



INTER-OFFICE MEMORANDUM

Recommendation of Concurrence/ Non-Concurrence

- Damage to City Property
- Vehicle Pursuit
- Officer Injured on Duty/Workman's Comp
- Response to Resistance/Aggression (UOF)
- Citizen/Internal Complaint
- Refer to Internal Affairs

CASE NUMBER: 2019-004871 OFFICER: Ronnie Wyatt DATE: 07/02/2019

TO: MAJOR/APC Capt. E. Woods

I, Captain/AWC Capt. T. Blackmon concur/do not concur with Lt. D. Green and SGT. N. Wellington's recommendation.

Remarks: _____

WATCH COMMANDER: [Signature] 7/5/19
Signature Date

I, Major /APC T. Blackmon concur do not concur with Capt's recommendation.

Remarks: _____

DIVISION COMMANDER/APC: [Signature] 7/5/19
Signature Date

To: CHIEF K. MEADOWS

I, Captain G.T. Johnson, concur / do not concur with _____'s recommendation.

Remarks/Reason:

OPS COMMANDER: _____
Signature Date



INTER-OFFICE MEMORANDUM

DATE: 7-2-2019

TO: Capt. T. Blackmon

FROM: Lt. D. Green *DK*

SUBJECT: Cpl. R. Wyatt's write up (case 2019-004871)

After viewing Sgt. Wellington's Investigation packet into Cpl. R. Wyatt, I concur with her recommendation to forward this extensive matter to the Office of Professional Standards (Internal Affairs) for further review.

DK

DK



INTER-OFFICE MEMORANDUM

DATE: 06/27/2019
TO: Lt. Dwight Green
FROM: SGT. Naeemah. Wellington *M.W. 7/2/19*
SUBJECT: Cpl. Ronnie Wyatt Accident Report 2019-004871

Lt. Green,

On April 14, 2019 at 2344 HRS Cpl. Ronnie Wyatt was dispatched to 5185 Old National HWY, College Park, GA 30349 in reference to a motor vehicle accident. At this point neither you or I were assigned to Grey Nights. Per my research the accident involved a gray Chevrolet Equinox and a white Ford Transit Van. Based on the event history the equinox went through a GCIC query but the transit van did not. Cpl. Wyatt requested South dispatch for an accident case number and was issued case number 2019-004871.

On April 15, 2019 at 1315 HRS Cpl. Marilyn White was dispatched to a motor vehicle accident and was issued case number 2019-004901. Due to Cpl. Wyatt not completing his accident report prior to him leaving shift, Cpl. White was able to use his case number.

On April 30, 2019 Cpl. Wyatt was called in for Military duty and the orders advised he would return to work on May 27, 2019. Cpl. Wyatt returned to work on June 3, 2019 and was then pulled into the office to complete all missing reports. When Cpl. Wyatt advised me that he was finished with all outstanding reports I inquired about accident report 2019-004871. Cpl. Wyatt advised me he was missing Mr. Newberry's vehicle information and that he attempted multiple times to call Mr. Newberry but he did not answer. Cpl. Wyatt stated that he emailed Mr. Newberry advising him the issue and to please send him the vehicle information.

On June 12, 2019 I asked Cpl. Wyatt did he get the vehicle information from Mr. Newberry and he advised he did and that he would complete the report. On June 23, 2019 I checked to see if Cpl. Wyatt completed the report and realized that the case number was used by Cpl. White. I then instructed Cpl. Wyatt to come to the precinct and instructed him to complete the report under case number 2019-004901 prior to him leaving shift. At that time I realized that Cpl. Wyatt did not complete the report at all due to viewing him entering vehicle information and driver information. At 0746 HRS Cpl. Wyatt called me and advised he completed the report. I then went into the traffic report section and I viewed the report in there. At 0842 HRS I received a phone call from Greg Newberry JR. who advised he was at the Old National precinct attempting to pick up the accident report. Mr. Newberry stated that he had case number 2019-004901 but he was not listed in the report nor was the vehicle he was driving. Mr. Newberry stated that he was driving a white Ford Transit Van and the other driver was in a Gray Chevrolet Equinox.

I then called Grays Towing and asked what vehicle did they tow on the incident time and date. Grays personnel advised they had a white 2019 Ford Transit Van Temporary GA: TAG: 24242946 VIN: 1FTYR2CM2KKA13973. I ran the vehicle through GCIC and the vehicle came back stolen out of Union City PD. The report date for Union City was January 22, 2019. I then notified East Point police and they responded to Grays Towing and removed the vehicle from GCIC.

After viewing the Utility Body Worn footage of the scene it appeared that it was a three vehicle accident. It also appeared that Cpl. Blalock wrote down all of the information from the accident and gave the piece of paper he wrote the information down on to Cpl. Wyatt.

Based on my investigation Cpl. Ronnie Wyatt committed the following infractions from the South Fulton General Orders:

*Code of Conduct Canons

Canon 3: Insubordination

Canon 3: INSUBORDINATION

Failure or deliberate refusal of any employee to obey a lawful order given by a superior officer or an employee acting in a supervisory capacity shall be insubordination. Ridiculing a superior officer/supervisor or their orders, whether in or out of their presence, is also insubordination. Employees will promptly obey all proper and lawful orders and will not be discourteous, abusive, disloyal, profane, bitter or threatening to any higher authority.

*Patrol/ Field Operations Division

Preliminary Investigations

PRELIMINARY INVESTIGATIONS {SC 5.19} 17

The Patrol Division is responsible for conducting preliminary investigations of all incidents and categories of crime. Procedures are established to aid in conducting a preliminary investigation:

Upon arrival at a scene, the officer shall observe all the conditions, events, and remarks, to include

- Provide aid to the injured
- Determining if an offense has actually been committed and if so, the exact nature of the offense
- Locate and identify witnesses, if applicable
- Full name, telephone number, and address
- Maintain the crime scene and protect evidence
- Interview the complainant, victim, and witnesses when available
- Obtain description of suspects (name, address, physical description)
- Determine what information witnesses, victim, or complainant knows
- Furnish other field units through radio the descriptions, method, and direction of flight and other relevant information concerning wanted person or vehicles
- Arrange for the collection of evidence
- Notify investigators and / or identification section (if necessary) to collect evidence and photograph the scene

Due to the multiple infractions with the South Fulton General Orders and Police and Procedures I recommend this case be turned over to Internal Affairs.

On 07/02/2019 I was able to assign the correct case numbers to each case with permission from Lt. W. Orgertrice.

Attached is memorandum's from Cpl. R. Wyatt and Cpl. C. Blalock, Cpl. Wyatt's original accident report (with false information), the police report from Union city, police report from East Point Police, the series of emails from front desk staff, Cpl. Wyatt's military orders, an email from Greg Newberry to Cpl. Wyatt, and the GCIC stolen vehicle notification.

I am currently attempting to make the appropriate corrections to the report with Cpl. R. Wyatt.

Thank You for your time.

Sergeant Naemah Wellington

1L01GA0607201008245.FCCX-00235069 NCIC1 20190624 09:13:57 20190624 09:13:56 02EC011853
1L0102EC0118532QV GA0607201 MKE/STOLEN VEHICLE ORI/GA0600600 LIC/24242946 LIS/GA
LIY/2019 LIT/TM VIN/1FTYR2CM2KKA13973 VYR/2019 VMA/FORD VMO/TRN VST/LL VCO/WHI
DOT/20190122 OCA/19-001051 VLD/20190410 MIS/0FCR D MCCOURT UCPD/CCF OPT/OUT
NIC/V100905696 DTE/20190130 1536 EST DLU/20190410 0855 EST ORI IS UNION CITY PD 770 964-1333
IMMED CONFIRM RECORD WITH ORI

1L01GA0607201008245.FCCX-00235070 DORROWS 20190624 09:13:57 20190624 09:13:57
02EC011853 Georgia Driver Record and Integrated Vehicle Enterprise System RESPONSE
BASED UPON: LIC/24242946 LIT/ LIY/ LIENS: VEHICLE DETAIL RESPONSE VIN: [REDACTED]
1FTYR2CM2KKA13973 2019 FORD TRANSIT T-250 VN WHITE CUSTOMER ID: DOB: 19850316
ELIZABETH HUBER 1025 LATHROP AVE RIVER FOREST IL 60305-1450 REGISTRATION STATUS:
N/A PERMANENT: Y INSUR: UNKNOWN INSURANCE1L01GA0607201008245.FCCX-00235070 DORROWS
20190624 09:13:57 20190624 09:13:57 02EC011853 Georgia Driver Record and [REDACTED]
Integrated Vehicle Enterprise System RESPONSE BASED UPON: LIC/24242946 LIT/ LIY/
LIENS: VEHICLE DETAIL RESPONSE VIN: 1FTYR2CM2KKA13973 2019 FORD TRANSIT T-250 VN
WHITE CUSTOMER ID: DOB: 19850316 ELIZABETH HUBER 1025 LATHROP AVE RIVER FOREST IL
60305-1450 REGISTRATION STATUS: N/A PERMANENT: Y INSUR: UNKNOWN INSURANCE STATUS
INSURANCE POLICY #: ENGINE CYL: 6 FUEL: Flex Fuel NOTES: This plate is no longer
in the system. Retrieving data from the current vehicle registration. REFERENCE
ID: 231373867624 *END OF MESSAGE* STATUS INSURANCE POLICY #: ENGINE CYL: 6 FUEL:
Flex Fuel NOTES: This plate is no longer in the system. Retrieving data from the
current vehicle registration. REFERENCE ID: 231373867624 *END OF MESSAGE*



INTER-OFFICE MEMORANDUM

DATE: 07/01/2019
TO: Lt. Green
FROM: Cpl. Wyatt *[Signature]* 0096
SUBJECT: accident Old Bill Cook / Old National Hwy

On 4/14/2019, I responded to the intersection of Old Bill Cook Rd. and Old National Hwy to assist with an accident where an ambulance was also dispatched. Upon arrival there were multiple cars that were involved and I began to assist with gathering information. During the collection of information I agreed to take the role as lead officer. The vehicle's involved were checked on scene through GCIC to verify insurance status. Due to the number of cars involved and there being a change in lead Officers, I did not verify all involved vehicle information was received. I did willingly agree to be the lead Officer for this accident. This memorandum was generated upon the request of supervision.



INTER-OFFICE MEMORANDUM

DATE: 6/27/19

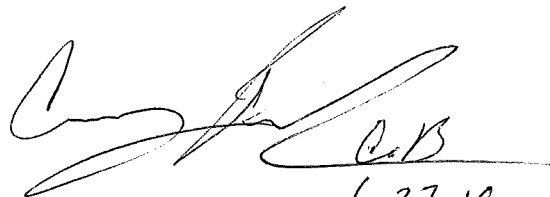
TO: Sgt. Wellington

FROM: Cpl. Blalock

SUBJECT: Accident case number 2019-004871

To whom it may concern,

I, Cpl. Blalock was dispatched to a motor vehicle accident at Old National Hwy on 4/14/19 case number 2019-004871. Upon arrival, myself and Cpl. Wyatt conducted an investigation on the accident where two vehicles were traveling northbound and two vehicles were traveling southbound on Old National Hwy. I Cpl. Blalock assisted Cpl. Wyatt by collecting the drivers and passenger's information. After writing the information down, I handed the information to Cpl. Wyatt who agreed to work the accident and pulled a case number under his unit number. I, Cpl. Blalock do not recall doing any GCIC inquiries on anyone's information that night.


