | <input type="checkbox"/> Suspended/Revoked Driver's License | | |
| | <input type="checkbox"/> Pursuit <input type="checkbox"/> Stolen Vehicle | | <input type="checkbox"/> Wanted Person <input type="checkbox"/> Drug Seizure | | |
| | <input type="checkbox"/> Other: _____ | | | | |

Vehicle Information

| | | | | | | | |
|--------------|--|-------|---|--------|---|-----------------------------|-------|
| Year: | 1997 | Make: | Chevrolet | Model: | Tahoe | Color: | Black |
| Tag: | PTC6057 | Year: | 2022 | State: | GA | Vehicle Impounded Location: | |
| Released To: | <input type="checkbox"/> Passenger <input type="checkbox"/> Wrecker Service: _____ | | <input type="checkbox"/> Family Member/ Friend <input type="checkbox"/> Another Agency: _____ | | Inventory | | |
| | | | | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |

Violator / Complainant Information

| | | | | | | | |
|---------------------------|--|------------|---|-----------------------------------|----------------------------|-------------------------|------------------------|
| Arrestee #: | 1 | Driver: | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Name: Jones Jr., Jermaine Marsell | | | |
| Date of Birth: | 1997 | Race: | Black | Weight: | 165 | Height: Ft: 5 In: 8 | Marital Status: Single |
| Sex: | <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female | Eye Color: | Brown | Hair Color: | Black | Telephone Number: () - | |
| Driver's License No.: | 059872332 | | State: | GA | Social Security No.: _____ | | |
| Address: 2020 Shark Drive | | | Employer: | | | | |
| City: | AUGUSTA | State: | GA | Zip Code: 30906 | | | |
| Arrestee #: | | Driver: | <input type="checkbox"/> Yes <input type="checkbox"/> No | Name: | | | |
| Date of Birth: | | Race: | | Weight: | | Height: Ft: In: | Marital Status: |
| Sex: | <input type="checkbox"/> Male <input type="checkbox"/> Female | Eye Color: | | Hair Color: | | Telephone Number: () - | |
| Driver's License No.: | | | State: | | Social Security No.: - - | | |
| Address: | | | Employer: | | | | |
| City: | | State: | | Zip Code: | | | |

Related Reports

| Type of Report | Report Number | Report Date |
|----------------|---------------|-------------|
| Case Report | 21-292324 | 10/12/2021 |
| | | |
| | | |

Charges

| Violator # | Citation # | Code Section | Felony | Violation Description |
|------------|------------|--------------|-------------------------------------|---|
| 1 | | 16-11-131 | <input checked="" type="checkbox"/> | Possession of a Firearm by a First Offender Probationer |
| 1 | | 16-10-24 | <input type="checkbox"/> | Obstruction of a Law Enforcement Officer- Misd |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |

Was this Incident Audio/Video Recorded? Yes No By : Inv. Russell Inv. C. Brown Cpl. Phillips Dep. Gaitor Dep. Leathers

Witnesses / Assisting Officers

| Name | Address / Agency | Telephone Number |
|-------------------------|---|------------------|
| Deputy Leslie Gaiter | 400 Walton Way Augusta, GA Richmond County Sheriff's Office | (706) 821-1080 |
| Deputy Parker Leathers | 400 Walton Way Augusta, GA Richmond County Sheriff's Office | (706) 821-1080 |
| Corporal Aaron Phillips | 400 Walton Way Augusta, GA Richmond County Sheriff's Office | (706) 821-1080 |

| | | |
|------------------------------------|----------------|-------------------------|
| Reporting Officer: Richard Russell | | |
| Traffic/Unit: 504/ Narcotics | Traffic/Shift: | Report Date: 10/15/2021 |
| Approving Supervisor: | | Approval Date: |

