

Entered: _____
 Checked: _____
 File Purged: _____
 N/A: _____

Year: 2018 Incident No.: 623368

1		<h2 style="margin: 0;">Jacksonville Sheriff's Office</h2> <h3 style="margin: 0;">General Offense / Incident Report</h3>	
----------	---	---	---

Incident Information

Day/Date/Time of Incident-From: **Monday 9/10/2018 07:00** Day/Date/Time of Incident-To: **Monday 9/10/2018 07:42**
 Location of Incident: **5844 JUSTINA CT** Apt./Lot #: _____ Sub-Sector: **D1**
 City: **JACKSONVILLE** State: **FLORIDA** Zip: **32277**
 Taz: **191** Crossstreet: _____ Day/Date/Time Incident Reported: **Monday 9/10/2018 07:42**
 Drug Activity: **UNKNOWN** Drug Type: **UNKNOWN** # Of Offenses: **1**
 Alcohol Related: **UNKNOWN (OR N/A)** Drug Related: **UNKNOWN (OR N/A)** # Of Victims: **1**
 M.C.I. Case: **No** Follow-up by: _____ Was Hate Crime Involved: **No** Dating Violence Involved: **No** # Of Suspects: **1**

Offense or Incident:

#1 Statute No: **999** Degree: **NA** UCR Code: **999D** Attempt Code: **Commit**
DEATH - UNDETERMINED

Victim Information #1

VICTIM TYPE:

Name: **UNKNOWN** Sub-Sector: _____
 Address: _____ Apt./Lot #: _____
 City: _____ State: _____ Zip: _____
 Taz: _____ Crossstreet: _____
 Home Phone # _____ Bus. Phone # _____ Ext. _____
 Cell Phone # _____ Cell Phone Provider _____ E-mail _____
 Is Vagrant? **NO**
 Alternate Address: _____ Alt Apt./Lot #: _____ Alt Sub-Sector: _____
 Alt City: _____ Alt State: _____ Alt Zip: _____
 Alt Taz: _____ Alt Crossstreet: _____
 Alt Home Phone # _____ Alt Bus. Phone # _____ Alt Ext. _____
 Alt Cell Phone # _____ Alt Cell Phone Provider _____ Alt E-mail _____
 Hospital Where Victim taken: **NOT APPLICABLE**
 Place of Employ /School: _____
 Race: **UNKNOWN** Ethnicity: **UNKNOWN** Sex: **Unknown** DOB: _____

Age range is from _____ to _____

Height range is from _____ to _____ Weight (lbs) range is from _____ to _____

Eye Color: _____ Hair Color: _____

Injury Extent: _____ Injury Type: _____

Residence Type: _____

Residence Status: _____

Offenses Victim of:

#1 DEATH - UNDETERMINED

Victim Relationship To Offender: _____

RELATIONSHIP UNKNOWN **#1 UNKNOWN,**

Weapons Involved: **UNKNOWN WEAPON**

Suspect Information #1

Suspect Location: At Large

Name: **UNKNOWN** Sub-Sector: _____
 Address: _____ Apt./Lot #: _____
 City: _____ State: _____ Zip: _____
 Taz: _____ Crossstreet: _____
 Home Phone # _____ Bus. Phone # _____ Ext. _____
 Cell Phone # _____ Cell Phone Provider _____ E-mail _____
 Is Vagrant? **NO**

Place of Employ /School:

Race: **UNKNOWN** Ethnicity: **UNKNOWN** Sex: **Unknown** DOB:

Age range is from to

Height range is from to Weight (lbs) range is from to

Eye Color: **UNKNOWN** Hair Color: Hair length:

Hair Style: Complexion: Voice: Facial Hair:

Distinguishing Marks:

Clothing/Description:

Nickname(s):

Aliases:

Charges:

#1 **DEATH - UNDETERMINED**

Jail Booking # N/A

OBTS No. Juvenile: **Unk** Miranda Warnings Given: **No** Suspect Confessed?

Ecd Usage: **NOT APPLICABLE**

RTR written related to this incident? **NO** RTR Incident Yr: RTR Incident #:

ADDITIONAL INFORMATION

On 9/10/2018 at 0743 hours, I was dispatched to 5844 Justina Ct (Justina Villa Apartments) in reference to a person shot.

Upon arrival, I located an individual deceased in the courtyard of the complex building.

Sgt. C.P. James #60848 responded to the scene and notified the Homicide Unit.

Lt. D.H. Hall #5444 was notified of the incident.

The Homicide Unit responded to the scene.

The Crime Scene Unit responded to process the scene.

The ME office responded to the scene.

This is an on-going investigation.

Clearance Status: **ONGOING INVESTIGATION**

Clearance Code: Date case was cleared:

Number of Cases Cleared

CRIME ANALYSIS

Aggravated Assault/Murder: **NOT APPLICABLE**

Type of Weapon: **NOT APPLICABLE**

Forced Entry: **NOT APPLICABLE** Structure Occupancy Code: **NOT APPLICABLE**

Number of Premises Entered:

Location Type: **Apartment / Condo**

Incident Occurred Outside this Location Incident Occurred In the Parking Lot at this Location: **No**

Number of Vehicles Recovered:

Number of Arrested:

School Name: School Number

MISCELLANEOUS:

Is Offense Related to Domestic Violence: **No** If yes, were Children under 18 Present: **No** If No is it Domestic Related: **NO**

Is there additional information included on a continuation report: **Yes** Are there other Pertinent Reports: **Yes**

In your opinion is there significant reason to believe that the crime can be solved by a patrol follow-up investigation? **No**

Neighborhood Canvass Conducted: **No**

Case Information Card Left With: **N.A.**

If Other (Name Address):

Address: Apt./Lot #:

Sub-Sector:

City: State: Zip:

Taz: Crossstreet:

Home Phone # Bus. Phone # Ext.

Cell Phone # Cell Phone Provider E-mail

Is Vagrant? **NO**

Investigative Time:

#1 Hours: **4** Minutes: **0** Cost Amount: **\$192.96**

Detective Called To the Scene: **S.D. DISHMAN #73748**
Evidence Technician Called to the Scene: **S. WELLS #61130**
Reporting Officers: **R.C.CAMPBELL**

NA: [] Notified: []
NA: [] Assigned By HQ: []
ID #76073
ID #0 9/10/2018 11:41
ID #60848 9/10/2018 12:06

Approving Supervisor **C.P.JAMES**
Division: **PATROL** Unit: **ZONE 2**