

INCIDENT DATA		Agency Name <b>Forsyth County Sheriff's Office</b>				INCIDENT REPORT PUBLIC COPY				Case# <b>2022-121287</b>							
		ORI <b>GA0580000</b>								Date / Time Reported <b>12/22/2022 22:29 Thu</b>		Last Known Secure <b>12/22/2022 22:29 Thu</b>		At Found <b>12/22/2022 22:29 Thu</b>			
Location of Incident <b>650 ATLANTA HWY/BUFORD HWY, Cumming</b>		Premise Type <b>Highway/road/alley/stre</b>		Zone/Tract <b>S32</b>													
#1	Crime Incident(s) <b>Dui -driving Under The Influence Of Alcohol - M - 40-6-391(A)(1)</b>		(Com) <b>M</b>		Weapon / Tools <b>None</b>				Activity <b>N</b>								
	Entry		Exit		Security												
	#2		Crime Incident <b>Possession Of Open Alcohol Container By Driver - M - 40-6-253</b>		(Com) <b>M</b>		Weapon / Tools <b>None</b>				Activity <b>P</b>						
Entry		Exit		Security													
#3	Crime Incident <b>Obstruction Of Police - Other - M 16-10-24*</b>		(Com) <b>M</b>		Weapon / Tools <b>None</b>				Activity <b>N</b>								
	Entry		Exit		Security												
MO Force Used/ <b>NONE</b>																	
VICTIM																	
# of Victims <b>1</b>		Type: <b>SOCIETY/PUBLIC</b>				Injury:				Domestic: <b>NO</b>							
<b>V1</b>		Victim/Business Name (Last, First, Middle) <b>State Of Georgia</b>				Victim of Crime # <b>1,2,3,</b>		DOB <b>Age</b>		Race Sex		Relationship To Offender		Resident Status		Military Branch/Status	
Home Address										Home Phone							
Employer Name/Address								Business Phone		Mobile Phone							
VYR		Make		Model		Style		Color		Lic/Lis		VIN					
OTHERS																	
INVOLED																	
PROPERTY																	
CODES: V- Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim) Type: Injury:																	
Code		Name (Last, First, Middle)				Victim of Crime #		DOB <b>Age</b>		Race Sex		Relationship To Offender		Resident Status		Military Branch/Status	
Home Address										Home Phone							
Employer Name/Address								Business Phone		Mobile Phone							
Type: Injury:																	
Code		Name (Last, First, Middle)				Victim of Crime #		DOB <b>Age</b>		Race Sex		Relationship To Offender		Resident Status		Military Branch/Status	
Home Address										Home Phone							
Employer Name/Address								Business Phone		Mobile Phone							
1 = None 2 = Burned 3 = Counterfeit / Forged 4 = Damaged / Vandalized 5 = Recovered 6 = Seized 7 = Stolen 8 = Unknown ("OJ" = Recovered for Other Jurisdiction)																	
VI #	Code	Status Frm/To	Value		OJ	QTY	Property Description				Make/Model		Serial Number				
	PAS	1	\$0.00			1	2009 SILV, TEV2135 GA				FORD Escape		1FMCU03G29KB87278				
Deputy/ID# <b>ROBERTS, S. J. (UPD, SPCT) (B3101)</b>																	
Invest ID# <b>(0)</b>						Supervisor <b>PITTMAN, K. D. (UPD, SPCT)</b>											
Complainant Signature				Case Status <b>Cleared By Arrest</b>				Case Disposition:				Page 1					
				<b>12/22/2022</b>													

# Incident Report Additional Offense List

Forsyth County Sheriff's Office

OCA: 2022-121287

Offense List (Continued)

Page 2

Counter	Offense Description	Fel/Misd	Statute	Completed/Attempted
# 4	<i>FOLLOWING TOO CLOSELY - M</i>	<i>M</i>	<i>40-6-49</i>	<i>Com</i>
# 5	<i>FAILURE TO USE SEATBELTS</i>	<i>M</i>	<i>40-8-76.1</i>	<i>Com</i>