Richmond County Sheriff's Office Internal Incident Report

25

| Case No.: 21-033880 | | Incident Date: 2/4/2021 | | Incident Time: 13:15 | |
|---|------------|---|-----------------------------|--|--|
| <input checked="" type="checkbox"/> Original Report | | <input type="checkbox"/> Corrected Copy | | <input type="checkbox"/> Supplemental Report | |
| Incident Location: 524 Hines Street Augusta, Ga | | County: Richmond | | | |
| Incident Type(s): (Check all that apply) | | <input type="checkbox"/> DUI <input type="checkbox"/> Pursuit <input type="checkbox"/> Other: | | <input checked="" type="checkbox"/> Use of Force <input type="checkbox"/> Stolen Vehicle <input type="checkbox"/> Suspended/Revoked Driver's License <input checked="" type="checkbox"/> Wanted Person <input type="checkbox"/> Drug Seizure | |
| Vehicle Information | | | | | |
| Year: | Make: | Model: | Color: | | |
| Tag: | Year: | State: | Vehicle Impounded Location: | | |
| Released To: <input type="checkbox"/> Passenger <input type="checkbox"/> Family Member/ Friend | | <input type="checkbox"/> Wrecker Service: <input type="checkbox"/> Another Agency: | | Inventory <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Violator / Complainant Information | | | | | |
| Violator #: 1 | | Driver: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Name: Aaron Dent | |
| Date of Birth: [REDACTED] 2001 | | Race: Black | | Weight: 150 Height: Ft: 5 In: 8 | |
| Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female | | Eye Color: Brown | | Hair Color: Brown Marital Status: Single | |
| Driver's License No.: | | Telephone Number: [REDACTED] | | Social Security No.: - - | |
| Address: 524 Hines Street | | City: Augusta | | Employer: N/A | |
| Violator #: | | Driver: <input type="checkbox"/> Yes <input type="checkbox"/> No | | Name: State: GA Zip Code: 30901 | |
| Date of Birth: | | Race: | | Weight: Height: Ft: In: Marital Status: | |
| Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female | | Eye Color: | | Hair Color: Telephone Number: () - | |
| Driver's License No.: | | State: | | Social Security No.: - - | |
| Address: | | City: | | Employer: | |
| | | State: | | Zip Code: | |
| Type of Report | | Related Reports | | | |
| Case Report | | Report Number 2021-033880 | | Report Date 8/19/2020 | |
| Charges | | | | | |
| Violator # | Citation # | Code Section | Felony | Violation Description | |
| | | | <input type="checkbox"/> | | |
| | | | <input type="checkbox"/> | | |
| | | | <input type="checkbox"/> | | |
| | | | <input type="checkbox"/> | | |
| | | | <input type="checkbox"/> | | |
| Was this Incident Audio/Video Recorded? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No By: BWC | | | | | |
| Witnesses / Assisting Officers | | | | | |
| Name | | Address / Agency | | Telephone Number | |
| Dep. Chris Hill | | 400 Walton Way | | (706) 821-1000 | |
| | | | | () - | |
| | | | | () - | |
| Reporting Officer: Deputy Richard Russell C266/1104 | | | | | |
| Traffic/Unit: 1104 | | Traffic/Shift: A-Shift Zone 1 | | Report Date: 2/4/2021 | |
| Approving Supervisor: Cpl. Jacob Green B905/C-12 | | | | Approval Date: 2/4/2021 | |

Richmond County Sheriff's Office Internal Incident Report

151
B-14

| | | |
|--|---|---------------------|
| Case No.: | Incident Date: 6/7/2017 | Incident Time: 1405 |
| <input checked="" type="checkbox"/> Original Report <input type="checkbox"/> Corrected Copy <input type="checkbox"/> Supplemental Report | | |
| Incident Location: 1941 Phinizy Rd Augusta, Ga | County: RICHMOND | |
| Incident Type(s): (Check all that apply) | <input type="checkbox"/> DUI <input checked="" type="checkbox"/> Use of Force <input type="checkbox"/> Suspended/Revoked Driver's License <input type="checkbox"/> Pursuit <input type="checkbox"/> Stolen Vehicle <input type="checkbox"/> Wanted Person <input type="checkbox"/> Drug Seizure <input type="checkbox"/> Other: _____ | |

| Vehicle Information | | | |
|---------------------|---|--------|---|
| Year: | Make: | Model: | Color: |
| Tag: | Year: | State: | Vehicle Impounded Location: |
| Released To: | <input type="checkbox"/> Passenger <input type="checkbox"/> Wrecker Service: <input type="checkbox"/> Family Member/ Friend <input type="checkbox"/> Another Agency: | | Inventory <input type="checkbox"/> Yes <input type="checkbox"/> No |

| Violator / Complainant Information | | | |
|---|---|---------------------------------|---|
| Violator #: 1 | Driver: <input type="checkbox"/> Yes <input type="checkbox"/> No | Name: Walker, Brandon Trayvon | |
| Date of Birth: [REDACTED] 1998 | Race: Black | Weight: 140 | Height: Ft: 5 In: 11 Marital Status: |
| Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female | Eye Color: Brown | Hair Color: Brown | Telephone Number: [REDACTED] |
| Driver's License No.: | State: | Social Security No.: [REDACTED] | |
| Address: 713 Cedar St | | Employer: | |
| City: AUGUSTA | State: GA | Zip Code: 30906 | |
| Violator #: 2 | Driver: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Name: Shelton, Bryan Nicholas | |
| Date of Birth: [REDACTED] 1998 | Race: Black | Weight: 150 | Height: Ft: 5 In: 7 Marital Status: |
| Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female | Eye Color: Brown | Hair Color: Brown | Telephone Number: [REDACTED] |
| Driver's License No.: | State: | Social Security No.: [REDACTED] | |
| Address: 3438 Kensington Dr South | | Employer: | |
| City: Augusta | State: Ga | Zip Code: 30906 | |

| Related Reports | | |
|-----------------|---------------|-------------|
| Type of Report | Report Number | Report Date |
| | | |
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| | | |

| Charges | | | | |
|------------|------------|--------------|--------------------------|-----------------------|
| Violator # | Citation # | Code Section | Felony | Violation Description |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |

