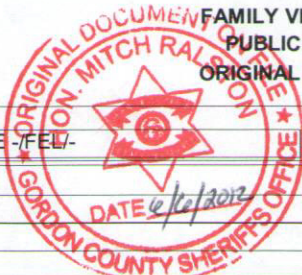


GORDON COUNTY SHERIFF'S OFFICE INCIDENT REPORT

AGENCY ID
GA0640000



**FAMILY VIOLENCE
PUBLIC COPY
ORIGINAL REPORT**

CASE NUMBER
12-05-0944

Statute	INCIDENT TYPE	CNT	GOC UCR CODE	UCR DESCRIPTION
16-5-23.1(F)	BATTERY-FAMILY VIOLENCE - FELT	1	1399	ASSAULT/BATTERY:OTHER OFFENSE

EVENT	LOCATION DESCRIPTION AND ADDRESS				ZONE		PREMISE TYPE									
	932 HWY 411 SE RANGER, GA 30734 -						<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>HIGHWAY</td> <td>SVC STATION</td> </tr> <tr> <td>CONVENIENCE STORE</td> <td>BANK</td> </tr> <tr> <td>COMMERCIAL</td> <td><input checked="" type="checkbox"/> RESIDENCE</td> </tr> <tr> <td>SCHOOL/CAMPUS</td> <td>ALL OTHERS</td> </tr> </table>		HIGHWAY	SVC STATION	CONVENIENCE STORE	BANK	COMMERCIAL	<input checked="" type="checkbox"/> RESIDENCE	SCHOOL/CAMPUS	ALL OTHERS
	HIGHWAY	SVC STATION														
CONVENIENCE STORE	BANK															
COMMERCIAL	<input checked="" type="checkbox"/> RESIDENCE															
SCHOOL/CAMPUS	ALL OTHERS															
INCIDENT DATE: 05/19/2012 TIME: 1800 TO DATE: 05/19/2012 TIME: 2200 STRANGER TO STRANGER: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> UNK <input type="checkbox"/> DAY OF THE WEEK (INCIDENT): SUN <input type="checkbox"/> MON <input type="checkbox"/> TUE <input type="checkbox"/> WED <input type="checkbox"/> THU <input type="checkbox"/> FRI <input type="checkbox"/> SAT <input checked="" type="checkbox"/> UNK <input type="checkbox"/>				DISCOVERED BY		WEAPON TYPE										
				<input type="checkbox"/> Officer On Patrol <input type="checkbox"/> Reporting Party <input type="checkbox"/> Private Security <input type="checkbox"/> Alarm <input type="checkbox"/> Complainant		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>GUN</td> <td>KNIFE</td> <td><input checked="" type="checkbox"/> HANDS/FISTS, ETC.</td> </tr> <tr> <td>OTHER</td> <td></td> <td>UNKNOWN</td> </tr> </table>		GUN	KNIFE	<input checked="" type="checkbox"/> HANDS/FISTS, ETC.	OTHER		UNKNOWN			
GUN	KNIFE	<input checked="" type="checkbox"/> HANDS/FISTS, ETC.														
OTHER		UNKNOWN														

PROPERTY TOTALS	01 - VEHICLES		02 - CURRENCY, NOTES, ETC.		03 - JEWELRY, PREC. METALS		04 - FURS		THEFT / REC.V.		GOVT PROP.
	STOLEN										
	RECOVERED										
05 - CLOTHING		06 - OFFICE EQUIP.		07 - TV, RADIO, ETC.		08 - HOUSEHOLD GOODS					
STOLEN											
RECOVERED											
09 - FIREARMS		10 - CONSUMABLE GOODS		11 - LIVESTOCK		12 - OTHER		TOTALS		THEFT DATE	
STOLEN											
RECOVERED										RECOVERY DATE	

