

INCIDENT	1-PAGE # 1	2-ORI NUMBER VA0870000	INCIDENT REPORT COMMONWEALTH OF VIRGINIA			14-INTERNAL INCIDENT STATUS: ☐ (1) Unfounded ☐ (2) Cleared by Arrest ☐ (3) Pending ☒ (4) Inactive	15-EXCEPTIONAL CLEARANCE STATUS: ☐ (A) Death Of Offender ☐ (B) Prosecution Declined ☐ (C) Extradition Declined ☐ (D) Refused To Cooperate ☐ (E) Juvenile, No Custody ☒ (N) Not Applicable		
	3-INCIDENT NUMBER 2023-001496	4-DATE(S) OF INCIDENT 05/07/2023	5-R 5-R	13-SOLVABILITY FACTORS: ☐ (1) Suspect Named ☐ (2) Witness to Crime ☐ (3) Property Traceable	☐ (4) Unique M.O. ☐ (5) Suspect Identified ☐ (6) Susp. Vehicle Identified ☐ (7) Significant Evidence	16-EXCEPT. CLEAR. DATE	17-TEMP.: ☐ (1) Clear ☐ (2) Cloudy ☐ (3) Rain ☐ (4) Snow ☐ (5) Other ☐ (6) Unk.		
	7-TIME(S) OF INCIDENT 19:14 - 21:29	8-DAY(S) OF INCIDENT Sunday	9-DISPATCHER cmbyrd - Byrd, Christie M	10-TIME RECEIVED 19:14	11-TIME ARRIVED 19:59	12-REPORTING AREA	18-WEATHER: (Max. 1)	23-Burglary (220) Location 14&19: # PREMISES ENTERED?	
	19-OFFENSE # 1	20-UCR CODE 90Z	21-OFFENSE STATUS: ☐ (A) Attempted ☒ (C) Completed	22-OFFENDER USED: ☒ (N) Not Applicable ☐ (A) Alcohol ☐ (C) Cptr. Equip. ☐ (D) Drugs	23-Burglary (220) Location 14&19: # PREMISES ENTERED?	24-FORCED ENTRY? ☐ Yes ☐ No	27-DIRECTION OF TRAVEL: ☐ N ☐ S ☐ E ☐ W ☐ UNK.		
OFFENSE	25-OFFENSE NAME ELUDE			26-ADDRESS OF OFFENSE 0 35/OLD BRYANT, Courtland, VA 23837					
	28-LOCATION CODE (Enter 1)			29-WEAPON FORCE: (Max. 3) (For 11-15, place "A" in space next to box if weapon was an Automatic.)					
	☐ (01) Air/Bus/Train Terminal ☐ (02) Bank/Savings & Loan ☐ (03) Bar/Night Club ☐ (04) Church/Synagogue/Temple ☐ (05) Commercial/Office Building ☐ (06) Construction Site ☐ (07) Convenience Store ☐ (08) Department Discount Store ☐ (09) Drug Store/DR's Office/Hospital ☐ (10) Field/Woods ☐ (11) Government/Public Building ☐ (12) Grocery/Supermarket			☒ (13) Highway/Road/Alley ☐ (14) Hotel/Motel/Etc. ☐ (15) Jail/Prison ☐ (16) Lake/Waterway ☐ (17) Liquor Store ☐ (18) Parking Lot/Garage ☐ (19) Rental/Storage Facility ☐ (20) Residence/Home ☐ (21) Restaurant ☐ (22) School/College ☐ (23) Service/Gas Station ☐ (24) Specialty Store (TV,Fur,etc.) ☐ (25) Other/Unknown					
	30-TYPE CRIMINAL ACTIVITY: (Max. 3)			31-TYPE SECURITY: (Max. 2)					
	☐ (B) Buying ☐ (C) Cultivate/Manufacture/Publish ☐ (D) Distributing/Selling ☐ (E) Exploiting Children ☐ (O) Operating/Promoting/Assisting ☐ (P) Possessing/Concealing ☐ (T) Transport/Transmit/Import ☐ (U) Using/Consuming			☐ (A) Alarm/Audio ☐ (B) Alarm/Silent ☐ (C) Bars/Grate ☐ (D) Camera ☐ (E) Dog ☐ (F) Dead Bolt ☐ (G) Locked ☐ (H) Unlocked ☐ (I) Ext. Lights ☐ (J) Int. Lights ☐ (K) Fence ☐ (L) Guard ☐ (M) Neighborhd. Watch ☐ (N) Other ☐ (O) None					
	32-ENTRY/EXIT: (Max. 2 entry, 2 exit)			33-HOW LEFT SCENE: (enter 1)					