6-27-19

| | | | | | | | | | | | | | | | | | |
|--|--|---|-------------------------------|---|--|---|--|---|--------------------------------|---|--|--|--|--|-----------------------------|--|--|
| Agency Case Number 2019004871 | | Agency NCIC Number GA0607200 | | GEORGIA MOTOR VEHICLE CRASH REPORT | | | | County FULTON | | Date Rec. By GDOT | | | | | | | |
| Estimated Crash Date 04/14/2019 | | Crash Time 23:50 | | Dispatch Date 04/14/2019 | | Dispatch Time 23:52 | | Arrival Date 04/14/2019 | | Arrival Time 23:55 | | | | | | | |
| Road of Occurrence 5185 OLD NATIONAL HWY | | At Its Intersection With OLD BILL COOK RD | | Vehicles 2 | | Total Number Of Injuries 1 | | Fatalities 0 | | Inside City Of: SOUTH | | | | | | | |
| Not At Its Intersection But | | <input type="checkbox"/> Miles <input type="checkbox"/> Feet | | <input type="checkbox"/> North <input type="checkbox"/> South | | <input type="checkbox"/> East <input type="checkbox"/> West | | Of: _____ | | <input type="checkbox"/> Corrected Report | | | | | | | |
| Latitude (Y) (Format) +33.61426 00.00000 | | Longitude (X) (Format) -84.47251 -00.00000 | | <input type="checkbox"/> Suppl. To Original | | <input type="checkbox"/> Hit and Run? | | | | | | | | | | | |
| Unit # 1 <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike LAST NAME FIRST MIDDLE CHANDLER, WALTER Address <input checked="" type="checkbox"/> Susp At Fault 1003 CALGARY GLEN | | | | | | Unit # 2 <input type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike LAST NAME FIRST MIDDLE JOHNSON, WANDA Address <input type="checkbox"/> Susp At Fault 270 CHILDS DR NW | | | | | | | | | | | |
| City AUSTELL State GA Zip 30168 DOB /1981 | | | | | | City ATLANTA State GA Zip 30314 DOB /1960 | | | | | | | | | | | |
| Driver's License No. _____ Class C State GA Country US | | | | | | Driver's License No. _____ Class C State GA Country US | | | | | | | | | | | |
| Insurance Co. UNKNOWN | | Policy No. UNKNOWN | | Telephone No. _____ | | Insurance Co. LOYA INSURANVE | | Policy No. 40609632308 | | Telephone No. _____ | | | | | | | |
| Year 2012 | | Make CHEV | | Model EQUINOX | | Year 2011 | | Make TOYT | | Model CAMERY | | | | | | | |
| VIN 2GNALDEK2C6362606 | | | | VIN 4T1BF3EK4BU662139 | | | | Vehicle Color GRY | | | | | | | | | |
| Tag # RHP6827 | | State GA | | County FULTON | | Year 2019 | | Tag # RMB7220 | | State GA | | | | | | | |
| Trailer Tag # _____ | | State _____ | | County _____ | | Year _____ | | Trailer Tag # _____ | | State _____ | | | | | | | |
| <input checked="" type="checkbox"/> Same as Driver Owner's Last Name LYONS, TISA First REGINA Middle _____ | | | | | | <input checked="" type="checkbox"/> Same as Driver Owner's Last Name JOHNSON, WANDA First _____ Middle _____ | | | | | | | | | | | |
| Address 322 CAMELOT DR | | | | | | Address 270 CHILDS DR NW | | | | | | | | | | | |
| City ATLANTA State GA Zip 30349 | | | | | | City ATLANTA State GA Zip 30314 | | | | | | | | | | | |
| Removed By S & W <input type="checkbox"/> Request <input type="checkbox"/> List | | | | | | Removed By S & W <input type="checkbox"/> Request <input type="checkbox"/> List | | | | | | | | | | | |
| Alcohol Test 2 | | Type _____ | | Results _____ | | Drug Test 2 | | Type _____ | | Results _____ | | | | | | | |
| First Harmful Event: 11 | | | Most Harmful Event: 11 | | | Operator/Ped Cond: 1 | | | First Harmful Event: 11 | | | Most Harmful Event: 11 | | | Operator/Ped Cond: 1 | | |
| Operator Contributing Factors: 11 | | | | | | Operator Contributing Factors: 1 | | | | | | | | | | | |
| Vehicle Contributing Factors: 1 | | | | Roadway Contributing Factors: 1 | | | | Vehicle Contributing Factors: 1 | | | | Roadway Contributing Factors: 1 | | | | | |
| Direction of Travel: 2 | | Vehicle Maneuver: 6 | | Non-Motor Maneuver: _____ | | Direction of Travel: 1 | | Vehicle Maneuver: 5 | | Non-Motor Maneuver: _____ | | | | | | | |
| Vehicle Class: 1 | | Vehicle Type: 1 | | Vision Obscured: 1 | | Vehicle Class: 1 | | Vehicle Type: 1 | | Vision Obscured: 1 | | | | | | | |
| Number of Occupants 1 | | Area of Initial Contact: 12 | | Damage to Veh: 4 | | Number of Occupants 1 | | Area of Initial Contact: 2 | | Damage to Veh: 3 | | | | | | | |
| Traffic-Way Flow: 1 | | Road Comp: 2 | | Road Character: 1 | | Traffic-Way Flow: 1 | | Road Comp: 2 | | Road Character: 1 | | | | | | | |
| Number of Lanes: 5 | | Posted Speed: 45 | | Work Zone: 0 | | Number of Lanes: 5 | | Posted Speed: 45 | | Work Zone: 0 | | | | | | | |
| Traffic Ctrl 1 | | Device Inoperative? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | Traffic Ctrl 1 | | Device Inoperative? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | | | | | | |
| Citation Information: | | | | | | Citation Information: | | | | | | | | | | | |
| Citation # _____ | | O.C.G.A. § 40-6-123 | | | | Citation # _____ | | O.C.G.A. § _____ | | | | | | | | | |
| Citation # _____ | | O.C.G.A. § _____ | | | | Citation # _____ | | O.C.G.A. § _____ | | | | | | | | | |
| Citation # _____ | | O.C.G.A. § _____ | | | | Citation # _____ | | O.C.G.A. § _____ | | | | | | | | | |
| COMMERCIAL MOTOR VEHICLES ONLY | | | | | | | | | | | | | | | | | |
| Carrier Name _____ | | | | | | Carrier Name _____ | | | | | | | | | | | |
| Address _____ | | City _____ | | State _____ | | Zip _____ | | Address _____ | | City _____ | | | | | | | |
| U.S. D.O.T. # _____ | | No. of Axles _____ | | G.V.W.R. _____ | | U.S. D.O.T. # _____ | | No. of Axles _____ | | G.V.W.R. _____ | | | | | | | |
| Cargo Body Type _____ | | Vehicle Config. _____ | | Interstate <input type="checkbox"/> Intrastate <input type="checkbox"/> | | Fed. Reportable <input type="checkbox"/> Yes <input type="checkbox"/> No | | Cargo Body Type _____ | | Vehicle Config. _____ | | | | | | | |
| C.D.L.? <input type="checkbox"/> Yes <input type="checkbox"/> No | | C.D.L. Suspended? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | C.D.L.? <input type="checkbox"/> Yes <input type="checkbox"/> No | | C.D.L. Suspended? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | | | | |
| Vehicle Placarded? <input type="checkbox"/> Yes <input type="checkbox"/> No | | Hazardous Materials? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | Vehicle Placarded? <input type="checkbox"/> Yes <input type="checkbox"/> No | | Hazardous Materials? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | | | | |
| Haz Mat Released? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | Haz Mat Released? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | | | | | | |
| If YES, Name or 4 Digit Number from Diamond or Box: _____ | | | | | | If YES, Name or 4 Digit Number from Diamond or Box: _____ | | | | | | | | | | | |
| 1 Digit Number from Bottom of Diamond: _____ | | | | | | 1 Digit Number from Bottom of Diamond: _____ | | | | | | | | | | | |
| <input type="checkbox"/> Ran Off Road <input type="checkbox"/> Down Hill Runaway <input type="checkbox"/> Cargo Loss or Shift <input type="checkbox"/> Separation of Units | | | | | | <input type="checkbox"/> Ran Off Road <input type="checkbox"/> Down Hill Runaway <input type="checkbox"/> Cargo Loss or Shift <input type="checkbox"/> Separation of Units | | | | | | | | | | | |

COLLISION FIELDS

| | | | | |
|------------------------|-------------------------------|------------|----------------------|--------------------|
| Manner of Collision: 1 | Location at Area of Impact: 7 | Weather: 1 | Surface Condition: 1 | Light Condition: 4 |
|------------------------|-------------------------------|------------|----------------------|--------------------|

NARRATIVE

Unit 2 was traveling south on Old National Hwy when it was struck by unit 1. Unit 1 driver was transported by Grady Unit 8407 to Atlanta Medical Center. I responded to the hospital to cite Unit 1 driver with improper lane change.

* * * E N D * * *

DIAGRAM



PROPERTY DAMAGE INFORMATION

| | |
|----------------------------|--------|
| Damage Other Than Vehicle: | Owner: |
|----------------------------|--------|

WITNESS INFORMATION

| Name (Last, First) | Address | City | State | Zip Code | Telephone Number |
|--------------------|---------|------|-------|----------|------------------|
|--------------------|---------|------|-------|----------|------------------|

OCCUPANT INFORMATION

| | | | | | | | | | | |
|---|--------------------------------------|--------|---------------|-------------|---|------------|-----------------------------------|------------|--|------------------------|
| 1 | Name (Last, First): CHANDLER, WALTER | | | | Address 1003 CALGARY GLEN AUSTELL, GA, 30168- | | | | | |
| | Age: 37 | Sex: M | Unit #: 1 | Position: 1 | Safety Eq: 1 | Ejected: 1 | Extricated: 2 | Air Bag: 1 | Injury: 4 | Taken for Treatment: 1 |
| | Injured Taken To: ATLANTA MEDICAL | | By: GRADY EMS | | EMS Notified Time (Fatality Only): | | EMS Arrival Time (Fatality Only): | | Hospital Arrival Time (Fatality Only): | |
| 2 | Name (Last, First): JOHNSON, WANDA | | | | Address 270 CHILDS DR NW ATLANTA, GA, 30314- | | | | | |
| | Age: 59 | Sex: F | Unit #: 2 | Position: 1 | Safety Eq: 1 | Ejected: 1 | Extricated: 2 | Air Bag: 2 | Injury: 0 | Taken for Treatment: 2 |
| | Injured Taken To: | | By: | | EMS Notified Time (Fatality Only): | | EMS Arrival Time (Fatality Only): | | Hospital Arrival Time (Fatality Only): | |
| 3 | Name (Last, First): | | | | Address | | | | | |
| | Age: | Sex: | Unit #: | Position: | Safety Eq: | Ejected: | Extricated: | Air Bag: | Injury: | Taken for Treatment: |
| | Injured Taken To: | | By: | | EMS Notified Time (Fatality Only): | | EMS Arrival Time (Fatality Only): | | Hospital Arrival Time (Fatality Only): | |
| 4 | Name (Last, First): | | | | Address | | | | | |
| | Age: | Sex: | Unit #: | Position: | Safety Eq: | Ejected: | Extricated: | Air Bag: | Injury: | Taken for Treatment: |
| | Injured Taken To: | | By: | | EMS Notified Time (Fatality Only): | | EMS Arrival Time (Fatality Only): | | Hospital Arrival Time (Fatality Only): | |