DRUG	DID INVESTIGATION INDICATE THAT THIS INCIDENT WAS DRUG-RELATED? IF YES, PLEASE INDICATE THE TYPE OF DRUG(S) USED BY OFFENDER					DID INVESTIGATION INDICATE THAT INCIDENT WAS GANG RELATED?				
	<input type="checkbox"/> YES <input type="checkbox"/> NO					<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				
	DRUG 1	DRUG 2	DRUG 3	DRUG 4	DRUG 5					
DRUG 6	DRUG 7	DRUG 8	DRUG 9	DRUG 10						

STATE	OCA <input type="checkbox"/> ENTRY <input type="checkbox"/> CANCEL <input type="checkbox"/> CLEARANCE <input type="checkbox"/>				CASE STATUS				
	PERSON <input type="checkbox"/> WARRANT <input type="checkbox"/> VEHICLE <input type="checkbox"/> ARTICLE <input type="checkbox"/> BOAT <input type="checkbox"/> GUN <input type="checkbox"/>	ACTIVE <input type="checkbox"/>	CLEARED BY ARREST <input checked="" type="checkbox"/>	EX CLEARED <input type="checkbox"/>	UNFOUNDED <input type="checkbox"/>	INACTIVE <input type="checkbox"/>			

ADMINISTRATION	ARREST AT OR NEAR OFFENSE SCENE		TOTAL NUMBER ARRESTED		DATE OF REPORT		ADULT		JUVENILE	
	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		1		05/20/2012		ADULT <input checked="" type="checkbox"/>		JUVENILE <input type="checkbox"/>	
	EVIDENCE COLLECTED? <input type="checkbox"/> N		COMPLAINT UNFOUNDED? <input type="checkbox"/> N		FOLLOW UP - PATROL? <input type="checkbox"/> N		CLEARANCE DATE		05/21/2012	
	PRINTS TAKEN? <input type="checkbox"/> N		WILLING TO PROSECUTE? <input type="checkbox"/> Y		FOLLOW UP - DETECTIVES <input type="checkbox"/> N		CASE STATUS		CLEARED BY ARREST	
	BIO./DNA EVIDENCE? <input type="checkbox"/> N						REVIEWED BY		25 JAMES SHAW	
	REPORTING OFFICER		181 GLENN PRINE		REVIEWED DATE		05/21/2012			
APPROVING OFFICER		121 WILLIAM BRAY		DIVISION ASSIGNED						
APPROVED DATE		05/21/2012		ASSIGNED DATE						
				INVESTIGATOR ASSIGNED		164 CARRIE SMITH				
				ASSIGNED DATE		05/21/2012				

WERE CHILDREN INVOLVED?	NO <input type="checkbox"/>	WAS ACT COMMITTED WITH CHILDREN PRESENT?	NO <input type="checkbox"/>
PRIOR COURT ORDERS	NO <input type="checkbox"/>	VICTIM ADVISED	YES <input type="checkbox"/>
		NUMBER OF PREVIOUS COMPLAINTS AS ADVISED BY VICTIM	
		MORE THAN 10	

DOMESTIC QUESTIONS	TYPE AND EXTENT OF ALLEGED ABUSE			
	FATAL INJURY <input type="checkbox"/>	PERMANENT DISABILITY <input type="checkbox"/>	TEMP. DISABILITY <input checked="" type="checkbox"/>	BROKEN BONES <input type="checkbox"/>
	GUN / KNIFE WOUNDS <input type="checkbox"/>	SUPERFICIAL INJURY <input type="checkbox"/>	PROP. DAMAGE / THEFT <input type="checkbox"/>	THREATS <input type="checkbox"/>
ABUSIVE LANGUAGE <input type="checkbox"/> SEXUAL <input type="checkbox"/> OTHER ABUSE <input type="checkbox"/>				
POLICE ACTION TAKEN				
ARREST <input type="checkbox"/>	SEPARATION <input type="checkbox"/>	OTHER ACTION <input checked="" type="checkbox"/>	NO ACTION <input type="checkbox"/>	
CITATION <input type="checkbox"/>	MEDIATION <input type="checkbox"/>			

