

LITTLE ROCK POLICE DEPARTMENT INCIDENT REPORT

INCIDENT INFORMATION: PAGE 1 OF 3

INCIDENT NUMBER: 2012-118347
UNIT ASSIGNED: 3X54
CALL DATE: 10/25/2012
CALL TIME: 02:43
TYPE OF CALL: SHOTS

DATE(S) OF INCIDENT: 10/25/2012
TIME(S) OF INCIDENT: 0243
LOCATION OF INCIDENT (ADDRESS/BLK#/APT#): 1200 FAIR BLVD / 5424 W 12TH ST
DISTRICT: 54

OFFENSE

INCIDENT/OFFENSE TYPE: 1. Homicide
OFFENSE STATUS: Attempted, Completed

SUSPECTS USED: (A) Alcohol, (D) Drugs, (N) Not Applicable/Unknown
TYPE CRIMINAL ACTIVITY: (B) Buying/Receiving, (C) Cultivate/Manufacture/Publish, etc.
GANG RELATED INFO: (J) Juvenile Gang, (N) None/Unknown

LOCATION CODE: (13) Highway/Road/Alley
WEAPON FORCE: (12) Handgun
METHOD OF ENTRY: F (Forcible), N (No Force)

VICTIM

VICTIM # 1
NAME (Last, First, Middle) or BUSINESS: HALL, CHARLES JR
D.L./ID NO. (STATE): AR 909561421
DATE OF BIRTH: 12/1/1984

ADDRESS: Street City State Zip
207 N JEFFERSON ST STAR CITY, AR 71667
RELATIONSHIP OF THIS VICTIM TO SUSPECTS (For Multiple Suspect Relationships, Put Suspect Number(s) in Space)

OCCUPATION/EMPLOYER HOME PHONE EMPLOYMENT PHONE
SEX: (M) Male, (F) Female, (U) Unk.
AGE: Exact Age 27

ETHNIC: (H) Hispanic, (N) Non-Hispanic, (U) Unk.
RACE: (W) White, (B) Black, (I) American Indian, (A) Asian/Pacific Islander, (U) Unknown

RES. STATUS: (R) Resident, (N) Nonresident, (U) Unknown
VICTIM TYPE: (I) Individual, (B) Business, (F) Financial Inst., (U) Unk., (G) Government, (R) Religious, (S) Society/Public, (O) Other

VICTIM INJURY: (N) None, (I) Possible Internal Injury, (O) Other Major Injury, (M) Apparent Minor Injury, (T) Loss of Teeth, (U) Unconsciousness, (B) Apparent Broken Bones, (L) Severe Laceration

AGGRAVATED ASSAULT/HOMICIDE (Max. 2): (10) Unknown Circumstances, (31) Gun-Cleaning Accident

MENTALLY AFFLICTED?: (Y) Yes, (N) No, (U) Unknown
THIS VICTIM RELATED TO WHICH OFFENSES?: #1

AGGRAVATED ASSAULT/HOMICIDE (Max. 2): (01) Argument, (02) Assault on Law Enf. Officer, (03) Drug Deal, (04) Gangland, (05) Juvenile Gang, (06) Lover's Quarrel, (07) Mercy Killings, (08) Other Felony Involved, (09) Other Circumstances, (10) Unknown Circumstances, (20) Criminal Killed by Private Citizen, (21) Criminal Killed by Police Officer, (30) Child Playing w/Weapon, (31) Gun-Cleaning Accident, (32) Hunting Accident, (33) Other Negligent Weapon Handling, (34) Other Negligent Killings

REPORT DATE: 10/25/2012
TIME (Military): 13:18
REPORTING OFFICER: JONATHAN POE
EMPLOYEE #: 30405
APPROVING SUPERVISOR: KENNETH DURHAM
EMPLOYEE #: 10396