Was this Incident Audio/Video Recorded? Yes No By :

| Witnesses / Assisting Officers | | |
|--------------------------------|-----------------------------|------------------|
| Name | Address / Agency | Telephone Number |
| Deputy Richard Russell | 1941 Phinizy Rd Augusta, Ga | (706) 821-1609 |
| Deputy Johnny Snyder | 1941 Phinizy Rd Augusta, Ga | (706) 821-1609 |
| Deputy Dantavion Jones | 1941 Phinizy Rd Augusta, Ga | (706) 821-1609 |

| | | |
|---|------------------|-------------------------|
| Reporting Officer: Deputy Richard Russell | | |
| Traffic/Unit: | Traffic/Shift: B | Report Date: 6/7/2017 |
| Approving Supervisor: Sgt. Elizabeth Whittle <i>Sgt Elizabeth Whittle</i> | | Approval Date: 6/7/2017 |

Richmond County Sheriff's Office Internal Incident Report

[Signature] 467

| | | |
|---|--|---------------------|
| Case No.: | Incident Date: 12/10/2015 | Incident Time: 1450 |
| <input checked="" type="checkbox"/> Original Report <input type="checkbox"/> Corrected Copy <input type="checkbox"/> Supplemental Report | | |
| Incident Location: 1941 Phinizy Road Augusta, Ga 30906 | County: Richmond | |
| Incident Type(s): (Check all that apply) | <input type="checkbox"/> DUI <input checked="" type="checkbox"/> Use of Force <input type="checkbox"/> Pursuit <input type="checkbox"/> Stolen Vehicle <input type="checkbox"/> Other: _____ | |
| <input type="checkbox"/> Suspended/Revoked Driver's License <input type="checkbox"/> Wanted Person <input type="checkbox"/> Drug Seizure | | |

| Vehicle Information | | | | | |
|---------------------|---|--------|---|--|--|
| Year: | Make: | Model: | Color: | | |
| Tag: | Year: | State: | Vehicle Impounded Location: | | |
| Released To: | <input type="checkbox"/> Passenger <input type="checkbox"/> Wrecker Service: <input type="checkbox"/> Family Member/ Friend <input type="checkbox"/> Another Agency: | | Inventory <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

| Violator / Complainant Information | | | | | |
|---|--|-------------------------|---------------------------------|-------------------------|--|
| Violator #: 1 | Driver: <input type="checkbox"/> Yes <input type="checkbox"/> No | Name: HUDSON, JAMARRION | | | |
| Date of Birth: [REDACTED] 1995 | Race: Black | Weight: 150 | Height: Ft: 5 In: 9 | Marital Status: | |
| Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female | Eye Color: Brown | Hair Color: Black | | Telephone Number: () - | |
| Driver's License No.: | State: | | Social Security No.: [REDACTED] | | |
| Address: 2011 GREEN LAEAF ROAD | | | Employer: | | |
| City: AUGUSTA | State: GA | | Zip Code: 30906 | | |
| Violator #: | Driver: <input type="checkbox"/> Yes <input type="checkbox"/> No | Name: | | | |
| Date of Birth: | Race: | Weight: | Height: Ft: In: | Marital Status: | |
| Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female | Eye Color: | Hair Color: | | Telephone Number: () - | |
| Driver's License No.: | State: | | Social Security No.: - - | | |
| Address: | | | Employer: | | |
| City: | State: | | Zip Code: | | |

| Related Reports | | |
|-----------------|---------------|-------------|
| Type of Report | Report Number | Report Date |
| | | |
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| | | |

| Charges | | | | |
|------------|------------|--------------|--------------------------|-----------------------|
| Violator # | Citation # | Code Section | Felony | Violation Description |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |

Was this incident Audio/Video Recorded? Yes No By :

| Witnesses / Assisting Officers | | |
|--------------------------------|--|------------------|
| Name | Address / Agency | Telephone Number |
| Dep. Richard Russell | 1941 Phinizy Road Augusta, Georgia 30906 | [REDACTED] |
| Dep. Eddie Perez-Rodriguez | 1941 Phinizy Road Augusta, Georgia 30906 | [REDACTED] |
| | | () - |

| | | | |
|--|---------------------------|----------------|-------------------------|
| Reporting Officer: Dep. Richard Russell <i>[Signature]</i> c306 | Traffic/Unit: | Traffic/Shift: | Report Date: 12/10/2015 |
| Approving Supervisor: Sgt. Moses Cheatham <i>[Signature]</i> APPROV/1354 | Approval Date: 12/10/2015 | | |