IF NO ARREST MADE, WHY NOT			
JUVENILE <input type="checkbox"/>	AGGRESSOR MISSING <input checked="" type="checkbox"/>	INSUFFICIENT PROBABLE CAUS <input type="checkbox"/>	OTHER REASON <input type="checkbox"/>

HOW WAS PRIMARY AGGRESSOR IDENTIFIED		
PHYSICAL EVIDENCE <input type="checkbox"/>	TESTIMONIAL EVIDENCE <input checked="" type="checkbox"/>	OTHER MEANS <input type="checkbox"/>

SUBSTANCE ABUSE			
DID INVESTIGATION INDICATE THAT A SUBSTANCE WAS INVOLVED? YES <input type="checkbox"/>			
		AGGRESSOR	
		DRUGS <input checked="" type="checkbox"/>	ALCOHOL <input type="checkbox"/>
		VICTIM	
		DRUGS <input type="checkbox"/>	ALCOHOL <input type="checkbox"/>

RELATIONSHIP OF PRIMARY AGGRESSOR TO VICTIM(S)					
PRESENT SPOUSE <input type="checkbox"/>	FOSTER PARENT <input type="checkbox"/>	STEPPARENT <input type="checkbox"/>	PARENT <input type="checkbox"/>	NONE OF ABOVE, LIVES IN SAME HOUSE	
CHILD <input checked="" type="checkbox"/>	FORMER SPOUSE <input type="checkbox"/>	FOSTER CHILD <input type="checkbox"/>	STEPCHILD <input type="checkbox"/>		

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GORDON COUNTY SHERIFF'S OFFICE INCIDENT REPORT

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CASE NUMBER
12-05-0944

PERSONS	<input type="checkbox"/> COMPLAINANT <input type="checkbox"/> VICTIM <input type="checkbox"/> WITNESS <input type="checkbox"/> OFFENDER <input checked="" type="checkbox"/> PRIMARY AGGRESSOR <input type="checkbox"/> JUVENILE <input type="checkbox"/> RAPE VICTIM	
	NAME PARKER, DOUGLAS GLENN ADDRESS 932 HWY 411 SE CITY RANGER ST GA ZIP 30734	TYPE _____ EMP. UNEMPLOYED SCHOOL _____ PHONE _____ CELL _____
	SSN _____ RACE W HEIGHT 510 HAIR BRO DOB _____ AGE 54 SEX M WEIGHT 200 EYES BLU	MISSING <input type="checkbox"/> DEAD/UNIDENTIFIED <input type="checkbox"/> UNKNOWN <input type="checkbox"/> RETURNED <input type="checkbox"/> WANTED <input type="checkbox"/> SUSPECT <input checked="" type="checkbox"/> WARRANT <input checked="" type="checkbox"/> ARRESTED <input checked="" type="checkbox"/>

OFF. DATE/TIME **05/19/2012** **0000** ARR. AGENCY **GCSO** **GORDON COUNTY SHERIFF'S OFFICE** ORI **GA0640000**
 ARREST DATE **05/20/2012** ARREST TIME **0000** ARREST / AT NEAR **Y** OFFENDER TRACK NO. _____ GCIC CLASS. NO. _____

