



# Arkansas Uniform Incident Report

Incident Report Number  
2011-35697

<b>S U M M A R Y</b>	Type Incident <b>HIT AND RUN</b>	Incident Date <b>04/09/2011</b>	Incident Time <b>10:33 PM</b>	
	Call Location <b>111 W.MARKHAM</b>	Call Date <b>04/09/2011</b>	Call Time <b>10:35 PM</b>	
	Incident Address <b>111 W MARKHAM</b>	Incident City <b>LITTLE ROCK</b>	Incident State <b>AR</b>	Incident Zip Code <b>72201</b>
	Number of Subjects <b>1</b>	Number of Vehicles <b>2</b>	Unit Assigned <b>X40</b>	

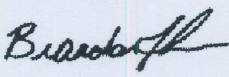
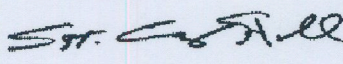
<b>S U B J E C T</b>	The Subject is: <b>OPERATOR, OWNER</b>					Subject SSN
	Subject - Last Name <b>HODGES</b>		Subject - First Name <b>MICHELLE</b>		Subject - MI <b>L</b>	Subject - Suffix Subject - Telephone #
	Subject - Address		Subject - City <b>BENTON</b>		Subject - State <b>AR</b>	Subject - Zip Code <b>72019</b>
	Subject - Driver License Number		Subject - DL State <b>AR</b>	Subject - DL Endorsements	Subject - DL Class	DL Restrictions
	Subject - DOB	Subject - Race <b>CAUCASIAN</b>	Subject - Sex <b>FEMALE</b>	Subject - Height <b>5'02"</b>	Subject - Weight <b>120 lbs.</b>	Subject - Hair Color <b>BROWN</b> Subject - Eye Color <b>UNKNOWN</b>
	Subject - Employer					Subject - Work Number
	Subject - Employer Address		Subject - Employer City		Employer State	Subject - Employer Zip Code
	Injury Transported <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		TRANSPORTED BY			
	HOSPITAL NAME			HOSPITAL CITY		HOSPITAL STAT
	Subject - Additional Information					

<b>V E H I C L E</b>	Vehicle Class <b>SUBJECT OF REPORT</b>					
	Year <b>2003</b>	Make <b>TOYOTA</b>	Model <b>COROLLA</b>	Plate - Year <b>2012</b>	Plate - State <b>ARKANSAS</b>	
	Plate - Number <b>049PKH</b>	Vehicle - Body <b>4 DOOR</b>	Vehicle - Color <b>WHITE</b>	Vehicle Identification Number <b>1NXBR32E93Z072316</b>		
	Vehicle Towed <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	NAME OF TOWING SERVI		ADDRESS VEHICLE REMOVED		
		CITY VEHICLE REMOVED		STATE VEHICLE REMOVED		ZIP VEHICLE REMOVED
	Remarks					

<b>V E H I C L E</b>	Vehicle Class <b>SUSPECT</b>					
	Year <b>2099</b>	Make <b>FORD</b>	Model <b>F150</b>	Plate - Year <b>2099</b>	Plate - State <b>ARKANSAS</b>	
	Plate - Number <b>65</b>	Vehicle - Body <b>PICKUP</b>	Vehicle - Color <b>BLUE</b>	Vehicle Identification Number <b>999999999999</b>		
	Vehicle Towed <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	NAME OF TOWING SERVI		ADDRESS VEHICLE REMOVED		
		CITY VEHICLE REMOVED		STATE VEHICLE REMOVED		ZIP VEHICLE REMOVED
	Remarks <b>HOUSE OF REPRESENTITIVES</b>					

**Narrative**

CONTACT WAS MADE WITH THE OPERATER OF V1 WHO STATED THAT THE TRUCK WAS PARKED INFRONT OF THE CAPITAL HOTEL AND AS SHE PASSED IT PULLED INTO HER REAR QUARTERPANEL. MS.HODGES STATED THAT THE TRUCK CONTINUED EAST BOUND ON MARKHAM AND THEN TURNED SOUTH ONTO MAIN ST. MS.HODGES COULD NOT GIVE ANY FURTHER INFORMATION ON THE SUSPECT VEHICLE.  
THE DAMAGE TO V1 IS APPROX. \$500.

Rank OFC	Officer - Last Name JOHNSON	Officer - First Name BRANDON	Officer - MI	Officer - Suffix
Officer - Signature 		Officer - Department LITTLE ROCK PD		
		Officer - Badge Number 29367		
Rank SGT	Supervisor - Last Name HALL	Supervisor - First Name COREY	Supervisor - MI	Supervisor - Suffix
Supervisor - Signature 		Supervisor - Department LITTLE ROCK PD		
		Supervisor - Badge Number 17432		