ADMINISTRATIVE

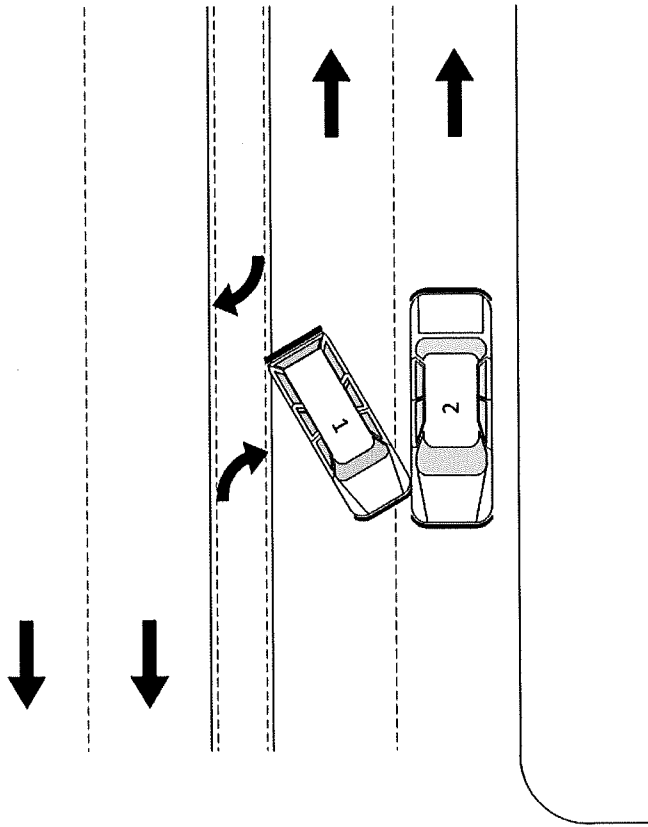
| | | | | | |
|---|----------------------|--|----------------------|--------------------------|--|
| Photos Taken: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | By: | Officer Note: If collision resulted in a fatality, please send prompt notification to the GDOT Crash Reporting Unit via either email at GeorgiaFARS@dot.ga.gov or Fax at (404) 635-2963. | | | |
| Report By: WYATT, R. | Agency: SOUTH FULTON | Report Date: 06/12/2019 | Checked By: JIRA, D. | Date Checked: 06/24/2019 | |

ADDITIONAL or FULL PAGE DIAGRAM



Indicate North

5185 OLD NATIONAL HWY



OLD BILL COOK RD

Drawing Not To Scale.

RPTID: 164025824
AGENCY: GA0600600

- INCIDENT REPORT -
UNION CITY POLICE DEPARTMENT

CASENO: 19-001051
Print Date: 06/26/2019 08:10:28 PM

| | | | | | | | | | | | |
|-------|-------------------|-------------------------------------|-----------|------------------|---------------|---|---------------------------------------|-------------------------------------|--|---|--|
| EVENT | INCIDENT TYPE: | THEFT BY TAKING MORE THAN \$1500.00 | COUNTS | 1 | INCIDENT CODE | 16-8-2 | PREMISE TYPE | <input type="checkbox"/> 1- HIGHWAY | <input type="checkbox"/> 2- SVC.STATION | | |
| | IDENTITY FRAUD | | 1 | 16-9-121 | | <input type="checkbox"/> 3- CONVENIENCE STORE | <input type="checkbox"/> 4- BANK | | | | |
| | IDENTITY FRAUD | | 1 | 16-9-121 | | <input checked="" type="checkbox"/> 5- COMMERCIAL | <input type="checkbox"/> 6- RESIDENCE | | | | |
| | INCIDENT LOCATION | 4355 138 - - UNION CITY 30291 | LOC. CODE | Auto Nation Ford | | <input type="checkbox"/> 7- SCHOOL/ CAMPUS | <input type="checkbox"/> 8- ALL OTHER | | | | |
| | INCIDENT DATE | 01/22/2019 | TIME | 1304 | TO | 01/30/2019 | TIME | 1221 | STRANGER TO STRANGER | <input type="checkbox"/> 1- GUN | <input type="checkbox"/> 2- KNIFE CUTTING TOOL |
| | | | | | | | | | YES <input type="checkbox"/> NO <input type="checkbox"/> UNK <input checked="" type="checkbox"/> | <input type="checkbox"/> 3- HANDS/FIST/ETC. | <input type="checkbox"/> 4- OTHER |

| | | | | | | | | | | | | | | |
|--------|--------------------|---|------------------------------|-------------------------------------|--------------|------------|-----|------|-----|----|-----------------|---|----------------|--|
| VICTIM | COMPLAINANT'S NAME | LAMB, BRIAN SCOTT | ADDRESS | 4355 SR 138 - UNION CITY, GA 30291- | PHONE NUMBER | [REDACTED] | | | | | | | | |
| | VICTIM'S NAME | HUBER, ELIZABETH | RACE | B | SEX | F | DOB | 1985 | AGE | 33 | RESIDENCE PHONE | - | BUSINESS PHONE | |
| | ADDRESS | 1025 LATHROP AVE - RIVER FOREST, IL 60305- | | | | | | | | | | | | |
| | STUDENT? | <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | IF YES, NAME VICTIM'S SCHOOL | | | | | | | | | | | |

| | | | | | | | | | | | | | | |
|----------|-----------------------|-----------------------|--|---|-----------------|--------------|--------|-----------------|------------|--------|---------------|------|-----|----|
| OFFENDER | OFFENDER'S NAME | SERDA, AMANDA NICHOLE | PERSON ID | | SSN | | RACE | U | SEX | F | DATE OF BIRTH | 1985 | AGE | 33 |
| | SUSPECT | ADDRESS | 6350 OAKLEY RD APT 1506 - UNION CITY, GA 30291 | CENSUS TRACT | | HEIGHT | 501 | WEIGHT | 119 | HAIR | BLK | EYES | BRN | |
| | WARRANT | CHARGES | THEFT BY TAKING MORE THAN \$1500.00 | COUNTS | 1 | OFFENSE CODE | 16-8-2 | OFFENSE/ARREST | 1 | JURIS. | 1. CITY | | | |
| | ARREST | CHARGES | THEFT BY TAKING MORE THAN \$1500.00 | COUNTS | 1 | OFFENSE CODE | 16-8-2 | OFFENSE/ARREST | 1 | JURIS. | 2. COUNTY | | | |
| | | CHARGES | FORGERY IN THE FIRST DEGREE- OTHER OBJEC | COUNTS | 1 | OFFENSE CODE | 16-9-1 | OFFENSE/ARREST | 1 | JURIS. | 3. STATE | | | |
| | TOTAL NUMBER ARRESTED | 1 | ARREST AT OR NEAR OFFENSE SCENE | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | DATE OF OFFENSE | 01/22/2019 | JURIS. | 4. OUT OF STATE | 5. UNKNOWN | | | | | |

| | | | | | | | | | | | | | |
|---------|--|------------------|----------|-------|--------------------------|-------|--------------------------|-------|--------------------------|------------|--------------------------|----------------|--------------------------|
| VEHICLE | <input checked="" type="checkbox"/> STOLEN | TAG NUMBER | 11192149 | STATE | GA | YEAR | 0 | V.I.N | 1FTYR2CM0KKA04253 | PLATE ONLY | <input type="checkbox"/> | VIN PLATE ONLY | <input type="checkbox"/> |
| | <input type="checkbox"/> RECOVD | YEAR | 2019 | MAKE | FORD | MODEL | TRANSIT | STYLE | MP | COLOR | WHITE | | |
| | <input type="checkbox"/> SUSPECTS | MOTOR SIZE (CID) | | AUTO | <input type="checkbox"/> | MAN. | <input type="checkbox"/> | SPD. | <input type="checkbox"/> | INSURED BY | | | |

| | | | |
|---------------|---------|------------|------------|
| WITNESS NAMES | ADDRESS | HOME PHONE | WORK PHONE |
| | | | |

| | | | | | | | | | | |
|----------|----------|-------------|-------------|-----------------------|--------|----------------------|--------|-----------------|--------|---|
| PROPERTY | VEHICLES | STOLEN | \$94,694.03 | CURRENCY, NOTES, ETC. | \$0.00 | JEWELRY, PREC METALS | \$0.00 | FURS | \$0.00 | PROPERTY RECOVERY INFO ONLY THEFT / RECOVERY JURISDICTION CODES 1. CITY 2. COUNTY 3. STATE 4. OUT OF STATE 5. UNKNOWN |
| | | RECOVERED | \$0.00 | | \$0.00 | | \$0.00 | | \$0.00 | |
| | CLOTHING | STOLEN | \$0.00 | OFFICE EQUIP. | \$0.00 | TV, RADIO, ETC. | \$0.00 | HOUSEHOLD GOODS | \$0.00 | |
| | | RECOVERED | \$0.00 | | \$0.00 | | \$0.00 | | \$0.00 | |
| | FIREARMS | STOLEN | \$0.00 | CONSUMABLE GOODS | \$0.00 | LIVESTOCK | \$0.00 | OTHER | \$0.00 | |
| | | RECOVERED | \$0.00 | | \$0.00 | | \$0.00 | | \$0.00 | |
| | TOTAL | \$94,694.03 | | | | | | TOTAL | \$0.00 | |

| | | |
|-----------|---|---|
| DRUG ADM. | DID INVESTIGATION INDICATE THAT THIS INCIDENT WAS DRUG RELATED? | <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |
| | IF YES, PLEASE INDICATE THE TYPE OF DRUG(S) USED BY OFFENDER. | <input type="checkbox"/> 1- AMPHETAMINE <input type="checkbox"/> 2- BARBITURATE <input type="checkbox"/> 3- COCAINE <input type="checkbox"/> 4- HALLUCINOGEN <input type="checkbox"/> 5- HEROIN <input type="checkbox"/> 6- MARIJUANA <input type="checkbox"/> 7- METHAMPHETAMINE <input type="checkbox"/> 8- OPIUM <input type="checkbox"/> 9- SYNTHETIC NARCOTIC <input type="checkbox"/> U- UNKNOWN |

| | | | | | | | | |
|-------|---|--|--|--|------------------------------------|--|-------------|------------|
| CLEAR | REQUIRED DATA FIELDS FOR CLEARANCE REPORT | <input checked="" type="checkbox"/> ACTIVE | <input type="checkbox"/> CLEARED BY ARREST | <input type="checkbox"/> EXCEPTIONALLY CLEARED | <input type="checkbox"/> UNFOUNDED | <input type="checkbox"/> OTHER | REPORT DATE | 01/30/2019 |
| | DATE OF CLEARANCE | // | <input checked="" type="checkbox"/> ADULT | <input type="checkbox"/> JUVENILE | <input type="checkbox"/> PENDING | <input type="checkbox"/> CLOSED BY INVESTIGATION | | |

*** SEE INCIDENT REPORT PAGE 2 FOR NARRATIVE ***

| | | | | | | | | |
|-------|-------------------|-----------------|--------|-----|-------------------|-------------|--------|----|
| NARR. | REPORTING OFFICER | MCCOURT, DENNIS | NUMBER | 945 | APPROVING OFFICER | WALLS, DOUG | NUMBER | 20 |
|-------|-------------------|-----------------|--------|-----|-------------------|-------------|--------|----|

RPTID: 164025824

AGENCY: GA0600600

INCIDENT REPORT - NARRATIVE

UNION CITY POLICE DEPARTMENT

Print Date: 06/26/2019 08:10:28 PM

CASENO: 19-001051

On Wednesday, January 30, 2019, at approximately 1220 hours, OFFICER MCCOURT of the Union City Police Department was dispatched to 4355 SR 138 (Auto Nation Ford), Union City, Fulton County, Georgia, 30291, in reference to fraud.