CHARGES
16-5-23.1(F)2 BATTERY-FAMILY VIOLENCE -/FEL/- **1** **1399** **ASSAULT/BATTERY:OTHER OFFENSE**

PERSONS	<input checked="" type="checkbox"/> COMPLAINANT <input checked="" type="checkbox"/> VICTIM <input type="checkbox"/> WITNESS <input type="checkbox"/> OFFENDER <input type="checkbox"/> PRIMARY AGGRESSOR <input type="checkbox"/> JUVENILE <input type="checkbox"/> RAPE VICTIM	
	NAME FIELDS, EDNA SUE ADDRESS 932 HWY 411 SE CITY RANGER ST GA ZIP 30734	TYPE _____ EMP. UNEMPLOYED SCHOOL _____ PHONE _____ CELL _____
	SSN _____ RACE W HEIGHT 504 HAIR BRO DOB _____ AGE 71 SEX F WEIGHT 160 EYES HAZ	MISSING <input type="checkbox"/> DEAD/UNIDENTIFIED <input type="checkbox"/> UNKNOWN <input type="checkbox"/> RETURNED <input type="checkbox"/> WANTED <input type="checkbox"/> SUSPECT <input type="checkbox"/> WARRANT <input type="checkbox"/> ARRESTED <input type="checkbox"/>

OFF. DATE/TIME _____ _____ ARR. AGENCY _____ _____ ORI **GA0640000**
 ARREST DATE _____ ARREST TIME _____ ARREST / AT NEAR OFFENDER TRACK NO. _____ GCIC CLASS. NO. _____

CHARGES

PERSONS	<input checked="" type="checkbox"/> COMPLAINANT <input type="checkbox"/> VICTIM <input type="checkbox"/> WITNESS <input type="checkbox"/> OFFENDER <input type="checkbox"/> PRIMARY AGGRESSOR <input type="checkbox"/> JUVENILE <input type="checkbox"/> RAPE VICTIM	
	NAME WADE, REBECCA JUNE ADDRESS 237 FLORA DRIVE SW CITY CALHOUN ST GA ZIP 30701	TYPE _____ EMP. UNEMPLOYED SCHOOL _____ PHONE _____ CELL _____
	SSN _____ RACE W HEIGHT 502 HAIR BRO DOB _____ AGE 45 SEX F WEIGHT 145 EYES HAZ	MISSING <input type="checkbox"/> DEAD/UNIDENTIFIED <input type="checkbox"/> UNKNOWN <input type="checkbox"/> RETURNED <input type="checkbox"/> WANTED <input type="checkbox"/> SUSPECT <input type="checkbox"/> WARRANT <input type="checkbox"/> ARRESTED <input type="checkbox"/>

OFF. DATE/TIME _____ _____ ARR. AGENCY _____ _____ ORI **GA0640000**
 ARREST DATE _____ ARREST TIME _____ ARREST / AT NEAR OFFENDER TRACK NO. _____ GCIC CLASS. NO. _____

CHARGES

PERSONS	<input type="checkbox"/> COMPLAINANT <input type="checkbox"/> VICTIM <input type="checkbox"/> WITNESS <input type="checkbox"/> OFFENDER <input type="checkbox"/> PRIMARY AGGRESSOR <input type="checkbox"/> JUVENILE <input type="checkbox"/> RAPE VICTIM	
	NAME PARKER, JANET KAY ADDRESS 932 HWY 411 SE CITY RANGER ST GA ZIP 30734	TYPE _____ EMP. _____ SCHOOL _____ PHONE _____ CELL _____
	SSN _____ RACE W HEIGHT 506 HAIR RED DOB _____ AGE 54 SEX F WEIGHT 180 EYES GRN	MISSING <input type="checkbox"/> DEAD/UNIDENTIFIED <input type="checkbox"/> UNKNOWN <input type="checkbox"/> RETURNED <input type="checkbox"/> WANTED <input type="checkbox"/> SUSPECT <input type="checkbox"/> WARRANT <input type="checkbox"/> ARRESTED <input type="checkbox"/>

OFF. DATE/TIME _____ _____ ARR. AGENCY _____ _____ ORI **GA0640000**
 ARREST DATE _____ ARREST TIME _____ ARREST / AT NEAR OFFENDER TRACK NO. _____ GCIC CLASS. NO. _____

CHARGES

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GORDON COUNTY SHERIFF'S OFFICE INCIDENT REPORT

AGENCY ID
GA0640000

CASE NUMBER
12-05-0944

NARRATIVE

Narrative Type	Reporting Officer 1	Statement Date	Time
NARRATIVE	181 GLENN PRINE	05/20/2012	

On Sunday, May 20, 2012, at approximately 1218 hours, I Deputy G. L. PRINE with the Gordon County Sheriff's Office Uniform Patrol Division responded to 237 Flora Drive SW Calhoun, Gordon County, Georgia, in reference to an elder abuse report.