Richmond County Sheriff's Office Internal Incident Report

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|---|--|---------------------|
| Case No.: | Incident Date: 11/5/2016 | Incident Time: 1635 |
| <input checked="" type="checkbox"/> Original Report <input type="checkbox"/> Corrected Copy <input type="checkbox"/> Supplemental Report | | |
| Incident Location: I Pod CBWDC | County: Richmond | |
| Incident Type(s): (Check all that apply) | <input type="checkbox"/> DUI <input checked="" type="checkbox"/> Use of Force <input type="checkbox"/> Pursuit <input type="checkbox"/> Stolen Vehicle <input type="checkbox"/> Other: _____ | |
| <input type="checkbox"/> Suspended/Revoked Driver's License <input type="checkbox"/> Wanted Person <input type="checkbox"/> Drug Seizure | | |

| Vehicle Information | | | |
|---------------------|---|--------|---|
| Year: | Make: | Model: | Color: |
| Tag: | Year: | State: | Vehicle Impounded Location: |
| Released To: | <input type="checkbox"/> Passenger <input type="checkbox"/> Wrecker Service: <input type="checkbox"/> Family Member/ Friend <input type="checkbox"/> Another Agency: _____ | | Inventory <input type="checkbox"/> Yes <input type="checkbox"/> No |

| Violator / Complainant Information | | | |
|---|--|---------------------------------|--------------------------------------|
| Violator #: 1 | Driver: <input type="checkbox"/> Yes <input type="checkbox"/> No | Name: Ruffin, Brian Thomas | |
| Date of Birth: [REDACTED] 1984 | Race: Black | Weight: 130 | Height: Ft: 5 In: 5 |
| Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female | Eye Color: Brown | Hair Color: Black | Telephone Number: (000) 000-0000 |
| Driver's License No.: | State: | Social Security No.: [REDACTED] | |
| Address: Homeless | | Employer: | |
| City: Augusta | State: Ga | Zip Code: 30909 | |
| Violator #: | Driver: <input type="checkbox"/> Yes <input type="checkbox"/> No | Name: | |
| Date of Birth: | Race: | Weight: | Height: Ft: In: Marital Status: |
| Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female | Eye Color: | Hair Color: | Telephone Number: () - |
| Driver's License No.: | State: | Social Security No.: - - | |
| Address: | | Employer: | |
| City: | State: | Zip Code: | |

| Related Reports | | |
|-----------------|---------------|-------------|
| Type of Report | Report Number | Report Date |
| | | |
| | | |
| | | |

| Charges | | | | |
|------------|------------|--------------|--------------------------|-----------------------|
| Violator # | Citation # | Code Section | Felony | Violation Description |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |

Was this Incident Audio/Video Recorded? Yes No By : _____

| Witnesses / Assisting Officers | | |
|--------------------------------|----------------------------------|------------------|
| Name | Address / Agency | Telephone Number |
| Deputy James Reed | 1941 Phinizy Rd Augusta Ga 30906 | (706) 821-1609 |
| Deputy Rhonda O'Neal | 1941 Phinizy Rd Augusta Ga 30906 | (706) 821-1609 |
| | 1941 Phinizy Rd Augusta Ga 30906 | (706) 821-1609 |

Reporting Officer: Deputy Richard Russell

| | | |
|--|------------------|--------------------------|
| Traffic/Unit: CBWDC | Traffic/Shift: B | Report Date: 11/5/2016 |
| Approving Supervisor: Lt. John Whitaker IV | | Approval Date: 11/5/2016 |

Richmond County Sheriff's Office Internal Incident Report

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| | | |
|--|--------------------------|---------------------|
| Case No.: | Incident Date: 11/1/2016 | Incident Time: 1645 |
| <input checked="" type="checkbox"/> Original Report <input type="checkbox"/> Corrected Copy <input type="checkbox"/> Supplemental Report | | |
| Incident Location: I Pod CBWDC | County: Richmond | |
| Incident Type(s): <input type="checkbox"/> DUI <input checked="" type="checkbox"/> Use of Force <input type="checkbox"/> Suspended/Revoked Driver's License (Check all that apply) <input type="checkbox"/> Pursuit <input type="checkbox"/> Stolen Vehicle <input type="checkbox"/> Wanted Person <input type="checkbox"/> Drug Seizure <input type="checkbox"/> Other: _____ | | |

| Vehicle Information | | | | | |
|---|-------|--------|--|--|--|
| Year: | Make: | Model: | Color: | | |
| Tag: | Year: | State: | Vehicle Impounded Location: | | |
| Released To: <input type="checkbox"/> Passenger <input type="checkbox"/> Wrecker Service: | | | Inventory | | |
| <input type="checkbox"/> Family Member/ Friend <input type="checkbox"/> Another Agency: | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