Upon arrival, MCCOURT met with the complainant later identified as BRIAN LAMB an employee of Auto Nation Ford. LAMB stated a black female later identified as AMANDA SERDA purchased two Ford Transit vans from the dealership on 01-22-2019 using the name ELIZABETH HUBER. LAMB stated he then received a call from HUBER stating that she did not purchase any vehicles from Ford and has never been in Georgia before. LAMB stated SERDA fraudulently purchased one 2019 Ford Transit Van VIN 1FTYR2CM0KKA04253 valued at \$47549.41 and one 2019 Ford Transit Van VIN 1FTYR2CM2KKA13973 valued at \$47144.62. LAMB stated on today's date he was able to get SERDA to come back to the dealership to purchase an additional vehicle. LAMB stated once SERDA arrived at the dealership he contacted the Police. MCCOURT then met with SERDA and requested her information. She provided MCCOURT with her proper information.

MCCOURT then placed SERDA in double locked handcuffs and secured her in the rear of Union City Patrol Vehicle marked 9777. MCCOURT then had LAMB complete a written statement form for the incident. MCCOURT then transported SERDA to the Union City Police Department. Upon Arrival, MCCOURT and SERDA met with DETECTIVE WEST of the same department. WEST then interviewed SERDA, but she requested to speak with an attorney. SERDA did spontaneously utter that she could get the vans back. MCCOURT then completed his paperwork and secured warrants for the arrest of SERDA. Once complied MCCOURT then transported SERDA to the South Fulton Municipal Regional Jail. Upon arrival, SERDA was released to jail staff on two Charged of Identity Fraud a violation of O.C.G.A. 16-9-121, two charges of Forgery in the first degree a violation of 16-9-1 and Theft by Taking a violation of O.C.G.A. 16-8-2. The white in color 2019 Ford Transit Van bearing Georgia temporary tag 1119214977 VIN 1FTYR2CM0KKA04253 and 2019 white in color Ford Transit Van bearing Georgia temporary tag 1119214977 VIN 1FTYR2CM2KKA13973 were placed onto G.C.I.C. as stolen. No further action was taken.

Officer Name: MCCOURT, DENNIS

Badge: 945

Date Added: 01/30/2019

RPTID: 164025824
AGENCY: GA0600600

INCIDENT REPORT - PAGE 2

CASENO: 19-001051

UNION CITY POLICE DEPARTMENT
Print Date: 06/26/2019 08:10:28 PM

This is page #2 of the incident report. It contains supplemental persons records including additional Complainants, Victims, Offenders and Witnesses.

All Offenders, Extra Victims, Extra Complainants:

| | | |
|---|----------------------------|------------------|
| Person Name: ELIZABETH HUBER | Pers ID: HUEL031685 | Type: VIC |
| Address: 1025 LATHROP AVE - RIVER FOREST, IL 60305- | Height: 506 | |
| Home Phone: - - | Weight: 140 | |
| Cell Phone: | Hair: BLK | |
| DLNO: IL [REDACTED] SSN: | Eyes: BRN | |
| DOB: [REDACTED] 1985 Age: 33 Race: B Sex: F | | |

| | | |
|---|--------------------|------------------|
| Person Name: AMANDA NICHOLE SERDA | Pers ID: | Type: OFF |
| Address: 6350 OAKLEY RD APT 1506 - UNION CITY, GA 30291 | Height: 501 | |
| | Weight: 119 | |
| | Hair: BLK | |
| | Eyes: BRN | |
| DLNO: GA [REDACTED] SSN: | | |
| DOB: [REDACTED] 1985 Age: 33 Race: U Sex: F | | |

Chrgs: 16-8-2 THEFT BY TAKING MORE THAN \$1500.00
16-8-2 THEFT BY TAKING MORE THAN \$1500.00
16-9-1 FORGERY IN THE FIRST DEGREE- OTHER OBJECT
16-9-1 FORGERY IN THE FIRST DEGREE- OTHER OBJECT
16-9-121 IDENTITY FRAUD
16-9-121 IDENTITY FRAUD

| | | |
|--|----------------------------|------------------|
| Person Name: BRIAN SCOTT LAMB | Pers ID: LABR082167 | Type: COM |
| Address: 4355 SR 138 - UNION CITY, GA 30291- | | |
| Home Phone: [REDACTED] Work Phone: - - | | |
| Cell Phone: | | |

RPTID: 164025824
AGENCY: GA0600600

INCIDENT REPORT - PAGE 2

CASENO: 19-001051

UNION CITY POLICE DEPARTMENT
Print Date: 06/26/2019 08:10:28 PM

This page contains information for all vehicles associated with this case.

All Vehicles

| | | | | | | |
|--|------------------|---|---------|-------------------|--------------------------|--------------------------|
| <input checked="" type="checkbox"/> STOLEN | TAG NUMBER | STATE | YEAR | V.I.N | PLATE ONLY | VIN PLATE ONLY |
| <input type="checkbox"/> RECOVD | 1119214977 | GA | 0 | 1FTYR2CM0KKA04253 | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> SUSPECTS | YEAR | MAKE | MODEL | STYLE | COLOR | |
| | 2019 | FORD | TRANSIT | MP | WHITE | |
| | MOTOR SIZE (CID) | AUTO MAN. SPD. | | | INSURED BY | |
| | | TRANS. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | | | | |

| | | | | | | |
|--|------------------|---|---------|-------------------|--------------------------|--------------------------|
| <input checked="" type="checkbox"/> STOLEN | TAG NUMBER | STATE | YEAR | V.I.N | PLATE ONLY | VIN PLATE ONLY |
| <input type="checkbox"/> RECOVD | 1119214977 | GA | 0 | 1FTYR2CM2KKA13973 | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> SUSPECTS | YEAR | MAKE | MODEL | STYLE | COLOR | |
| | 2019 | FORD | TRANSIT | MP | WHITE | |
| | MOTOR SIZE (CID) | AUTO MAN. SPD. | | | INSURED BY | |
| | | TRANS. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | | | | |

AGENCY ID
GA0600600

TIME
1304

- ARREST / BOOKING REPORT -
UNION CITY POLICE DEPARTMENT

CASE NUMBER
19-001051

DEFENDANT NAME (LAST, FIRST, MIDDLE) PERSON ID RACE SEX DATE OF BIRTH PLACE OF BIRTH
SERDA, AMANDA NICHOLE [REDACTED] U F [REDACTED] 1985 [REDACTED]

AGE HEIGHT WEIGHT HAIR EYES SOCIAL SECURITY NUMBER VISIBLE SCARS AND MARKS GCIC/CK DOCKET NUMBER
33 501 119 BLK BRN [REDACTED] [REDACTED] [REDACTED] [REDACTED]

ADDRESS - NUMBER AND STREET CITY, STATE AND ZIP CODE PHONE NUMBER
6350 OAKLEY RD APT 1506 UNION CITY, GA 30291 [REDACTED]

ALIAS DRIVERS LICENSE NUMBER STATE
[REDACTED] [REDACTED] GA

EMPLOYER OR OCCUPATION ARRESTING AGENCY ARRESTING OFFICER NUMBER
[REDACTED] UNION CITY POLICE DEPT. MCCOURT, DENNIS 945

BOOKING OFFICER NAME NUMBER FINGERPRINTED / PHOTOGRAPHED BY NUMBER CURRENT DATE
[REDACTED] [REDACTED] [REDACTED] [REDACTED] 01/30/2019

DATE OF ARREST TIME LOC CODE LOCATION
01/30/2019 0000 Auto Nation Ford 4355 138

OFFENSE DATE TIME OBTS NUMBER FBI NUMBER
01/22/2019 1304 [REDACTED] [REDACTED]

PERSONAL DATA

| | PHOTO #1 | PHOTO #2 | PHOTO #3 |
|--|----------|----------|----------|
| | | | |

CHARGE

| CHARGE ID | COUNTS | A | COUNTS | B | COUNTS | C |
|-----------|-------------------------------------|---|-------------------------------------|---|------------------------------------|---|
| | 1 | | 1 | | 1 | |
| CHARGE | THEFT BY TAKING MORE THAN \$1500.00 | | THEFT BY TAKING MORE THAN \$1500.00 | | FORGERY IN THE FIRST DEGREE- OTHER | |
| STATUTE | 16-8-2 | | 16-8-2 | | 16-9-1 | |

LOC.

| NEAR SCENE | OFFENSE | ARREST |
|--|--|---|
| <input type="checkbox"/> YES <input type="checkbox"/> NO | <input checked="" type="checkbox"/> CITY <input type="checkbox"/> COUNTY <input type="checkbox"/> STATE <input type="checkbox"/> OUT OF STATE <input type="checkbox"/> UNK | <input type="checkbox"/> CITY <input type="checkbox"/> COUNTY <input type="checkbox"/> STATE <input type="checkbox"/> OUT OF STATE <input type="checkbox"/> UNK |

BOND

| BOND AMT. | BOND TYPE | RET. DATE | BOND CO. |
|-----------|-----------|-----------|----------|
| 0.00 | | // | |
| 0.00 | | // | |
| 0.00 | | // | |

DISPOSITION

| | DAYS | AMOUNT | DAYS | AMOUNT | DAYS | AMOUNT |
|-------------|------|--------|------|--------|------|--------|
| SENTENCE | | | | | | |
| TIME SERVED | | | | | | |
| GOOD TIME | | | | | | |
| BALANCE | | | | | | |
| PAID | | | | | | |
| RECPT. NO. | | | | | | |
| RETURNED | | | | | | |
| RECPT. NO. | | | | | | |

CELL NUMBER TRANSFER REASON

MEDICAL

ANY KNOWN ALLERGIES? YES IF YES, WHAT: _____
ANY HISTORY OF HEART DISEASE? DIABETES: EPILEPSY: HIGH BLOOD PRESSURE:
IS SUBJECT NOW UNDER DOCTOR'S CARE AND/OR TAKING ANY MEDICATIONS? YES LIST: _____

DRUG

ANY SIGNS / HISTORY OF DRUG USE? YES NO IF YES, INDICATE TYPE(S):
 1- AMPHETAMINE 2- BARBITURATE 3- COCAINE U- UNKNOWN
 4- HALLUCINOGEN 5- HEROIN 6- MARIJUANA O- OTHER
 7- METHAMPHETAMINE 8- OPIUM 9- SYNTHETIC NARCOTIC ()

RELEASE DATE TIME RELEASING OFFICER - LAST NAME NUMBER AGENCY RELEASED TO
// 0000 [REDACTED] [REDACTED] [REDACTED]

SIGNATURE OF RECEIVING OFFICIAL: X _____

AGENCY ID
GA0600600

TIME
1304

- ARREST / BOOKING REPORT -

UNION CITY POLICE DEPARTMENT

CASE NUMBER
19-001051

DEFENDANT NAME (LAST, FIRST, MIDDLE) **SERDA, AMANDA NICHOLE**

PERSON ID [] RACE **U** SEX **F** DATE OF BIRTH **1985** PLACE OF BIRTH []