Upon arrival, I spoke with REBECKA JUNE WADE. She stated she wanted a report made in reference to her brother, DOUGLAS GLENN PARKER, mistreating their mother, EDNA SUE FIELDS. Ms. WADE stated Mr. PARKER and his wife, JANET KAY PARKER, have moved in with Ms. FIELDS. Ms. WADE stated Mr. PARKER is often verbally abusive to Ms. FIELDS and has heard him make threats to kill his mother (Ms. FIELDS), and then commit suicide. Ms. WADE stated Mr. PARKER has recently been taken off his doctor prescribed medication. Ms. WADE stated Mr. PARKER is highly dependant on his medication and believes Ms. WADE called his doctor and had him taken off of his medication. Ms. WADE stated Mr. PARKER told her, he had best not be around her, because he wanted to look in her eyes and ask her if she called his doctor about his medication and would most likely kill her. Ms. WADE stated she does not believe Mr. PARKER would kill her he is probably just talking out of his head because of his addiction. Ms. WADE stated her mother Ms. FIELDS called her this morning and asked her if she would pick her up, because Mr. PARKER was asleep and she was scared to be around him any longer. Ms. WADE stated she then picked Ms. FIELDS up and returned to her residence on Flora Drive.

I then spoke with Ms. FIELDS. She stated she and Ms. PARKER (daughter in law) had been arguing over finances. Ms. FIELDS stated she did tell Ms. PARKER and Mr. PARKER what she thought about them and told them she wanted them to move out of her residence. Ms. FIELDS stated during the argument Mr. PARKER became irate. Ms. FIELDS stated Mr. PARKER put one hand on the small of her back and one below her neck, and bent her backwards. Ms. FIELDS stated she has a rod in her back and was in severe pain as result of this incident. Ms. FIELDS stated she then waited until Mr. PARKER was sleeping so she could have Ms. WADE pick her up. Ms. FIELDS stated she just wanted me to tell her how to get Mr. PARKER out of her house so she can return home.

Ms. WADE then helped Ms. FIELDS record a written statement, that is enclosed with this report. I referred Ms. WADE and Ms. FIELDS to the Gordon County Domestic Violence Outreach.

A warrant for Battery FVA was taken for Mr. PARKER.