	En Ex ☐ (01) Front ☐ (02) Rear ☐ (03) Side ☐ (04) Attic ☐ (05) Vent/A.C ☐ (06) Window ☐ (07) Door ☐ (08) Patio/Sliding Dr. ☐ (09) Balcony/Fire Escape			☐ (10) Attached Garage ☐ (11) Wall ☐ (12) Vehicle ☐ (13) Floor ☐ (14) Roof/Skylight ☐ (15) Hidden Within ☐ (16) Other ☐ (17) Unknown ☐ (1) Auto ☐ (2) Truck ☐ (3) Van ☐ (4) Motorcycle ☐ (5) Bicycle ☐ (6) Foot ☐ (7) Moped ☐ (8) Other ☐ (9) Unknown					
	34-WHICH OFFENDERS ARE RELATED TO THIS OFFENSE?: (mark offender #s): ☐ #1 ☐ #2 ☐ #3 ☐ #4 ☐ #5 ☐ #6 ☐ #7 ☐ #8 ☐ #9 ☐ #10 others: _____			35-BIAS MOTIVATED CRIME: 88 - None (No Bias)					
	36-VICTIM # 1			37-NAME: Last, First, Middle			38-SOC. SEC. NO.		
	40-RESIDENT ADDRESS: Street City State 41-ZIP			39-DATE OF BIRTH					
VICTIM	42-OCCUPATION			43-RESIDENT PHONE					
	44-EMPLOYMENT PHONE			45-SEX: ☐ (M) Male ☐ (F) Female ☐ (U) Unknown					
	46-ETHNIC: ☐ (H) Hispanic ☐ (N) Nonhispanic ☐ (U) Unknown			47-AGE: Exact Age _____ Range ____/____ ☐ (NN) Under 24 Hrs. Old ☐ (NB) 1-6 Days Old ☐ (BB) 7-364 Days Old ☐ (99) Over 98 Yrs. Old ☐ (00) Unknown					
	48-RACE: ☐ (W) White ☐ (I) American Indian ☐ (U) Unknown ☐ (B) Black ☐ (A) Asian/Pacific Islander								
	49-RES. STATUS: ☐ (R) Resident ☐ (N) Nonresident ☐ (U) Unknown								
	50-VICTIM TYPE: ☐ (I) Individual ☐ (B) Business ☐ (F) Financial Institution ☐ (U) Unknown ☐ (G) Government ☐ (R) Religious ☒ (S) Society/Public ☐ (O) Other ☐ (L) L. E. Officer								
	51-VICTIM INJURY: (Max. 5) ☐ (N) None ☐ (B) Apparent Broken Bones ☐ (I) Possible Internal Injury ☐ (L) Severe Laceration ☐ (M) Apparent Minor Injury ☐ (O) Other Major Injury ☐ (T) Loss of Teeth ☐ (U) Unconsciousness			52-THIS VICTIM RELATED TO WHICH OFFENSES? ☐ #1 ☐ #4 ☐ #7 ☐ #10 ☐ #2 ☐ #5 ☐ #8 others: ☐ #3 ☐ #6 ☐ #9					
	AGGRAVATED ASSAULT/HOMICIDE CIRCUMSTANCES								
	54-Aggravated Assault/Murder: (max. 2) ☐ (01) Argument ☐ (02) Assault On Law Enf. Officer ☐ (03) Drug Dealing ☐ (04) Gangland ☐ (05) Juvenile Gang ☐ (06) Domestic Violence ☐ (07) Mercy Killing ☐ (08) Other Felony Involved ☐ (09) Other Circumstances ☐ (10) Unknown Circumstances			54-Negligent Manslaughter: (enter 1) ☐ (30) Child Playing With Weapon ☐ (31) Gun-Cleaning Accident ☐ (32) Hunting Accident ☐ (33) Other Negligent Weapon Handling ☐ (34) Other Negligent Killings 54-Justifiable Homicide: (enter 1) ☐ (20) Criminal Killed by Private Citizen ☐ (21) Criminal Killed by Police Officer					
	57-ADDITIONAL JUSTIFIABLE HOMICIDE CIRC.: (enter 1)			57-ADDITIONAL JUSTIFIABLE HOMICIDE CIRC.: (enter 1) ☐ (A) Criminal Attacked Police Officer ☐ (B) Criminal Attacked Fellow Police Officer ☐ (C) Criminal Attacked Civilian ☐ (D) Criminal Attempted Flight from a Crime ☐ (E) Criminal Killed in Commission of a Crime ☐ (F) Criminal Resisted Arrest ☐ (G) Unable to Determine/Not Enough Information					
ADM	58-REPORT DATE 05/07/2023	59-DAY Sun	60-TIME (Military) 19:14	61-REPORTING OFFICER Deputy Megan M. Stewart		62-CODE # 1201	63-APPROVING SUPERVISOR Sgt. Ronald D. Colby, Jr	64-CODE # 1240	65-DATE APPROVED 12/19/2023