AGE **33** HEIGHT **501** WEIGHT **119** HAIR **BLK** EYES **BRN** SOCIAL SECURITY NUMBER [] VISIBLE SCARS AND MARKS [] GCIC/CK [] DOCKET NUMBER []

ADDRESS - NUMBER AND STREET **6350 OAKLEY RD APT 1506** CITY, STATE AND ZIP CODE **UNION CITY, GA 30291** PHONE NUMBER []

ALIAS [] DRIVERS LICENSE NUMBER [] STATE **GA**

EMPLOYER OR OCCUPATION [] ARRESTING AGENCY **UNION CITY POLICE DEPT.** ARRESTING OFFICER **MCCOURT, DENNIS** NUMBER **945**

BOOKING OFFICER NAME [] NUMBER [] FINGERPRINTED / PHOTOGRAPHED BY [] NUMBER [] CURRENT DATE **01/30/2019**

DATE OF ARREST **01/30/2019** TIME **0000** LOC CODE **Auto Nation Ford** LOCATION **4355 138**

OFFENSE DATE **01/22/2019** TIME **1304** OBTS NUMBER [] FBI NUMBER []

PERSONAL DATA

| | PHOTO #1 | PHOTO #2 | PHOTO #3 |
|--|----------|----------|----------|
| | | | |

CHARGE

| CHARGE ID | COUNTS | A | COUNTS | B | COUNTS | C |
|-----------|---|---|-----------------------|---|-----------------------|---|
| | | | | | | |
| CHARGE | FORGERY IN THE FIRST DEGREE- OTHER | | IDENTITY FRAUD | | IDENTITY FRAUD | |
| STATUTE | 16-9-1 | | 16-9-121 | | 16-9-121 | |

LOC.

| NEAR SCENE | OFFENSE | ARREST |
|--|--|---|
| <input type="checkbox"/> YES <input type="checkbox"/> NO | <input checked="" type="checkbox"/> CITY <input type="checkbox"/> COUNTY <input type="checkbox"/> STATE <input type="checkbox"/> OUT OF STATE <input type="checkbox"/> UNK | <input type="checkbox"/> CITY <input type="checkbox"/> COUNTY <input type="checkbox"/> STATE <input type="checkbox"/> OUT OF STATE <input type="checkbox"/> UNK |

BOND

| BOND AMT. | BOND TYPE | RET. DATE | BOND CO. |
|-------------|-----------|-----------|----------|
| 0.00 | | // | |

DISPOSITION

| | DAYS | AMOUNT | DAYS | AMOUNT | DAYS | AMOUNT |
|-------------|------|--------|------|--------|------|--------|
| SENTENCE | | | | | | |
| TIME SERVED | | | | | | |
| GOOD TIME | | | | | | |
| BALANCE | | | | | | |
| PAID | | | | | | |
| RECPT. NO. | | | | | | |
| RETURNED | | | | | | |
| RECPT. NO. | | | | | | |

CELL NUMBER [] TRANSFER [] REASON []

MEDICAL

ANY KNOWN ALLERGIES? YES IF YES, WHAT: _____
ANY HISTORY OF HEART DISEASE? DIABETES: EPILEPSY: HIGH BLOOD PRESSURE: _____
IS SUBJECT NOW UNDER DOCTOR'S CARE AND/OR TAKING ANY MEDICATIONS? YES LIST: _____

DRUG

ANY SIGNS / HISTORY OF DRUG USE? YES NO IF YES, INDICATE TYPE(S):
 1- AMPHETAMINE 2- BARBITURATE 3- COCAINE U- UNKNOWN
 4- HALLUCINOGEN 5- HEROIN 6- MARIJUANA O- OTHER
 7- METHAMPHETAMINE 8- OPIUM 9- SYNTHETIC NARCOTIC ()

RELEASE DATE **//** TIME **0000** RELEASING OFFICER - LAST NAME [] NUMBER [] AGENCY RELEASED TO []

SIGNATURE OF RECEIVING OFFICIAL: **X** _____

AGENCY ID
GA0600600

TIME
1304

- ARREST / BOOKING REPORT -

UNION CITY POLICE DEPARTMENT

CASE NUMBER
19-001051

DEFENDANT NAME (LAST, FIRST, MIDDLE) **SERDA, AMANDA NICHOLE**

PERSON ID **[REDACTED]** RACE **U** SEX **F** DATE OF BIRTH **[REDACTED] 1985** PLACE OF BIRTH **[REDACTED]**

AGE **33** HEIGHT **501** WEIGHT **119** HAIR **BLK** EYES **BRN** SOCIAL SECURITY NUMBER **[REDACTED]** VISIBLE SCARS AND MARKS **[REDACTED]** GCIC/CK **[REDACTED]** DOCKET NUMBER **[REDACTED]**

ADDRESS - NUMBER AND STREET **6350 OAKLEY RD APT 1506** CITY, STATE AND ZIP CODE **UNION CITY, GA 30291** PHONE NUMBER **[REDACTED]**

ALIAS **[REDACTED]** DRIVERS LICENSE NUMBER **[REDACTED]** STATE **GA**

EMPLOYER OR OCCUPATION **[REDACTED]** ARRESTING AGENCY **UNION CITY POLICE DEPT.** ARRESTING OFFICER **MCCOURT, DENNIS** NUMBER **945**

BOOKING OFFICER NAME **[REDACTED]** NUMBER **[REDACTED]** FINGERPRINTED / PHOTOGRAPHED BY **[REDACTED]** NUMBER **[REDACTED]** CURRENT DATE **01/30/2019**

DATE OF ARREST **01/30/2019** TIME **0000** LOC CODE **Auto Nation Ford** LOCATION **4355 138**

OFFENSE DATE **01/22/2019** TIME **1304** OBTS NUMBER **[REDACTED]** FBI NUMBER **[REDACTED]**

PERSONAL DATA

| | PHOTO #1 | PHOTO #2 | PHOTO #3 |
|--|----------|----------|----------|
| | | | |

CHARGE

| CHARGE ID | COUNTS | A | COUNTS | B | COUNTS | C |
|-----------|--------|---|--------|---|--------|---|
| | | | | | | |

LOC.

| NEAR SCENE | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> YES <input type="checkbox"/> NO |
|------------|---|---|---|
| OFFENSE | <input type="checkbox"/> CITY <input type="checkbox"/> COUNTY <input type="checkbox"/> STATE <input type="checkbox"/> OUT OF STATE <input type="checkbox"/> UNK | <input type="checkbox"/> CITY <input type="checkbox"/> COUNTY <input type="checkbox"/> STATE <input type="checkbox"/> OUT OF STATE <input type="checkbox"/> UNK | <input type="checkbox"/> CITY <input type="checkbox"/> COUNTY <input type="checkbox"/> STATE <input type="checkbox"/> OUT OF STATE <input type="checkbox"/> UNK |
| ARREST | <input type="checkbox"/> CITY <input type="checkbox"/> COUNTY <input type="checkbox"/> STATE <input type="checkbox"/> OUT OF STATE <input type="checkbox"/> UNK | <input type="checkbox"/> CITY <input type="checkbox"/> COUNTY <input type="checkbox"/> STATE <input type="checkbox"/> OUT OF STATE <input type="checkbox"/> UNK | <input type="checkbox"/> CITY <input type="checkbox"/> COUNTY <input type="checkbox"/> STATE <input type="checkbox"/> OUT OF STATE <input type="checkbox"/> UNK |

BOND

| BOND AMT. | 0.00 | 0.00 | 0.00 |
|-----------|------|------|------|
| BOND TYPE | | | |
| RET. DATE | // | // | // |
| BOND CO. | | | |

DISPOSITION

| | DAYS | AMOUNT | DAYS | AMOUNT | DAYS | AMOUNT |
|-------------|------|--------|------|--------|------|--------|
| SENTENCE | | | | | | |
| TIME SERVED | | | | | | |
| GOOD TIME | | | | | | |
| BALANCE | | | | | | |
| PAID | | | | | | |
| RECPT. NO. | | | | | | |
| RETURNED | | | | | | |
| RECPT. NO. | | | | | | |

CELL NUMBER **[REDACTED]** TRANSFER **[REDACTED]** REASON **[REDACTED]**

MEDICAL

ANY KNOWN ALLERGIES? YES IF YES, WHAT: **[REDACTED]**
ANY HISTORY OF HEART DISEASE? DIABETES: EPILEPSY: HIGH BLOOD PRESSURE:
IS SUBJECT NOW UNDER DOCTOR'S CARE AND/OR TAKING ANY MEDICATIONS? YES LIST: **[REDACTED]**

DRUG

ANY SIGNS / HISTORY OF DRUG USE? YES NO IF YES, INDICATE TYPE(S):
 1- AMPHETAMINE 2- BARBITURATE 3- COCAINE U- UNKNOWN
 4- HALLUCINOGEN 5- HEROIN 6- MARIJUANA O- OTHER
 7- METHAMPHETAMINE 8- OPIUM 9- SYNTHETIC NARCOTIC **()**

RELEASE DATE **//** TIME **0000** RELEASING OFFICER - LAST NAME **[REDACTED]** NUMBER **[REDACTED]** AGENCY RELEASED TO **[REDACTED]**

SIGNATURE OF RECEIVING OFFICIAL: **X** _____

ARREST / BOOKING REPORT - NARRATIVE

AGENCY: GA0600600

UNION CITY POLICE DEPARTMENT

CASENO: 19-001051

| | | | | | |
|-----------------------|---------------------------|-------------------|---|---------------------------|-------------------------|
| Arrest Date: | 01/30/2019 | Time: 0000 | <i>Print Date: 06/26/2019 08:10:29 PM</i> | Arresting Officer: | MCCOURT, DENNIS (945) |
| Arrest Agency: | UNION CITY POLICE DEPT. | | | Booking Officer: | () |
| Defendant: | SERDA, AMANDA (NICHOLE) | | | Approving officer: | WALLS, DOUG (20) |

Narrative:

On Wednesday, January 30, 2019, at approximately 1220 hours, OFFICER MCCOURT of the Union City Police Department was dispatched to 4355 SR 138 (Auto Nation Ford), Union City, Fulton County, Georgia, 30291, in reference to fraud.

Upon arrival, MCCOURT met with the complainant later identified as BRIAN LAMB an employee of Auto Nation Ford. LAMB stated a black female later identified as AMANDA SERDA purchased two Ford Transit vans from the dealership on 01-22-2019 using the name ELIZABETH HUBER. LAMB stated he then received a call from HUBER stating that she did not purchase any vehicles from Ford and has never been in Georgia before. LAMB stated SERDA fraudulently purchased one 2019 Ford Transit Van VIN 1FTYR2CM0KKA04253 valued at \$47549.41 and one 2019 Ford Transit Van VIN 1FTYR2CM2KKA13973 valued at \$47144.62. LAMB stated on today's date he was able to get SERDA to come back to the dealership to purchase an additional vehicle. LAMB stated once SERDA arrived at the dealership he contacted the Police. MCCOURT then met with SERDA and requested her information. She provided MCCOURT with her proper information.