| Violator / Complainant Information | | | | | |
|--|---|----------------------|---------------------|---------------------------------|--|
| Violator #: 1 | Driver: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Name: Carr, Grady Jr | | | |
| Date of Birth: [REDACTED] 1989 | Race: Black | Weight: 240 | Height: Ft: 6 In: 1 | Marital Status: | |
| Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female | Eye Color: Brown | Hair Color: Black | | Telephone Number: () - | |
| Driver's License No.: | | | State: | Social Security No.: [REDACTED] | |
| Address: 1708 Forest Creek Rd | | | Employer: | | |
| City: Augusta | State: Ga | | Zip Code: 30909 | | |
| Violator #: _____ Driver: <input type="checkbox"/> Yes <input type="checkbox"/> No Name: _____ Date of Birth: _____ Race: _____ Weight: _____ Height: Ft: _____ In: _____ Marital Status: _____ Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female Eye Color: _____ Hair Color: _____ Telephone Number: () - _____ Driver's License No.: _____ State: _____ Social Security No.: - - _____ Address: _____ Employer: _____ City: _____ State: _____ Zip Code: _____ | | | | | |

| Related Reports | | |
|-----------------|---------------|-------------|
| Type of Report | Report Number | Report Date |
| | | |
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| | | |

| Charges | | | | |
|------------|------------|--------------|--------------------------|-----------------------|
| Violator # | Citation # | Code Section | Felony | Violation Description |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |

Was this Incident Audio/Video Recorded? Yes No By : _____

| Witnesses / Assisting Officers | | |
|--------------------------------|----------------------------------|------------------|
| Name | Address / Agency | Telephone Number |
| Deputy Adam Keleba | 1941 Phinizy Rd Augusta Ga 30906 | (706) 821-1609 |
| Deputy Brian Manecke | 1941 Phinizy Rd Augusta Ga 30906 | (706) 821-1609 |
| Deputy James Reed | 1941 Phinizy Rd Augusta Ga 30906 | (706) 821-1609 |

| | | |
|---|------------------------|--------------------------|
| Reporting Officer: Deputy Richard Russell <i>R. Russell</i> | | |
| Traffic/Unit: CBWDC | Traffic/Shift: B Shift | Report Date: 11/1/2016 |
| Approving Supervisor: Lt. John Whitaker <i>J. Whitaker</i> | | Approval Date: 11/1/2016 |

Richmond County Sheriff's Office Internal Incident Report

346

| | | |
|--|---------------------------|---------------------|
| Case No.: | Incident Date: 11/28/2016 | Incident Time: 0830 |
| <input checked="" type="checkbox"/> Original Report <input type="checkbox"/> Corrected Copy <input type="checkbox"/> Supplemental Report | | |
| Incident Location: I Pod CBWDC | County: Richmond | |
| Incident Type(s): <input type="checkbox"/> DUI <input checked="" type="checkbox"/> Use of Force <input type="checkbox"/> Suspended/Revoked Driver's License (Check all that apply) <input type="checkbox"/> Pursuit <input type="checkbox"/> Stolen Vehicle <input type="checkbox"/> Wanted Person <input type="checkbox"/> Drug Seizure <input type="checkbox"/> Other: _____ | | |

| Vehicle Information | | | |
|--|-------|--------|---|
| Year: | Make: | Model: | Color: |
| Tag: | Year: | State: | Vehicle Impounded Location: |
| Released To: <input type="checkbox"/> Passenger <input type="checkbox"/> Wrecker Service: <input type="checkbox"/> Family Member/ Friend <input type="checkbox"/> Another Agency: _____ | | | Inventory <input type="checkbox"/> Yes <input type="checkbox"/> No |

| Violator / Complainant Information | | | |
|---|--|--|--|
| Violator #: 1 | Driver: <input type="checkbox"/> Yes <input type="checkbox"/> No | Name: Miller, Carlos | |
| Date of Birth: [REDACTED] 1976 | Race: White | Weight: 195 | Height: Ft: 6 In: 1 Marital Status: |
| Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female | Eye Color: Hazel | Hair Color: Blond Telephone Number: () - | |
| Driver's License No.: | | State: | Social Security No.: [REDACTED] |
| Address: 165 South Belair Rd | | Employer: | |
| City: Martinez | State: Ga | Zip Code: 30907 | |
| Violator #: | Driver: <input type="checkbox"/> Yes <input type="checkbox"/> No | Name: | |
| Date of Birth: | Race: | Weight: | Height: Ft: In: Marital Status: |
| Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female | Eye Color: | Hair Color: Telephone Number: () - | |
| Driver's License No.: | | State: | Social Security No.: - - |
| Address: | | Employer: | |
| City: | State: | Zip Code: | |

| Related Reports | | |
|-----------------|---------------|-------------|
| Type of Report | Report Number | Report Date |
| | | |
| | | |
| | | |

| Charges | | | | |
|------------|------------|--------------|--------------------------|-----------------------|
| Violator # | Citation # | Code Section | Felony | Violation Description |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |

Was this Incident Audio/Video Recorded? Yes No By :

| Witnesses / Assisting Officers | | |
|--------------------------------|----------------------------------|------------------|
| Name | Address / Agency | Telephone Number |
| Deputy James Reed | 1941 Phinizy Rd Augusta Ga 30906 | (706) 821-1609 |
| Deputy Patrick Deaver | 1941 Phinizy Rd Augusta Ga 30906 | (706) 821-1609 |
| Deputy Rhonda Bethune | 1941 Phinizy Rd Augusta Ga 30906 | (706) 821-1609 |