INCIDENT REPORT

COMMONWEALTH OF VIRGINIA

AD OFFENDER / ARRESTEE	71-PAGE # 2	72-DATE 05/07/2023	73-INCIDENT NUMBER 2023-001496	74-ORI# ("B") VA0870000	75-REPORTING OFFICER Deputy Megan M. Stewart		76-CODE # 1201	77-VICTIM NAME		
	78-ARRESTEE #		79-NAME Last, First, Middle, Hicks, Armonda Thomas		80-AKA		83-Zip 23851		84-DATE OF BIRTH	
OFFENDER / ARRESTEE	81-OFFENDER # 1	82-RESIDENT ADDRESS Street Hogart Street, Franklin, VA			87-DRIVER'S LICENSE T69005629		88-DR. LI. STATE VA	89-SSN		
	85-RESIDENT PHONE		86-EMPLOYMENT/SCHOOL PHONE		92-PLACE OF EMPLOYMENT		93-ARREST TYPE: ☐ (O) On View Arrest ☐ (S) Summons/Cited ☐ (T) Taken into Cust.		105-WEAPONS AT ARREST: (Max. 2) (Place "A" in blank if automatic) ☐ (01) Unarmed ☐ (16) Illegal Cutting Instr. ☐ (11) Firearm ☐ (12) Handgun ☐ (13) Rifle ☐ (14) Shotgun ☐ (15) Other Firearm ☐ (17) Club / Blackjack / Brass Kn.	
90-ARREST LOCATION		91-OCCUPATION		97-AGE: EXACT AGE 46 AGE RANGE: to		103-MULT. ARREST INDIC.: ☐ (M) Multiple ☐ (C) Count Arrestee ☐ (N) N/A				
94-SEX: ☒ (M) Male ☐ (F) Female ☐ (U) Unk.		95-ETHNIC: ☐ (H) Hispanic ☒ (N) Nonhisp. ☐ (U) Unk.		96-RACE: ☐ (W) White ☒ (B) Black ☐ (I) American Indian ☐ (A) Asian/Pacific Islander ☐ (U) Unknown		104-DISPOSITION OF JUVENILE: ☐ (H) Handled within Department. ☐ (R) Referred outside Department.				
98-RES. STATUS: ☒ (R) Resident ☐ (N) Nonres. ☐ (U) Unknown		99-UCR ARR. CODE		100-OFFENSE NAME		101-ARREST DATE				
OFFENDER / ARRESTEE	106-TYPE ARREST ACTIVITY: (Max. 3)		107-AR. DRUG TYPE: (Max. 3)		108-ARREST TYPE: (Max. 3)		109-ARREST TYPE: (Max. 3)		110-WEAPONS AT ARREST: (Max. 2) (Place "A" in blank if automatic) ☐ (01) Unarmed ☐ (16) Illegal Cutting Instr. ☐ (11) Firearm ☐ (12) Handgun ☐ (13) Rifle ☐ (14) Shotgun ☐ (15) Other Firearm ☐ (17) Club / Blackjack / Brass Kn.	
	106-TYPE ARREST ACTIVITY: (Max. 3)		107-AR. DRUG TYPE: (Max. 3)		108-ARREST TYPE: (Max. 3)		109-ARREST TYPE: (Max. 3)			
106-TYPE ARREST ACTIVITY: (Max. 3)		107-AR. DRUG TYPE: (Max. 3)		108-ARREST TYPE: (Max. 3)		109-ARREST TYPE: (Max. 3)				
106-TYPE ARREST ACTIVITY: (Max. 3)		107-AR. DRUG TYPE: (Max. 3)		108-ARREST TYPE: (Max. 3)		109-ARREST TYPE: (Max. 3)				
SUBJECT DESCRIPTORS	HEIGHT 5'11"	WEIGHT	HANDEDNESS	BUILD	HAIR COLOR	HAIR STYLE	HAIR LENGTH	EYE COLOR	GLASSES	SKIN TONE