**SUSPECT**

<b>SUSPECT #</b> 1	<b>NAME:</b> Last <u>                    </u> First <b>UNKNOWN, UNKNOWN</b> Middle <u>                    </u> AKA <u>                    </u>		
<b>ARRESTEE #</b> 0	<b>ADDRESS:</b> Street <u>                    </u> City <b>UNKNOWN UNKNOWN AR</b> State <u>                    </u> Zip <u>                    </u>		<b>DATE OF BIRTH</b> <u>                    </u>
<b>RES. STATUS:</b> <input type="checkbox"/> (R) Resident <input type="checkbox"/> (N) Nonresident <input checked="" type="checkbox"/> (U) Unknown		<b>MENTALLY AFFLICTED?</b> <input type="checkbox"/> (Y) Yes <input type="checkbox"/> (N) No <input checked="" type="checkbox"/> (U) Unk	<b>PLACE OF EMPLOYMENT</b> <u>                    </u>
<b>ARREST LOCATION</b> <u>                    </u>		<b>ARREST DATE</b> <u>                    </u>	<b>ARREST TYPE:</b> <input type="checkbox"/> (O) On View Arrest <input type="checkbox"/> (S) Summons/Cited <input type="checkbox"/> (T) Taken Into Custody
<b>CHARGE:</b> <u>                    </u>			<b>D.L./ID NO. (STATE)</b> AR
<b>SEX:</b> <input type="checkbox"/> (M) Male <input type="checkbox"/> (F) Female <input checked="" type="checkbox"/> (U) Unk.		<b>AGE:</b> Exact Age <u>                    </u> Age Range: <u>                    </u> to <u>                    </u>	<b>SUSPECTS ACTIONS RELATED TO:</b> <input checked="" type="checkbox"/> V1 <input type="checkbox"/> V2 <input type="checkbox"/> V3 <input type="checkbox"/> V4 <input type="checkbox"/> V5 <input type="checkbox"/> V6 <input type="checkbox"/> V7 <input type="checkbox"/> V8
<b>ETHNIC:</b> <input type="checkbox"/> (H) Hispanic <input type="checkbox"/> (N) Non-Hisp. <input checked="" type="checkbox"/> (U) Unk.		<b>DISPOSITION OF JUVENILE:</b> <input type="checkbox"/> (H) Handled within Department <input type="checkbox"/> (R) Referred outside Department	
<b>RACE:</b> <input type="checkbox"/> (W) White <input type="checkbox"/> (B) Black <input type="checkbox"/> (I) American Indian <input type="checkbox"/> (A) Asian/Pacific Islander <input checked="" type="checkbox"/> (U) Unknown		<b>WEAPONS AT ARREST:</b> (Max 2) (Place "A" in blank if auto/semi) <input type="checkbox"/> (01) Unarmed <input type="checkbox"/> (11) Firearm (Unk) <input type="checkbox"/> (12) Handgun <input type="checkbox"/> (13) Rifle <input type="checkbox"/> (14) Shotgun <input type="checkbox"/> (15) Other Firearm <input type="checkbox"/> (16) Illegal Cutting Instrument <input type="checkbox"/> (17) Club/BlackJack/Brass	
<b>THIS SUSPECT RELATES TO WHICH OFFENSES?</b> <input checked="" type="checkbox"/> #1 <input type="checkbox"/> #2 <input type="checkbox"/> #3 <input type="checkbox"/> #4 <input type="checkbox"/> #5 <input type="checkbox"/> #6 <input type="checkbox"/> #7 <input type="checkbox"/> #8		<b>HEIGHT:</b> Ft. <u>                    </u> In. <u>                    </u>	<b>WEIGHT:</b> lbs. <u>                    </u>
<b>CLOTHING DESCRIPTION</b> Hat <u>                    </u> Coat <u>                    </u> Shirt <u>                    </u> Pants/Dress <u>                    </u> Shoes <u>                    </u>			