Reporting Officer: Deputy Richard Russell

| | | |
|---|------------------|---------------------------|
| Traffic/Unit: CBWDC | Traffic/Shift: B | Report Date: 11/29/2016 |
| Approving Supervisor: Lt. John Whitaker | | Approval Date: 11/29/2016 |

J. Whitaker *A23/A519* Page 1 of 3

Richmond County Sheriff's Office Internal Incident Report

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| | | |
|--|---------------------------|---|
| Case No.: 2016-436483 | Incident Date: 10/17/2016 | Incident Time: 1438 hrs |
| <input checked="" type="checkbox"/> Original Report <input type="checkbox"/> Corrected Copy | | <input type="checkbox"/> Supplemental Report |
| Incident Location: 1941 Phinizy Rd. Augusta, Ga. 30906 (CBWDC) | | |
| Incident Type(s): (Check all that apply) | | County: Richmond |
| <input type="checkbox"/> DUI <input checked="" type="checkbox"/> Use of Force <input type="checkbox"/> Pursuit <input type="checkbox"/> Stolen Vehicle <input type="checkbox"/> Other: _____ | | <input type="checkbox"/> Suspended/Revoked Driver's License <input type="checkbox"/> Wanted Person <input type="checkbox"/> Drug Seizure |

| Vehicle Information | | | |
|---|-------|--|---|
| Year: | Make: | Model: | Color: |
| Tag: | Year: | State: | Vehicle Impounded Location: |
| Released To: <input type="checkbox"/> Passenger | | <input type="checkbox"/> Wrecker Service: | |
| <input type="checkbox"/> Family Member/ Friend | | <input type="checkbox"/> Another Agency: _____ | |
| | | | Inventory <input type="checkbox"/> Yes <input type="checkbox"/> No |

| Violator / Complainant Information | | | |
|---|---|---------------------------------|---------------------|
| Violator #: 1 | Driver: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Name: Baxter, Nizia deanne | |
| Date of Birth: [REDACTED] 1999 | Race: Black | Weight: 220 | Height: Ft: 5 In: 6 |
| Sex: <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female | Eye Color: Brown | Hair Color: Black | |
| Driver's License No.: | State: | Telephone Number: () - | |
| Address: | | Social Security No.: [REDACTED] | |
| City: | Employer: | | |
| | State: | Zip Code: | |

| | | | |
|--|--|--------------------------|--------------------|
| Violator #: | Driver: <input type="checkbox"/> Yes <input type="checkbox"/> No | Name: | |
| Date of Birth: | Race: | Weight: | Height: Ft: In: |
| Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female | Eye Color: | Hair Color: | |
| Driver's License No.: | State: | Telephone Number: () - | |
| Address: | | Social Security No.: - - | |
| City: | Employer: | | |
| | State: | Zip Code: | |

| Related Reports | | |
|-----------------|---------------|-------------|
| Type of Report | Report Number | Report Date |
| | | |
| | | |
| | | |

| Charges | | | | |
|------------|------------|--------------|--------------------------|-----------------------|
| Violator # | Citation # | Code Section | Felony | Violation Description |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |

Was this Incident Audio/Video Recorded? Yes No By: _____

| Witnesses / Assisting Officers | | |
|--------------------------------|-------------------------------------|------------------|
| Name | Address / Agency | Telephone Number |
| Dep. Traci Ferguson | 1941 Phinizy Rd. Augusta, Ga. 30906 | (706) 821-1609 |
| Dep. James Reed | 1941 Phinizy Rd. Augusta, Ga. 30906 | (706) 821-1609 |
| Dep. Jonathan Judy | 1941 Phinizy Rd. Augusta, Ga. 30906 | (706) 821-1609 |

Reporting Officer: Deputy Richard Russell

| | | |
|--|----------------|---------------------------|
| Traffic/Unit: | Traffic/Shift: | Report Date: 10/17/2016 |
| Approving Supervisor: Lt. John W. Whitaker IV A519/A23 | | Approval Date: 10/17/2016 |

[Signature]

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Richmond County Sheriff's Office Internal Incident Report