Closing Summary

Case Status	Status Details
Cleared by Arrest	

05-22-2012 VICTIM CONTACTED AND ADVISED OF DV OUTREACH OPTION. VICTIM NOTIFICATION VERIFIED WITH JAIL.-164-

COPY

GORDON COUNTY SHERIFF'S OFFICE INCIDENT REPORT

AGENCY ID
GA0640000



**FAMILY VIOLENCE
PUBLIC COPY
ORIGINAL REPORT**

CASE NUMBER
12-06-0053

Statute	INCIDENT TYPE	CNT	GOC UCR CODE	UCR DESCRIPTION
16-5-1	MURDER-/FEL/- FVA	2	7399	OTHER: OTHER THAN WHATS AVAILABLE

EVENT	LOCATION DESCRIPTION AND ADDRESS				ZONE		PREMISE TYPE									
	932 HWY 411 RANGER, GA 30734 -						<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>HIGHWAY</td> <td>SVC STATION</td> </tr> <tr> <td>CONVENIENCE STORE</td> <td>BANK</td> </tr> <tr> <td>COMMERCIAL</td> <td><input checked="" type="checkbox"/> RESIDENCE</td> </tr> <tr> <td>SCHOOL/CAMPUS</td> <td>ALL OTHERS</td> </tr> </table>		HIGHWAY	SVC STATION	CONVENIENCE STORE	BANK	COMMERCIAL	<input checked="" type="checkbox"/> RESIDENCE	SCHOOL/CAMPUS	ALL OTHERS
	HIGHWAY	SVC STATION														
CONVENIENCE STORE	BANK															
COMMERCIAL	<input checked="" type="checkbox"/> RESIDENCE															
SCHOOL/CAMPUS	ALL OTHERS															
INCIDENT DATE TIME DATE TIME STRANGER TO STRANGER 06/01/2012 0000 TO 06/01/2012 2320 YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> UNK <input type="checkbox"/>				DISCOVERED BY		WEAPON TYPE										
DAY OF THE WEEK (INCIDENT)				<input type="checkbox"/> Officer On Patrol <input type="checkbox"/> Reporting Party <input type="checkbox"/> Private Security		<input checked="" type="checkbox"/> GUN <input type="checkbox"/> KNIFE <input type="checkbox"/> HANDS/FISTS, ETC.										
<input type="checkbox"/> SUN <input type="checkbox"/> MON <input type="checkbox"/> TUE <input type="checkbox"/> WED <input checked="" type="checkbox"/> THU <input type="checkbox"/> FRI <input type="checkbox"/> SAT <input type="checkbox"/> UNK				<input type="checkbox"/> Alarm <input type="checkbox"/> Complainant		<input type="checkbox"/> OTHER <input type="checkbox"/> UNKNOWN										

PROPERTY TOTALS	01 - VEHICLES		02 - CURRENCY, NOTES, ETC.		03 - JEWELRY, PREC. METALS		04 - FURS		THEFT / RECV.		GOVT PROP.
	STOLEN								<input type="checkbox"/>	<input type="checkbox"/>	
	RECOVERED										
	05 - CLOTHING		06 - OFFICE EQUIP.		07 - TV, RADIO, ETC.		08 - HOUSEHOLD GOODS				
STOLEN											
RECOVERED											
	09 - FIREARMS		10 - CONSUMABLE GOODS		11 - LIVESTOCK		12 - OTHER		TOTALS	THEFT DATE	
STOLEN											
RECOVERED											
										RECOVERY DATE	

DRUG	DID INVESTIGATION INDICATE THAT THIS INCIDENT WAS DRUG-RELATED? <input type="checkbox"/> YES <input type="checkbox"/> NO					DID INVESTIGATION INDICATE THAT INCIDENT WAS GANG RELATED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				
	DRUG 1	DRUG 2	DRUG 3	DRUG 4	DRUG 5					
	DRUG 6	DRUG 7	DRUG 8	DRUG 9	DRUG 10					

STATE	OCA <input type="checkbox"/> ENTRY <input type="checkbox"/> CANCEL <input type="checkbox"/> CLEARANCE <input type="checkbox"/>				CASE STATUS					
	PERSON <input type="checkbox"/> WARRANT <input type="checkbox"/> VEHICLE <input type="checkbox"/> ARTICLE <input type="checkbox"/> BOAT <input type="checkbox"/> GUN <input type="checkbox"/>	ACTIVE <input checked="" type="checkbox"/>	1	CLEARED BY ARREST <input type="checkbox"/>	2	EX CLEARED <input type="checkbox"/>	3	UNFOUNDED <input type="checkbox"/>	4	INACTIVE <input type="checkbox"/>