<b>COMPLEXION:-2</b> <input type="checkbox"/> (1) Light <input type="checkbox"/> (2) Medium <input type="checkbox"/> (3) Dark <input type="checkbox"/> (4) Acne <input type="checkbox"/> (5) Freckled <input type="checkbox"/> (6) Ruddy <input type="checkbox"/> (7) Other <input checked="" type="checkbox"/> (8) Unknown	<b>HAIR STYLE:-2</b> <input type="checkbox"/> (01) Afro <input type="checkbox"/> (02) Wavy <input type="checkbox"/> (03) Straight <input type="checkbox"/> (04) Curly <input type="checkbox"/> (05) Braided <input type="checkbox"/> (06) Ponytail <input type="checkbox"/> (07) Military <input type="checkbox"/> (08) Processed <input type="checkbox"/> (09) Wig/Toupee <input type="checkbox"/> (10) Other <input type="checkbox"/> (11) Unknown	<b>HAIR COLOR:-1</b> <input type="checkbox"/> (1) Black <input type="checkbox"/> (2) Blonde <input type="checkbox"/> (3) Brown <input type="checkbox"/> (4) Grey <input type="checkbox"/> (5) Red <input type="checkbox"/> (6) Sandy <input type="checkbox"/> (7) Other <input checked="" type="checkbox"/> (8) Unknown	<b>FACIAL HAIR:-3</b> <input type="checkbox"/> (01) Clean Shaven <input type="checkbox"/> (02) Unshaven <input type="checkbox"/> (03) Full Beard <input type="checkbox"/> (04) Must. (hvy) <input type="checkbox"/> (05) Must. (thin) <input type="checkbox"/> (06) Brows (hvy) <input type="checkbox"/> (07) Brows (thin) <input type="checkbox"/> (08) Side Burns <input type="checkbox"/> (09) Goatee <input type="checkbox"/> (10) Other <input checked="" type="checkbox"/> (11) Unknown
<b>HAIR LENGTH:-2</b> <input type="checkbox"/> (1) Long <input type="checkbox"/> (2) Medium <input type="checkbox"/> (3) Short <input type="checkbox"/> (4) Bald(ing) <input type="checkbox"/> (5) Other <input checked="" type="checkbox"/> (6) Unknown	<b>BUILD:-1</b> <input type="checkbox"/> (1) Light <input type="checkbox"/> (2) Medium <input type="checkbox"/> (3) Heavy <input type="checkbox"/> (4) Muscular <input checked="" type="checkbox"/> (5) Unknown	<b>EYE COLOR:-1</b> <input type="checkbox"/> (1) Blue <input type="checkbox"/> (2) Brown <input type="checkbox"/> (3) Grey <input type="checkbox"/> (4) Green <input type="checkbox"/> (5) Hazel <input type="checkbox"/> (6) Other <input checked="" type="checkbox"/> (7) Unknown	<b>DEMEANOR:-3</b> <input type="checkbox"/> (01) Angry <input type="checkbox"/> (02) Apologetic <input type="checkbox"/> (03) Calm <input type="checkbox"/> (04) Irrational <input type="checkbox"/> (05) Nervous <input type="checkbox"/> (06) Polite <input type="checkbox"/> (07) Professional <input type="checkbox"/> (08) Stupor <input type="checkbox"/> (09) Violent <input type="checkbox"/> (10) Drunk/High <input type="checkbox"/> (11) Other <input checked="" type="checkbox"/> (12) Unknown
<b>SCAR/B*THMARK:-3</b> <input type="checkbox"/> (01) Head <input type="checkbox"/> (02) Neck <input type="checkbox"/> (03) Hand (rt) <input type="checkbox"/> (04) Hand (lft) <input type="checkbox"/> (05) Arm (rt) <input type="checkbox"/> (06) Arm (lft) <input type="checkbox"/> (07) Body <input type="checkbox"/> (08) Leg (rt) <input type="checkbox"/> (09) Leg (lft) <input type="checkbox"/> (10) Other <input type="checkbox"/> (11) None <input checked="" type="checkbox"/> (12) Unknown		<b>TATTOO:-2</b> <input type="checkbox"/> (1) Designs <input type="checkbox"/> (2) Initials <input type="checkbox"/> (3) Names <input type="checkbox"/> (4) Pictures <input type="checkbox"/> (5) Words <input type="checkbox"/> (6) Numbers <input type="checkbox"/> (7) Insignia <input type="checkbox"/> (8) None <input checked="" type="checkbox"/> (9) Unknown	<b>TATTOO LOC:-2</b> <input type="checkbox"/> (01) Arm (lft) <input type="checkbox"/> (02) Arm (rt) <input type="checkbox"/> (03) Leg (lft) <input type="checkbox"/> (04) Leg (rt) <input type="checkbox"/> (05) Hand (lft) <input type="checkbox"/> (06) Hand (rt) <input type="checkbox"/> (07) Face <input type="checkbox"/> (08) Neck <input type="checkbox"/> (09) Finger(s) <input type="checkbox"/> (10) Chest <input type="checkbox"/> (11) Back
<b>ADDED DESCRIPTION</b> <u>                    </u>			