MCCOURT then placed SERDA in double locked handcuffs and secured her in the rear of Union City Patrol Vehicle marked 9777. MCCOURT then had LAMB complete a written statement form for the incident. MCCOURT then transported SERDA to the Union City Police Department. Upon Arrival, MCCOURT and SERDA met with DETECTIVE WEST of the same department. WEST then interviewed SERDA, but she requested to speak with an attorney. SERDA did spontaneously utter that she could get the vans back. MCCOURT then completed his paperwork and secured warrants for the arrest of SERDA. Once complied MCCOURT then transported SERDA to the South Fulton Municipal Regional Jail. Upon arrival, SERDA was released to jail staff on two Charged of Identity Fraud a violation of O.C.G.A. 16-9-121, two charges of Forgery in the first degree a violation of 16-9-1 and Theft by Taking a violation of O.C.G.A. 16-8-2. The white in color 2019 Ford Transit Van bearing Georgia temporary tag 1119214977 VIN 1FTYR2CM0KKA04253 and 2019 white in color Ford Transit Van bearing Georgia temporary tag 1119214977 VIN 1FTYR2CM2KKA13973 were placed onto G.C.I.C. as stolen. No further action was taken.

| | | |
|------------------------|---------------------------|----------------------|
| Office Use Only | | |
| | _____ Signature | _____ Date |

Defendant's Personal Property Receipt

UNION CITY POLICE DEPARTMENT

| | | | |
|-----------------------|--------------------------------------|-------------------------------|------------|
| Agency: | GA0600600 | Arrest Date: | 01/30/2019 |
| Case Number: | 19-001051 | Arrest Time: | 0000 |
| Defendant Name: | SERDA, AMANDA NICHOLE | | |
| Defendant DOB: | [REDACTED]/1985 | | |
| Defendant SSN: | | | |
| Defendant Race/Sex: | U / F | | |
| Defendant Cell Phone: | | | |
| Booking Officer: | () | Total Cash at Time of Arrest: | \$ 0.00 |
| QTY | ITEM DESCRIPTION | | |
| | No personal property items submitted | | |

ARREST: Acknowledgement of Property Received

I hereby state that the property listed above constitutes all claims to property on my person at the time of my arrest.

X _____

Defendant's Signature at Time of Arrest

X _____

Witness Signature

RELEASE: Acknowledgement of Property Returned

I hereby state that the property listed above was returned to me, in satisfaction of all claims to property on my person at the time of my arrest, on the date of my release.

X _____

Defendant's Signature at Time of Release

X _____

Witness Signature

| RELEASE DATE | TIME | RELEASING OFFICER - LAST NAME | NUMBER | AGENCY RELEASED TO |
|--------------|------|-------------------------------|--------|--------------------|
| / / | 0000 | | | |

- INCIDENT REPORT -
Property & Evidence Summary
 UNION CITY POLICE DEPARTMENT

| | | |
|--------------------|--|--|
| Case # | 19-001051 | Incident 01/22/2019 Report 01/30/2019 |
| Inc Type | 16-8-2 THEFT BY TAKING MORE THAN \$1500.00 | |
| Location | 4355 138 UNION CITY, GA 30291 | |
| Rpt Officer | MCCOURT, DENNIS 945 | |

| | | | | | | | | |
|---------------------|--------------------------------|---------------------|------|------------------------|--|----------------|--|--|
| Item# | 1 | Est.Value \$ | 0.00 | Status | COLLECTED | | | |
| Loss Type | EVIDENCE | | | Pouch | 0 of 0 | | | |
| Category | DOCUMENTS/PERSONAL OR BUSINESS | | | Temp Locker | | | | |
| Owner | | | | ER Locker / Bin | / | | | |
| Address | | | | | | | | |
| Quantity | 0.000 | Color | | Caliber | | Drgtype | | |
| Make | | | | Model | | | | |
| Serial # | | | | Own Mark | | | | |
| Date Rec | // | Rec By | 000 | | | | | |
| Item | STATEMENT, VEHICLE INFO | | | | Item Tracking Number <div style="border: 1px solid black; height: 60px; width: 100%;"></div> | | | |
| Rec. Loc. | | | | | | | | |
| Disposition | | | | | | | | |
| Disp. Date | // | | | | | | | |
| Release Date | // | | | | | | | |

| | | | | | | | | |
|--------------------|-------------------|------------------------|----------------|--------------|-----------------|---------------------|----------------|-----------------|
| Monetary | <u>Total Amt.</u> | <u>Bills - Ones</u> | <u>Twos</u> | <u>Fives</u> | <u>Tens</u> | <u>Twenties</u> | <u>Fifties</u> | <u>Hundreds</u> |
| Information | \$ 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | <u>Coins - Pennies</u> | <u>Nickels</u> | <u>Dimes</u> | <u>Quarters</u> | <u>Half Dollars</u> | <u>Dollars</u> | |
| | | 0 | 0 | 0 | 0 | 0 | 0 | |

Rec. Remark

Property & Evidence Testing - Testing Required: YES NO

INCIDENT/INVESTIGATION REPORT

| | |
|----------------------|--------------------|
| Case# | 19-009579 |
| Date / Time Reported | 06/25/19 17:05 Tue |
| Last Known Secure | 06/25/19 10:32 Tue |
| At Found | 06/25/19 10:35 Tue |

| | |
|-------------|------------------------------|
| Agency Name | East Point Police Department |
| ORI | GA0600200 |

| | | | |
|-------------------------------|--|---------------------|---------------------|
| Location of Incident | | Premise Type | Zone/Tract |
| 2144 Sylvan Rd, East Point GA | | Parking Lot /garage | |
| #1 | Crime Incident(s) Stolen Vehicle Recovered 086 | (Com) | Weapon / Tools |
| | | | NOT APPLICABLE NONE |
| #2 | Crime Incident | () | Entry |
| | | | Exit |
| #3 | Crime Incident | () | Entry |
| | | | Exit |

INCIDENT DATA

| | |
|----|--|
| MO | |
|----|--|

| | | | | | | | | | | |
|--------|-----------------------|--|-------|-------------------|---------|---------|----------------|--------------------------|-----------------|------------------------|
| VICTIM | # of Victims | 1 | Type: | SOCIETY/PUBLIC | Injury: | | Domestic: | N | | |
| | V1 | Victim/Business Name (Last, First, Middle) | | Victim of Crime # | DOB | Race | Sex | Relationship To Offender | Resident Status | Military Branch/Status |
| | | State Of Georgia | | 1, | Age | | | | | |
| | Home Address | | | | | | | | Home Phone | |
| | Employer Name/Address | | | | | | Business Phone | | Mobile 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: | Injury: | | | | | | | | | |
| | Code | Name (Last, First, Middle) | | | Victim of Crime # | DOB | Race | Sex | Relationship To Offender | Resident Status | Military Branch/Status |
| | | | | | | Age | | | | | |
| | Home Address | | | | | | | | Home Phone | | |
| | Employer Name/Address | | | | | | Business Phone | | Mobile Phone | | |

| PROPERTY | 1 = None 2 = Burned 3 = Counterfeit / Forged 4 = Damaged / Vandalized 5 = Recovered 6 = Seized 7 = Stolen 8 = Unknown ("O") = Recovered for Other Jurisdiction) | | | | | | | | | |
|----------|--|------|---------------|-------------|----|-----|---------------------------|------------------|-------------------|--|
| | VI # | Code | Status Frm To | Value | OJ | QTY | Property Description | Make/Model | Serial Number | |
| | | 5 | 5 | \$20,000.00 | | 1 | 2019 WHI /VHI 34242946 GA | FORD Transit 250 | 1FTYR2CM2KKA13973 | |
| | | | | | | | | | | |
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|-------------|---------------------------------|--------------|------------------------------------|
| Officer/ID# | HOLLIE, F. C. (FOD, PAT) (7963) | Tot Rec Val: | \$20,000.00 |
| Invest ID# | (0) | Supervisor | BROUSSARD, N. M. (FOD, PAT) (4984) |
| Status | Complainant Signature | Case Status | Active |
| | | 06/25/19 | Case Disposition: |

INCIDENT/INVESTIGATION REPORT

East Point Police Department

Case # 19-009579

| Status Codes 1 = None 2 = Burned 3 = Counterfeit / Forged 4 = Damaged / Vandalized 5 = Recovered 6 = Seized 7 = Stolen 8 = Unknown | | | | | | | |
|--|-----|--------|----------|--------------|----------------|--|--|
| D R U G S | IBR | Status | Quantity | Type Measure | Suspected Type | | |
| | | | | | | | |
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Assisting Officers

Suspect Hate / Bias Motivated:

NARRATIVE
 On 06/25/2019 I Ofc. Hollie was dispatched to (Gray's Automotive Towing) 2144 Sylvan Rd East Point Ga, 30344 Fulton County in reference to a stolen vehicle recovered.

upon arrival this officer made contact with a 2019 White in color Ford Transit 250 (GA Tag 24242946 VIN 1FTYR2CM2KKA13973). This officer was checked the above vehicle through GCIC/NCIC and it came back stolen out of Union City. The above vehicle is currently at Gray's Automotive Towing yard.

This incident was captured on body camera.

REPORTING OFFICER NARRATIVE

East Point Police Department

| | | |
|--------------------------|--|--|
| Victim <i>Society</i> | Offense <i>STOLEN VEHICLE RECOVERED</i> | OCA <i>19-009579</i> Date / Time Reported <i>Tue 06/25/19 17:05</i> |
|--------------------------|--|--|

THE INFORMATION BELOW IS CONFIDENTIAL - FOR USE BY AUTHORIZED PERSONNEL ONLY

On 06/25/2019 I Ofc. Hollie was dispatched to (Gray's Automotive Towing) 2144 Sylvan Rd East Point Ga, 30344 Fulton County in reference to a stolen vehicle recovered.

upon arrival this officer made contact with a 2019 White in color Ford Transit 250 (GA Tag 24242946 VIN 1FTYR2CM2KKA13973). This officer was checked the above vehicle through GCIC/NCIC and it came back stolen out of Union City. The above vehicle is currently at Gray's Automotive Towing yard.

This incident was captured on body camera.

Incident Report Related Vehicle List

East Point Police Department

OCA: 19-009579

| | | | | | | | | | | | |
|--|---|-----------------------------|-------------------------|-----------------------------|--|--------------------------------|---|--------------|---------------------------------|-------|--|
| 1 | VehYr/Make/Model 2019 FORD, Transit 250 | | Style VN | | Color WHI/WHI | | Lic/Lis 24242946 GA 2019 | | VIN 1FTYR2CM2KKA13973 | | |
| IBR Status Recovered | | | Date 06/25/19 | | Location 2144 SYLVAN RD, EAST POINT GA | | | | | | |
| Condition | | Value \$20,000.00 | | Offense Code 2600 | | Jurisdiction Locally | | State # | | NIC # | |
| Name (Last, First, Middle) * No name * | | | | | Also Known As | | | Home Address | | | |
| Business Address | | | | | | | | | | | |
| DOB | | Age | Race | Sex | Hgt | Wgt | Scars, Marks, Tattoos, or other distinguishing features | | | | |

Notes

Naeemah Wellington

From: Ronnie Wyatt
Sent: Wednesday, June 12, 2019 11:40 PM
To: newberryg@outlook.com
Cc: Naeemah Wellington
Subject: 2019-004871

In reference to your report I have all necessary information and it is ready to be submitted. I am only missing your vehicle info. If you could advise me on your tag or VIN number for your van I will be able to complete the report and submit it to my supervisors. If you have any questions feel free to call me directly at [REDACTED]

Naeemah Wellington

From: Troydred Blackmon
Sent: Tuesday, May 7, 2019 1:57 PM
To: Robert Nesmith, Sr; Naeemah Wellington; Dwight Green
Subject: Fwd: 2019-004871

Please call this gentleman and advise outcome.