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| | | |
|--|---|---------------------|
| Case No.: | Incident Date: 10/23/2016 | Incident Time: 1015 |
| <input checked="" type="checkbox"/> Original Report <input type="checkbox"/> Corrected Copy <input type="checkbox"/> Supplemental Report | | |
| Incident Location: H Pod CBWDC | County: Richmond | |
| Incident Type(s): | <input type="checkbox"/> DUI <input checked="" type="checkbox"/> Use of Force <input type="checkbox"/> Suspended/Revoked Driver's License <input type="checkbox"/> Pursuit <input type="checkbox"/> Stolen Vehicle <input type="checkbox"/> Wanted Person <input type="checkbox"/> Drug Seizure <input type="checkbox"/> Other: _____ | |

| Vehicle Information | | | |
|---------------------|---|---|-----------------------------|
| Year: | Make: | Model: | Color: |
| Tag: | Year: | State: | Vehicle Impounded Location: |
| Released To: | <input type="checkbox"/> Passenger <input type="checkbox"/> Wrecker Service: <input type="checkbox"/> Family Member/ Friend <input type="checkbox"/> Another Agency: | Inventory <input type="checkbox"/> Yes <input type="checkbox"/> No | |

| Violator / Complainant Information | | | |
|---|---|---------------------------------|--|
| Violator #: 1 | Driver: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Name: Brinson, Richard Ricardo | |
| Date of Birth: [REDACTED] 1972 | Race: Black | Weight: 240 | Height: Ft: 5 In: 9 Marital Status: |
| Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female | Eye Color: Brown | Hair Color: Black | Telephone Number: () - |
| Driver's License No.: | State: | Social Security No.: [REDACTED] | |
| Address: 2548 Wheeler Rd | | Employer: | |
| City: Augusta | State: Ga | Zip Code: 30904 | |
| Violator #: | Driver: <input type="checkbox"/> Yes <input type="checkbox"/> No | Name: | |
| Date of Birth: | Race: | Weight: | Height: Ft: In: Marital Status: |
| Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female | Eye Color: | Hair Color: | Telephone Number: () - |
| Driver's License No.: | State: | Social Security No.: - - | |
| Address: | | Employer: | |
| City: | State: | Zip Code: | |

| Related Reports | | |
|-----------------|---------------|-------------|
| Type of Report | Report Number | Report Date |
| | | |
| | | |
| | | |

| Charges | | | | |
|------------|------------|--------------|--------------------------|-----------------------|
| Violator # | Citation # | Code Section | Felony | Violation Description |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |

Was this Incident Audio/Video Recorded? Yes No By :

| Witnesses / Assisting Officers | | |
|--------------------------------|----------------------------------|------------------|
| Name | Address / Agency | Telephone Number |
| Deputy Micheal Murphy | 1941 Phinizy Rd Augusta Ga 30906 | (706) 821-1609 |
| Deputy James Reed | 1941 Phinizy Rd Augusta Ga 30906 | (706) 821-1609 |
| Deputy Brian Manecke | 1941 Phinizy Rd Augusta Ga 30906 | (706) 821-1609 |

| | | | |
|--|---------------------------|------------------------|-------------------------|
| Reporting Officer: Deputy Richard Russell <i>[Signature]</i> | Traffic/Unit: CBWDC | Traffic/Shift: B Shift | Report Date: 10/23/2016 |
| Approving Supervisor: Lt. John Whitaker | Approval Date: 10/23/2016 | | |

[Handwritten Signature] AS19/A-23 Page 1 of 3

Richmond County Sheriff's Office Internal Incident Report

J
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| Case No.: | | Incident Date: 1/12/2016 | | Incident Time: 1030 | |
|--|------------|---|-----------------------------|---|--|
| <input checked="" type="checkbox"/> Original Report | | <input type="checkbox"/> Corrected Copy | | <input type="checkbox"/> Supplemental Report | |
| Incident Location: 1941 Phinizy Road Augusta, Ga 30906 | | | | County: Richmond | |
| Incident Type(s): (Check all that apply) | | <input type="checkbox"/> DUI <input type="checkbox"/> Pursuit <input type="checkbox"/> Other: | | <input checked="" type="checkbox"/> Use of Force <input type="checkbox"/> Stolen Vehicle <input type="checkbox"/> Suspended/Revoked Driver's License <input type="checkbox"/> Wanted Person <input type="checkbox"/> Drug Seizure | |
| Vehicle Information | | | | | |
| Year: | Make: | Model: | Color: | | |
| Tag: | Year: | State: | Vehicle Impounded Location: | | |
| Released To: <input type="checkbox"/> Passenger <input type="checkbox"/> Family Member/ Friend | | <input type="checkbox"/> Wrecker Service: <input type="checkbox"/> Another Agency: | | Inventory <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Violator / Complainant Information | | | | | |
| Violator #: 1 | | Driver: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | Name: Elander Johnson | |
| Date of Birth: █████ 1992 | | Race: Black | | Weight: 130 Height: Ft: 5 In: 6 Marital Status: | |
| Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female | | Eye Color: Brown | | Hair Color: Black Telephone Number: () - | |
| Driver's License No.: | | State: | | Social Security No.: █████ | |
| Address: | | | Employer: | | |
| City: | | State: | | Zip Code: | |
| Violator #: | | Driver: <input type="checkbox"/> Yes <input type="checkbox"/> No | | Name: | |
| Date of Birth: | | Race: | | Weight: Height: Ft: In: Marital Status: | |
| Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female | | Eye Color: | | Hair Color: Telephone Number: () - | |
| Driver's License No.: | | State: | | Social Security No.: - - | |
| Address: | | | Employer: | | |
| City: | | State: | | Zip Code: | |
| Related Reports | | | | | |
| Type of Report | | Report Number | | Report Date | |
| | | | | | |
| | | | | | |
| | | | | | |
| Charges | | | | | |
| Violator # | Citation # | Code Section | Felony | Violation Description | |
| | | | <input type="checkbox"/> | | |
| | | | <input type="checkbox"/> | | |
| | | | <input type="checkbox"/> | | |
| | | | <input type="checkbox"/> | | |
| | | | <input type="checkbox"/> | | |
| Was this Incident Audio/Video Recorded? <input type="checkbox"/> Yes <input type="checkbox"/> No By : | | | | | |
| Witnesses / Assisting Officers | | | | | |
| Name | | Address / Agency | | Telephone Number | |
| Dep. Richard Russell | | 1941 Phinizy Road Augusta, Ga 30906 | | (706) 821-1616 | |
| Dep. Dennis Gainey | | 1941 Phinizy Road Augusta, Ga 30906 | | (706) 821-1616 | |
| Dep. Carl Cerasuolo | | 1941 Phinizy Road Augusta, Ga 30906 | | (706) 821-1616 | |
| Reporting Officer: Dep. Richard Russell | | | | | |
| Traffic/Unit: | | Traffic/Shift: B-Shift/CBWDC | | Report Date: 1/12/2016 | |
| Approving Supervisor: Sgt. Gwen Johnson | | | | Approval Date: 1/12/2016 | |