ADMINISTRATION	ARREST AT OR NEAR OFFENSE SCENE		TOTAL NUMBER ARRESTED		DATE OF REPORT		ADULT		JUVENILE		
	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	0		06/02/2012		<input checked="" type="checkbox"/>		<input type="checkbox"/>		
	EVIDENCE COLLECTED?	<input type="checkbox"/> N	COMPLAINT UNFOUNDED?	<input type="checkbox"/> N	FOLLOW UP - PATROL?	<input type="checkbox"/> Y	CLEARANCE DATE				
	PRINTS TAKEN?	<input type="checkbox"/>	WILLING TO PROSECUTE?	<input type="checkbox"/> Y	FOLLOW UP - DETECTIVES	<input type="checkbox"/> Y	CASE STATUS	ACTIVE			
	BIO./DNA EVIDENCE?	<input type="checkbox"/>	REPORTING OFFICER		151	SEAN HENERY	REVIEWED BY	28	JACK JR JENKINS		
	APPROVING OFFICER	145	APPROVED DATE		06/02/2012	KEVIN RICKETT	REVIEWED DATE	06/04/2012	DIVISION ASSIGNED		
						ASSIGNED DATE		INVESTIGATOR ASSIGNED			
								902	JAMEY KIRBY		
									ASSIGNED DATE		
									06/04/2012		

WERE CHILDREN INVOLVED?	<input type="checkbox"/> NO	WAS ACT COMMITTED WITH CHILDREN PRESENT?	<input type="checkbox"/> NO
PRIOR COURT ORDERS	<input type="checkbox"/> YES	VICTIM ADVISED	<input type="checkbox"/> YES
NUMBER OF PREVIOUS COMPLAINTS AS ADVISED BY VICTIM		1-5	

DOMESTIC QUESTIONS	TYPE AND EXTENT OF ALLEGED ABUSE											
	FATAL INJURY	<input checked="" type="checkbox"/>	PERMANENT DISABILITY	<input type="checkbox"/>	TEMP. DISABILITY	<input type="checkbox"/>	BROKEN BONES	<input type="checkbox"/>				
	GUN / KNIFE WOUNDS	<input type="checkbox"/>	SUPERFICIAL INJURY	<input type="checkbox"/>	PROP. DAMAGE / THEFT	<input type="checkbox"/>	THREATS	<input type="checkbox"/>				
	ABUSIVE LANGUAGE	<input type="checkbox"/>	SEXUAL	<input type="checkbox"/>	OTHER ABUSE	<input type="checkbox"/>						
	POLICE ACTION TAKEN											
	ARREST	<input type="checkbox"/>	SEPARATION	<input type="checkbox"/>	OTHER ACTION	<input checked="" type="checkbox"/>						
	CITATION	<input type="checkbox"/>	MEDIATION	<input type="checkbox"/>	NO ACTION	<input type="checkbox"/>						
	IF NO ARREST MADE, WHY NOT											
	JUVENILE	<input type="checkbox"/>	AGGRESSOR MISSING	<input checked="" type="checkbox"/>	INSUFFICIENT PROBABLE CAUS	<input type="checkbox"/>	OTHER REASON	<input type="checkbox"/>				
	HOW WAS PRIMARY AGGRESSOR IDENTIFIED											
PHYSICAL EVIDENCE	<input checked="" type="checkbox"/>	TESTIMONIAL EVIDENCE	<input checked="" type="checkbox"/>	OTHER MEANS	<input checked="" type="checkbox"/>							
SUBSTANCE ABUSE												
DID INVESTIGATION INDICATE THAT A SUBSTANCE WAS INVOLVED?						YES						
						AGGRESSOR			VICTIM			
						DRUGS <input checked="" type="checkbox"/>			ALCOHOL <input type="checkbox"/>			
						DRUGS <input type="checkbox"/>			ALCOHOL <input type="checkbox"/>			
RELATIONSHIP OF PRIMARY AGGRESSOR TO VICTIM(S)												
PRESENT SPOUSE	<input type="checkbox"/>	FOSTER PARENT	<input type="checkbox"/>	STEPPARENT	<input type="checkbox"/>	PARENT	<input type="checkbox"/>	NONE OF ABOVE, LIVES IN SAME HOUSE				
CHILD	<input checked="" type="checkbox"/>	FORMER SPOUSE	<input type="checkbox"/>	FOSTER CHILD	<input type="checkbox"/>	STEPCHILD	<input type="checkbox"/>					