Sent from my iPhone

Begin forwarded message:

From: Erika Woods <Erika.Woods@cityofsouthfultonga.gov>
Date: May 7, 2019 at 1:32:55 PM EDT
To: Troydred Blackmon <troydred.blackmon@cityofsouthfultonga.gov>
Subject: Fw: 2019-004871

Make sure one of your supervisors makes contact with this citizen to see how we can assist.

From: Bridgette Heyward
Sent: Tuesday, May 7, 2019 12:36:36 PM
To: Ronnie Wyatt; Corey Blalock
Cc: Troydred Blackmon; Erika Woods; Dwight Green
Subject: 2019-004871

Mr. Newberry called for a copy of his report. He is very upset and can be reached at [REDACTED] He has called several times for report.



Bridgette Heyward

Administrative Manager/TAC
South Fulton Police Department
5539 Old National Highway
College Park, Georgia 30349
[REDACTED]



Naeemah Wellington

From: Troydred Blackmon
Sent: Thursday, June 6, 2019 9:57 PM
To: Dwight Green; Robert Nesmith, Sr; Naeemah Wellington
Subject: Fwd: Case# 2019-004871

Sent from my iPhone

Begin forwarded message:

From: Victor Frazier <victor.frazier@cityofsouthfultonga.gov>
Date: June 5, 2019 at 2:08:23 PM EDT
To: Clarence Flournory <Clarence.Flournory@cityofsouthfultonga.gov>, Dexter White <Dexter.White@cityofsouthfultonga.gov>, Troydred Blackmon <troydred.blackmon@cityofsouthfultonga.gov>, Erika Woods <Erika.Woods@cityofsouthfultonga.gov>
Cc: Phillomena Otoo <phillomena.otoo@cityofsouthfultonga.gov>, Sheila Rogers <sheila.rogers@cityofsouthfultonga.gov>
Subject: Case# 2019-004871

Greetings,

Mr. Greg Newberry is waiting on an accident report from Apr. 14th . Responding Officer was R. Wyatt(M/L).

Thanks and Have a Marvelous Day,



VICTOR L. FRAZIER, CIST

CITY OF SOUTH FULTON POLICE DEPARTMENT

5539 OLD NATIONAL HWY

SOUTH FULTON, GA 30349

VICTOR.FRAZIER@CITYOFSOUTHFULTONGA.GOV

OFFICE: 470.809.7354 | CELL: 678.462.4982

STATE OF GEORGIA
 DEPARTMENT OF DEFENSE, MILITARY DIVISION
 OFFICE OF THE ADJUTANT GENERAL
 CLAY NATIONAL GUARD CENTER, MARIETTA GEORGIA 30060

ORDERS 105-023

15 April 2019

WYATT RONNIE B [REDACTED] SGT
 HOME ADDRESS: [REDACTED]
 UNIT INFO/ADDRESS: 277TH MAINT CO(DS)
 (TG1AA-127) 1901 MCCOLLUM PKWY KENNESAW GA 30144

You are ordered to annual training (AT) for the period shown. Upon completion of the period of annual training you will return to place where entered on annual training and are released from such duty.

Period (TDY) : 30 April 2019 - 14 May 2019

Report to: FORT POLK, LOUISIANA

Reporting time/date: 0800

Purpose: JRTC SUPPORT

Additional instructions:

- (a) Government quarters directed.
- (b) Government meals directed.
- (c) Travel by government trans, commercial carrier or POV authorized. Amount of reimbursement limited to lowest constructive common carrier cost. Reservations will be made with Carlson/SATO Redstone, AL
 Fax travel request to 877-369-5889 or redstone@cwtsatotravel.com
 Immediate travel or changes within 7 days (800)-874-7286 or 800-468-2986
 Travel orders are required for CBA or IBA.
- (d) Individual will submit completed travel voucher DTS Authorization and voucher to PFO-FE-VE within 5 days of completion of duty under this order.
- (e) FOR ACTIVE DUTY ORDERS LESS THAN 30 DAYS/ANNUAL TRAINING ORDERS ONLY
 One way distance from HOR to duty station or rendezvous point where government transportation is provided is ___ miles.
 Mileage payable with mil pay entitlements for ADOS < 30
 DAYS/AT orders only, all other mileage will be processed using DTS, Travel Voucher.
- (f) Individual is eligible for a government issued travel card. Travelers are reminded that cash advances are limited to an amount equal to \$29.25 per day of travel, not to exceed \$515 in a given month IAW Ch 5, Vol 9, DoDFMR. Individual will make all Airline Reservations through Carlson Wagonlit 1800-984-9459
- (g) Travelers are reminded that under Public Law 105-264, use of the Government Travel Card is mandatory for all lodging and other authorized TDY expenses incurred by the traveler unless exempted. Traveler will settle all travel vouchers through USPFO-GA only. No advances or final settlements will be obtained from any other finance office, to include submission to DFAS-IN.
- (h) This is to certify that the soldier listed above performed duty on the days indicated on this order and is due pay.

Signature: _____

Typed name of certifying officer: _____

Date _____

- (i) Upload this order into your DTS travel Authorization/local Voucher.

FOR OFFICIAL USE ONLY - PRIVACY ACT
 FOR OFFICIAL USE ONLY - PRIVACY ACT

ORDERS 105-023 HQ GA NG, OTAG, 15 April 2019

FOR ARMY USE

Auth: 32 USC 502a CONUS AT
 HOR: 416 MADELINE ROSE CT

FAYETTEVILLE GA30215

APC DJMS-RC: B2E101 TDC 101 Regular Unit AT CONUS
APC STANFINS Pay: E101 APC STANFINS Travel: E101

Acct clas:

Enl pay/alw: 2192060 18-1009 PIA31.0200-1198/1199/1210/1250 509137 1A0 TG1AA

Enl tvl/pd: 2192060 18-1009 PIA31.0200-21T2 509137 1A0 TG1AA

SRN: WYA81901050230 JON/CCC: E10144/44E101 Cost Estimate: \$ 2,391

PEBD: 090505

Federal WE: S00

State tax code: GA

Marital status / Number of dependents: S00

Type of incentive pay: NONE

Type of special pay: NONE

Scty cl: SECRET

Format: 296

FOR THE ADJUTANT GENERAL:

////////////////////////////////////
\\ HQ, GAARNG //
\\ OFFICIAL //
////////////////////////////////////

DISTRIBUTION:

1-Unit 1-Bn HQ 1-MACOM

1-DCS-PA 1-Individual

JASON S. BAKER
LTC, MI, USA
Deputy Chief of Staff, Personnel

Input By: BRASWELL, JABES B. SGT 277MT CO TRN NCO
Approved By: LOVE SHERRY RMD EX-6320

STATE OF GEORGIA
DEPARTMENT OF DEFENSE, MILITARY DIVISION
OFFICE OF THE ADJUTANT GENERAL
CLAY NATIONAL GUARD CENTER, MARIETTA GEORGIA 30060

ORDERS 116-015

26 April 2019

WYATT RONNIE B [REDACTED] SGT
HOME ADDRESS: [REDACTED]
UNIT INFO/ADDRESS: 277TH MAINT CO(DS)
(TG1AA-127) 1901 MCCOLLUM PKWY KENNESAW GA 30144

You are ordered to active duty for training (ADT) for the period shown plus allowable travel time. Upon completion of the period of ADT unless sooner released or extended by proper authority, you will return to the place where you entered ADT and be released from such duty.

Period (TDY) : 15 May 2019 - 27 May 2019

Report to: Fort Polk, Louisiana

Reporting time/date: 0800

Purpose: JRTC Support - Main Body

Additional instructions:

- (a) Soldiers with orders authorizing travel entitlements beyond mileage reimbursement will file their voucher utilizing DTS. Mileage only entitlements can be reimbursed via Military Pay.
- (b) Government quarters directed.
- (c) Government meals directed.
- (d) Travel by government trans, commercial carrier or POV authorized. Amount of reimbursement limited to lowest constructive common carrier cost. Reservations will be made with Carlson/SATO Redstone, AL
Fax travel request to 877-369-5889 or redstone@cwtsatotravel.com
Immediate travel or changes within 7 days (800)-874-7286 or 800-468-2986
Travel orders are required for CBA or IBA.
- (e) Individual will submit completed travel voucher DTS Authorization and voucher to PFO-FE-VE within 5 days of completion of duty under this order.
- (f) FOR ACTIVE DUTY ORDERS LESS THAN 30 DAYS/ANNUAL TRAINING ORDERS ONLY
One way distance from HOR to duty station or rendezvous point where government transportation is provided is ___ miles.
Mileage payable with mil pay entitlements for ADOS < 30 DAYS/AT orders only, all other mileage will be processed using DTS, Travel Voucher.
- (g) Individual is eligible for a government issued travel card. Travelers are reminded that cash advances are limited to an amount equal to \$29.25 per day of travel, not to exceed \$515 in a given month IAW Ch 5, Vol 9, DoDFMR. Individual will make all Airline Reservations through Carlson Wagonlit 1800-984-9459
- (h) Travelers are reminded that under public Law 105-264, use of the Government Travel Card is mandatory for all lodging and other authorized TDY expenses incurred by the traveler unless exempted. Traveler will settle all travel vouchers through USPF0-GA only. No advances or final settlements will be obtained from any other finance office, to include submission to DFAS-IN.
- (i) This is to certify that the soldier listed above performed duty on the days indicated on this order and is due pay.

Signature: _____
Typed name of certifying officer: _____
Date _____

FOR OFFICIAL USE ONLY - PRIVACY ACT
FOR OFFICIAL USE ONLY - PRIVACY ACT

ORDERS 116-015 HQ GA NG, OTAG, 26 April 2019

Additional instructions (cont):

(j) Upload this order into your DTS travel Authorization/local Voucher.

FOR ARMY USE

Auth: 32 USC 503 FTNGDSW

HOR: 416 MADELINE ROSE CT FAYETTEVILLE GA30215

APC DJMS-RC: B2E301 TDC 301 Planning coordination, train-up/participation CTC

APC STANFINS Pay: E301 APC STANFINS Travel: E301

Acct clas:

Enl pay/alw: 2192060 18-1009 P1G31.7200-1198/1199/1210/1250 S09137 1G0 TG1AA

SRN: WYAB1901160150 JON/CCC: E30144/44E301 Cost Estimate: \$ 2,075

PEBD: 090505

Federal WE: S00

State tax code: GA

Marital status / Number of dependents: S00

Type of incentive pay: NONE

Type of special pay: NONE

Scty cl: SECRET

Format: 282

FOR THE ADJUTANT GENERAL:

////////////////////////////////////
\\ HQ, GAARNG //
\\ OFFICIAL //
////////////////////////////////////

DISTRIBUTION:

1-Unit 1-Bn HQ 1-MACOM

1-DCS-PA 1-Individual

JASON S. BAKER
COL, MI, USA
Deputy Chief of Staff, Personnel

Input By: BRASWELL, JABES B. SGT 277MT CO TRN NCO
Approved By: LOVE SHERRY RMD EX-6320

STATE OF GEORGIA
DEPARTMENT OF DEFENSE, MILITARY DIVISION
OFFICE OF THE ADJUTANT GENERAL
CLAY NATIONAL GUARD CENTER, MARIETTA GEORGIA 30060

ORDERS 105-023

15 April 2019

WYATT RONNIE B [REDACTED] SGT
HOME ADDRESS: [REDACTED]
UNIT INFO/ADDRESS: 277TH MAINT CO(DS)
(TG1AA-127) 1901 MCCOLLUM PKWY KENNESAW GA 30144

You are ordered to annual training (AT) for the period shown. Upon completion of the period of annual training you will return to place where entered on annual training and are released from such duty.