INCIDENT REPORT

COMMONWEALTH OF VIRGINIA

INCIDENT REPORT COMMONWEALTH OF VIRGINIA																			
VEHICLE	173-PAGE # 3		174-DATE 05/07/2023		1754-INCIDENT # 2023-001496		176-REPORTING OFFICER Deputy Megan M. Stewart				177-CODE # 1201		178-VICTIM NAME						
	179-YEAR		180-MAKE		181-MODEL		182-STYLE		183-VIN										
	186-OWNER'S NAME										187-ADDRESS								
	188-TOP/SOLID COLOR				189-SECOND COLOR				190-DISPOSITION OF RECOVERY: ☐ (I) Impounded ☐ (R) Rel. To Owner				192-SUSP. VEHICLE? ☐ Y ☐ N		193-TELETYPE NUMBER				
	179-YEAR		180-MAKE		181-MODEL		182-STYLE		183-VIN										
	186-OWNER'S NAME										187-ADDRESS								
PROPERTY	188-TOP/SOLID COLOR				189-SECOND COLOR				190-DISPOSITION OF RECOVERY: ☐ (I) Impounded ☐ (R) Rel. To Owner				192-SUSP. VEHICLE? ☐ Y ☐ N		193-TELETYPE NUMBER				
	209-OF. CODE 90Z		210-P. LOSS 6		211-P. DES. 11		212-QTY. 1		213-DESCRIPTION (Include serial number, size, color, etc.) pill bottle containing bags of narcotics				214-OWNER		215-ITEM VALUE				
	90Z		6		10		1		plastic bag containing narcotics										
	90Z				10		1		plastic bag containing narcotics										
	90Z		6		10		1		plastic bag containing narcotics										
217-TOTAL NUMBER VEHICLES STOLEN:						218-TOTAL NUMBER VEHICLES RECOVERED:				219-TOTAL VALUE STOLEN:				220-TOTAL VALUE RECOVERED:					
PROPERTY CODES	210-PROPERTY LOSS: (1) None (2) Burned (3) Counterfeited/Forged (4) Damaged/Destroyed/Vandalized (5) Recovered (6) Seized (7) Stolen, etc. (8) Unk.																		
	211-PROPERTY DESCRIPTION:																		
	(01) Aircraft (02) Alcohol (03) Automobiles (04) Bicycles (05) Buses (06) Cloths/Furs (07) Computer Hardware/ Software (08) Consumable Goods (09) Credit Cards/Debit Cards (10) Drugs/Narcotics				(11) Drug/Narc. Equipment (12) Farm Equipment (13) Firearms (14) Gambling Equipment (15) Heavy Equipment- Construction/Industry (16) Household Goods (17) Jewelry/Precious Metals (18) Livestock (19) Merchandise (20) Money				(21) Negotiable Instruments (22) Nonnegotiable Instruments (23) Office-Type Equipment (24) Other Motor Vehicles (25) Purses/Handbags/Wallets (26) Radios/TVs/VCRs (27) Recordings-Audio/Visual (28) Recreational Vehicles (29) Structures-Single Occupancy (30) Structures-Other Dwellings (31) Structures-Commercial/Business				(32) Structures-Industrial/Manufacture (33) Structures-Public/Community (34) Structures-Storage (35) Structures-Other (36) Tools-Power/Hand (37) Trucks (38) Vehicle Parts/Accessories (39) Watercraft (77) Other (88) Pending Inventory (of Property) (99) Special Category						
DRUG INFO.	222-DRUG TYPE		223-WHOLE DRUG QUANTITY				224-FRACTIONAL DRUG QUANTITY				225-DRUG MEASUREMENT				225-TYPE DRUG MEASUREMENT: WEIGHT (GM) Gram (OZ) Ounce (LB) Pound CAPACITY (ML) Milliliter (LT) Liter (FO) Fluid Ounce (GL) Gallon UNITS (DU) Dosage Unit (Pills, etc.) (NP) Number of Plants				
	222-DRUG TYPE:																		
(A) "Crack" Cocaine (B) Cocaine (C) Hashish (D) Heroin (E) Marijuana				(F) Morphine (G) Opium (H) Other Narcotics (I) LSD (J) PSP				(K) Other Hallucinogens (L) Amphetamines/ Methamphetamines (M) Other Stimulants (N) Barbiturates				(O) Other Depressants (P) Other Drugs (U) Unknown Type Drug (X) Over 3 Drug Types							
COMPLNT.	NAME: Last, First, Middle										SEX: ☐ (M) Male ☐ (F) Female ☐ (U) Unk.		AGE: _____ ☐ (00) Unknown		RACE: ☐ (W) White ☐ (B) Black ☐ (I) American Indian ☐ (A) Asian/Pacific Islander ☐ (U) Unknown				
	RESIDENT ADDRESS: Street City State Zip					RESIDENT PHONE		EMPLOY'T. PHONE											