Richmond County Sheriff's Office Internal Incident Report

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| Case No.: | Incident Date: 9/24/2015 | Incident Time: 1247pm | | |
|--|---|---|--------------------------|-----------------------|
| <input type="checkbox"/> Original Report <input checked="" type="checkbox"/> Corrected Copy <input type="checkbox"/> Supplemental Report | | | | |
| Incident Location: Housing/H-Pod | County: Richmond | | | |
| Incident Type(s): <input type="checkbox"/> DUI <input checked="" type="checkbox"/> Use of Force <input type="checkbox"/> Suspended/Revoked Driver's License (Check all that apply) <input type="checkbox"/> Pursuit <input type="checkbox"/> Stolen Vehicle <input type="checkbox"/> Wanted Person <input type="checkbox"/> Drug Seizure <input type="checkbox"/> Other: _____ | | | | |
| Vehicle Information | | | | |
| Year: | Make: | Model: | | |
| Tag: | Year: | State: | | |
| Vehicle Impounded Location: | | Color: | | |
| Released To: <input type="checkbox"/> Passenger <input type="checkbox"/> Wrecker Service: _____ | | Inventory <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| <input type="checkbox"/> Family Member/ Friend <input type="checkbox"/> Another Agency: _____ | | | | |
| Violator / Complainant Information | | | | |
| Violator #: 1 | Driver: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Name: Kosten, Noah | | |
| Date of Birth: █████ 1996 | Race: Black | Weight: 160 Height: Ft: 5 In: 11 Marital Status: Single | | |
| Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female | Eye Color: Brown | Hair Color: Brown Telephone Number: (706) 821-1616 | | |
| Driver's License No.: | State: | Social Security No.: - - | | |
| Address: | | Employer: | | |
| City: | State: | Zip Code: | | |
| Violator #: | Driver: <input type="checkbox"/> Yes <input type="checkbox"/> No | Name: | | |
| Date of Birth: | Race: | Weight: Height: Ft: In: Marital Status: | | |
| Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female | Eye Color: | Hair Color: Telephone Number: () - | | |
| Driver's License No.: | State: | Social Security No.: - - | | |
| Address: | | Employer: | | |
| City: | State: | Zip Code: | | |
| Related Reports | | | | |
| Type of Report | Report Number | Report Date | | |
| | | | | |
| | | | | |
| | | | | |
| Charges | | | | |
| Violator # | Citation # | Code Section | Felony | Violation Description |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | |
| Was this Incident Audio/Video Recorded? <input type="checkbox"/> Yes <input type="checkbox"/> No By : | | | | |
| Witnesses / Assisting Officers | | | | |
| Name | Address / Agency | | Telephone Number | |
| Dep. Carl Garganeous | 1941 Phinizy Road/CBWDC | | (706) 821-1616 | |
| Dep. Richard Russell | 1941 Phinizy Road/CBWDC | | (706) 821-1616 | |
| Dep. Todd Kitchen | 1941 Phinizy Road/CBWDC | | (706) 821-1616 | |
| Reporting Officer: Dep. Richard Russell | | | | |
| Traffic/Unit: | Traffic/Shift: A/Shift-CBWDC | | Report Date: 9/24/2015 | |
| Approving Supervisor: Lt. Robert West | <i>Lt. Robert West</i> | | Approval Date: 9/24/2015 | |