Period (TDY) : 30 April 2019 - 14 May 2019

Report to: FORT POLK, LOUISIANA

Reporting time/date: 0800

Purpose: JRTC SUPPORT

Additional instructions:

- (a) Government quarters directed.
- (b) Government meals directed.
- (c) Travel by government trans, commercial carrier or POV authorized. Amount of reimbursement limited to lowest constructive common carrier cost. Reservations will be made with Carlson/SATO Redstone, AL. Fax travel request to 877-369-5889 or redstone@cwtsatotravel.com. Immediate travel or changes within 7 days (800)-874-7286 or 800-468-2986. Travel orders are required for CBA or IBA.
- (d) Individual will submit completed travel voucher DTS Authorization and voucher to PFO-FE-VE within 5 days of completion of duty under this order.
- (e) FOR ACTIVE DUTY ORDERS LESS THAN 30 DAYS/ANNUAL TRAINING ORDERS ONLY. One way distance from HOR to duty station or rendezvous point where government transportation is provided is ___ miles. Mileage payable with mil pay entitlements for ADOS < 30 DAYS/AT orders only, all other mileage will be processed using DTS, Travel Voucher.
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FOR OFFICIAL USE ONLY - PRIVACY ACT

ORDERS 105-023 HQ GA NG, OTAG, 15 April 2019

FOR ARMY USE
Auth: 32 USC 502a CONUS AT
HOR: 416 MADELINE ROSE CT

FAYETTEVILLE GA30215

APC DJMS-RC: B2E101 TDC 101 Regular Unit AT CONUS
APC STANFINS Pay: E101 APC STANFINS Travel: E101

Acct clas:

Enl pay/alw: 2192060 18-1009 FIA31.0200-1198/1199/1210/1250 S09137 1A0 TG1AA

Enl tvl/pd: 2192060 18-1009 FIA31.0200-21T2 S09137 1A0 TG1AA

SRN: WYA81901050230 JON/CCC: E10144/44E101 Cost Estimate: \$ 2,391

PEBD: 090505

Federal WE: S00

State tax code: GA

Marital status / Number of dependents: S00

Type of incentive pay: NONE

Type of special pay: NONE

Scty cl: SECRET

Format: 296

FOR THE ADJUTANT GENERAL:

////////////////////////////////////
\\ HQ, GAARNG //
\\ OFFICIAL //
////////////////////////////////////

DISTRIBUTION:

1-Unit 1-Bn HQ 1-MACOM

1-DCS-PA 1-Individual

JASON S. BAKER

LTC, MI, USA

Deputy Chief of Staff, Personnel

Input By: BRASWELL, JABES B. SGT 277MT CO TRN NCO
Approved By: LOVE SHERRY RMD EX-6320

STATE OF GEORGIA
DEPARTMENT OF DEFENSE, MILITARY DIVISION
OFFICE OF THE ADJUTANT GENERAL
CLAY NATIONAL GUARD CENTER, MARIETTA GEORGIA 30060

ORDERS 116-015

26 April 2019

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Period (TDY) : 15 May 2019 - 27 May 2019

Report to: Fort Polk, Louisiana

Reporting time/date: 0800

Purpose: JRTC Support - Main Body

Additional instructions:

- (a) Soldiers with orders authorizing travel entitlements beyond mileage reimbursement will file their voucher utilizing DTS. Mileage only entitlements can be reimbursed via Military Pay.
- (b) Government quarters directed.
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Fax travel request to 877-369-5889 or redstone@cwtsatotravel.com
Immediate travel or changes within 7 days (800)-874-7286 or 800-468-2986
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Signature: _____
Typed name of certifying officer: _____
Date _____

FOR OFFICIAL USE ONLY - PRIVACY ACT
FOR OFFICIAL USE ONLY - PRIVACY ACT

ORDERS 116-015 HQ GA NG, OTAG, 26 April 2019

Additional instructions (cont):

(j) Upload this order into your DTS travel Authorization/local Voucher.

FOR ARMY USE

Auth: 32 USC 503 FTNGDSW

HOR: 416 MADELINE ROSE CT FAYETTEVILLE GA30215

APC DJMS-RC: B2E301 TDC 301 Planning coordination, train-up/participation CTC

APC STANFINS Pay: E301 APC STANFINS Travel: E301

Acct clas:

Enl pay/alw: 2192060 18-1009 P1G31.7200-1198/1199/1210/1250 S09137 1G0 TG1AA

SRN: WYAB1901160150 JON/CCC: E30144/44E301 Cost Estimate: \$ 2,075

PEBD: 090505

Federal WE: S00

State tax code: GA

Marital status / Number of dependents: S00

Type of incentive pay: NONE

Type of special pay: NONE

Scty cl: SECRET

Format: 282

FOR THE ADJUTANT GENERAL:

////////////////////////////////////
\\ HQ, GAARNG //
\\ OFFICIAL //
////////////////////////////////////

DISTRIBUTION:

1-Unit 1-Bn HQ 1-MACOM

1-DCS-PA 1-Individual

JASON S. BAKER
COL, MI, USA
Deputy Chief of Staff, Personnel

Input By: BRASWELL, JABES B. SGT 277MT CO TRN NCO
Approved By: LOVE SHERRY RMD EX-6320



From: Bridgette Heyward <bridgette.heyward@cityofsouthfultonga.gov>
Sent: Thursday, June 6, 2019 4:09 PM
To: Phillomena Otoo <phillomena.otoo@cityofsouthfultonga.gov>
Subject: FW: 2019-004871

From: Bridgette Heyward
Sent: Tuesday, May 7, 2019 12:37 PM
To: Ronnie Wyatt <ronnie.wyatt@CityofSouthFultonga.gov>;
Cc: Troydred Blackmon <troydred.blackmon@cityofsouthfultonga.gov>; Erika Woods <Erika.Woods@cityofsouthfultonga.gov>; Dwight Green <Dwight.Green@CityofSouthFultonga.gov>
Subject: 2019-004871

Mr. Newberry called for a copy of his report. He is very upset and can be reached at [REDACTED] He has called several times for report.



Bridgette Heyward
Administrative Manager/TAC
South Fulton Police Department
5539 Old National Highway
College Park, Georgia 30349
(470)809-7325

Cell: [REDACTED]

From: Sheila Rogers
Sent: Friday, June 7, 2019 7:53 AM
To: Roxanne Shoemaker; William Orgertrice
Cc: Hattie Cotton-Tukes; Bridgette Heyward
Subject: Fwd: Case # 2019-004871

FYI
I don't know if anything can be done until he returns ?

Major Sheila Y. Rogers
South Fulton Police Department

Begin forwarded message:

From: Phillomena Otoo <phillomena.otoo@cityofsouthfultonga.gov>
Date: June 6, 2019 at 4:27:31 PM EDT
To: Clarence Flournory <Clarence.Flournory@cityofsouthfultonga.gov>, Dexter White <Dexter.White@cityofsouthfultonga.gov>, Troydred Blackmon <troydred.blackmon@cityofsouthfultonga.gov>, Ereka Woods <Ereka.Woods@cityofsouthfultonga.gov>
Cc: Bridgette Heyward <bridgette.heyward@cityofsouthfultonga.gov>, Sheila Rogers <sheila.rogers@cityofsouthfultonga.gov>
Subject: Case # 2019-004871

Greeting Supervisors,

Please be advised that Mr. Greg Newberry with case# 2019-004871 has been calling this office almost everyday inquiring about the status of his accident report. There is nothing in RMS pertaining to this case other than "Skeleton Report" to advise Mr. Greg the same. It is my understanding that the Responding Officer is R. Wyatt, but he is on military leave. Will you please provide remedy for this in his absence?. Mr. Greg is very upset and ready to report this issue to Chief Meadows, because the incident occurred on April 14, 2019. Your response to this email would be greatly appreciated.

Respectfully submitted.

Records & Documents Supervisor
City of South Fulton Police Department
5539 Old National Hwy
College Park, GA 30349

[REDACTED]
Phillomena.otoo@cityofsouthfultonga.gov

Naeemah Wellington

From: Dwight Green
Sent: Monday, June 17, 2019 8:29 PM
To: Naeemah Wellington
Subject: FW: Case # 2019-004871

From: Erika Woods <Erika.Woods@cityofsouthfultonga.gov>
Sent: Monday, June 17, 2019 12:51 PM
To: Dwight Green <Dwight.Green@cityofsouthfultonga.gov>
Cc: Troydred Blackmon <troydred.blackmon@cityofsouthfultonga.gov>
Subject: Fw: Case # 2019-004871

Lt Green,

See below and make sure that Officer Wyatt is caught up on ALL outstanding reports. His name continuously comes up for failing to do this. Also if your supervisors are checking reports at the end of the shift how is it that there are so many that have not been completed ?

From: Bridgette Heyward
Sent: Monday, June 17, 2019 12:05:21 PM
To: Erika Woods; Clarence Flournoy; Troydred Blackmon
Cc: Sheila Rogers; William Orgertrice; Phillomena Otoo
Subject: FW: Case # 2019-004871

Good morning,
Checking status before Mr. Newberry calls again.

From: William Orgertrice
Sent: Friday, June 7, 2019 11:57 AM
To: Sheila Rogers <sheila.rogers@cityofsouthfultonga.gov>; Roxanne Shoemaker <Roxanne.Shoemaker@cityofsouthfultonga.gov>
Cc: Hattie Cotton-Tukes <Hattie.Cotton-Tukes@cityofsouthfultonga.gov>; Bridgette Heyward <bridgette.heyward@cityofsouthfultonga.gov>
Subject: Re: Case # 2019-004871

I just checked Officer Wyatt's Moblan and it is not there.

Lt. William Orgertrice

South Fulton Police Department

6015 Lynmark Way | Fairburn GA 30213

Office: 470-809-7359

Naeemah Wellington

From: Desiree Moody
Sent: Monday, June 24, 2019 8:43 AM
To: Ronnie Wyatt
Cc: Troydred Blackmon; Dwight Green; Naeemah Wellington; Robert Nesmith, Sr
Subject: Accident report

Mr. Greg Redginald Newberry Jr. ([REDACTED]), came by the precinct to pick up his accident report. The report is not on the system and he states that the accident happened awhile ago. Also, he stated that Cpl. Wyatt sent him a message asking for his vehicle information which he provided. He would like a call back.

Thank you,

Desirée Moody
Administrative Specialist

South Fulton Police Department
5539 Old National Hwy
College Park, GA 30349
[REDACTED]



2019-004871

GN Greg Newberry ...

To: Ronnie Wyatt;

Fri 6/14/2019, 6:53 AM

wasnt my van so i dont have any info on van at all thought u had all that informaiton

RW Ronnie Wyatt ...

To: newberryg@outlook.com; +1

Thu 6/13/2019, 3:40 AM [View more](#)

In reference to your report I have all necessary information and it is ready to be submitted. I am only missing your vehicle info. If you could advise me on your tag or VIN number for your van I will be able to complete the report and submit it to my supervisors. If you have any questions feel free to call me directly at