**VEHICLE # 1**

<input type="checkbox"/> WANTED <input type="checkbox"/> SUSPECT <input type="checkbox"/> SUBJECT OF REPORT <input type="checkbox"/> STOLEN <input type="checkbox"/> ABANDONED <input checked="" type="checkbox"/> STORED <input type="checkbox"/> OTHER <input type="checkbox"/> HOLD AUTH. <u>                    </u>									
<b>YEAR</b> 1986	<b>MAKE</b> OLDS	<b>MODEL</b> CUTLASS	<b>STYLE</b> 2D	<b>VIN</b> 1G3GM47YXGP311247	<b>LICENSE NO.</b> GF LZK	<b>(TYPE)</b> PC	<b>LIC YR</b> 2013	<b>STATE</b> AR	
<b>OWNER'S NAME</b> JOHNSON, KATIE					<b>ADDRESS</b> 207 N JEFFERSON ST STAR CITY, AR 71667				
<b>COLOR</b> GLD	<b>DISPOSITION OF RECOVERY</b> <input checked="" type="checkbox"/> (I) Impounded <input type="checkbox"/> (R) Release to Owner			<b>NIC #</b> <u>                    </u>	<b>INSURANCE/POLICY #</b> <u>                    </u>				

INCIDENT# 2012-118347

 JUVENILE INFORMATIONPAGE 3 OF 3**NARRATIVE**

MVR NOT EQUIPPED. AT APPROXIMATELY 0243 HRS, I RESPONDED TO A SHOTS FIRED CALL AT 12TH STREET AND FAIR PARK BLVD. WHILE EN ROUTE, COMMUNICATIONS ADVISED A BLACK MALE HAD BEEN SHOT IN A CAR AT 1100 FAIR PARK BLVD. UPON MY ARRIVAL, I OBSERVED A 1986 OLDSMOBILE CUTLASS (AR LPN: GF LZK) RUNNING IN THE MIDDLE OF THE STREET FACING SOUTHEAST. AS I APPROACHED THE VEHICLE, I OBSERVED SEVERAL CIRCULAR SKID MARKS ON THE PAVEMENT. I ARRIVED AT THE DRIVER SIDE OF THE VEHICLE AND OBSERVED A BLACK MALE SLUMPED OVER INTO THE PASSENGER SEAT. SGT. SCOTT WAS NOTIFIED AND RESPONDED TO THE SCENE. MEMS TRANSPORTED MR. HALL TO UAMS. HE WAS PRONOUNCED DEAD AT 0328 HOURS. SHORTLY AFTER, CSSU ARRIVED AND BEGAN PROCESSING THE AREA. SEVERAL MINUTES LATER THE DETECTIVES ARRIVED AND BEGAN THEIR INVESTIGATION. AFTER COMPLETING THEIR FIELD NOTES CSSU AND THE D.O. RELEASED THE SCENE. THE CAR WAS TOWED TO THE CRIME SCENE BAY BY ASHER TOWING. OFFICER TYER FOLLOWED IT TO THAT LOCATION.

## ADDITIONAL HOMICIDE CIRCUMSTANCES

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> (A) Criminal attacked police officer, that officer killed criminal     | <input type="checkbox"/> (C) Criminal attacked a civilian             | <input type="checkbox"/> (F) Criminal resisted arrest                   |
| <input type="checkbox"/> (B) Criminal attacked police officer; criminal killed by other officer | <input type="checkbox"/> (D) Criminal attempted flight from a crime   | <input type="checkbox"/> (G) Unable to determine/not enough information |
|   | <input type="checkbox"/> (E) Criminal killed in commission of a crime |   |

RELATED CASE NUMBER(S)

CAR JACKING?  YES  NODRIVE-BY?  YES  NOGANG RELATED?  YES  NO**HATE/BIAS RELATIONSHIP:  (88) None  IF YES, COMPLETE BELOW**

## RACIAL (Anti-)

- (11) White  
 (12) Black  
 (13) American Indian/  
 Alaskan Native  
 (14) Asian/Pacific Islander  
 (15) Multi-Racial Group

## RELIGIOUS (Anti-)

- (21) Jewish  
 (22) Catholic  
 (23) Protestant  
 (24) Islamic (Muslim)  
 (25) Other Religion  
 (26) Multi-Religious Group  
 (27) Atheism/Agnosticism

## ETHNICITY/NATIONAL ORIGIN (Anti-)

- (32) Hispanic  
 (33) Other Ethnicity

## DISABILITY (Anti-)

- (51) Physical Disability  
 (52) Mental Disability

## SEXUAL (Anti-)

- (41) Male Homosexual (Gay)  
 (42) Female Homosexual (Lesbian)  
 (43) Homosexual (Gay and Lesbian)  
 (44) Heterosexual  
 (45) Bisexual