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GORDON COUNTY SHERIFF'S OFFICE INCIDENT REPORT

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GA0640000

CASE NUMBER
12-06-0053

COMPLAINANT VICTIM WITNESS OFFENDER PRIMARY AGGRESSOR JUVENILE RAPE VICTIM

NAME: ****INFO. WITHHELD***
ADDRESS: ****INFO. WITHHELD***
CITY: ****INFO. WITHHELD*** ST: ZIP:
SSN: RACE: HEIGHT: HAIR: PHONE:
DOB: AGE: SEX: WEIGHT: EYES: CELL:
MISSING DEAD/UNIDENTIFIED UNKNOWN RETURNED WANTED SUSPECT WARRANT ARRESTED

OFF. DATE/TIME: ARR. AGENCY: ORI: **GA0640000**
ARREST DATE: ARREST TIME: ARREST / AT NEAR: OFFENDER TRACK NO.: GCIC CLASS. NO.:

CHARGES

COMPLAINANT VICTIM WITNESS OFFENDER PRIMARY AGGRESSOR JUVENILE RAPE VICTIM

NAME: ****INFO. WITHHELD***
ADDRESS: ****INFO. WITHHELD***
CITY: ****INFO. WITHHELD*** ST: ZIP:
SSN: RACE: HEIGHT: HAIR: PHONE:
DOB: AGE: SEX: WEIGHT: EYES: CELL:
MISSING DEAD/UNIDENTIFIED UNKNOWN RETURNED WANTED SUSPECT WARRANT ARRESTED

OFF. DATE/TIME: ARR. AGENCY: ORI: **GA0640000**
ARREST DATE: ARREST TIME: ARREST / AT NEAR: OFFENDER TRACK NO.: GCIC CLASS. NO.:

CHARGES

COMPLAINANT VICTIM WITNESS OFFENDER PRIMARY AGGRESSOR JUVENILE RAPE VICTIM

NAME: **FIELDS, EDNA SUE**
ADDRESS: **932 HWY 411**
CITY: **RANGER** ST: **GA** ZIP: **30734**
SSN: RACE: **W** HEIGHT: **506** HAIR: **GRY** PHONE:
DOB: AGE: **71** SEX: **F** WEIGHT: **205** EYES: CELL:
MISSING DEAD/UNIDENTIFIED UNKNOWN RETURNED WANTED SUSPECT WARRANT ARRESTED

OFF. DATE/TIME: ARR. AGENCY: ORI: **GA0640000**
ARREST DATE: ARREST TIME: ARREST / AT NEAR: OFFENDER TRACK NO.: GCIC CLASS. NO.:

CHARGES

COMPLAINANT VICTIM WITNESS OFFENDER PRIMARY AGGRESSOR JUVENILE RAPE VICTIM

NAME: **WADE, REBECCA JEAN**
ADDRESS: **237 FLORA DRIVE**
CITY: **CALHOUN** ST: **GA** ZIP: **30701**
SSN: RACE: **W** HEIGHT: **506** HAIR: **BRO** PHONE:
DOB: AGE: **45** SEX: **F** WEIGHT: **130** EYES: **HAZ** CELL:
MISSING DEAD/UNIDENTIFIED UNKNOWN RETURNED WANTED SUSPECT WARRANT ARRESTED

OFF. DATE/TIME: ARR. AGENCY: ORI: **GA0640000**
ARREST DATE: ARREST TIME: ARREST / AT NEAR: OFFENDER TRACK NO.: GCIC CLASS. NO.:

CHARGES

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GORDON COUNTY SHERIFF'S OFFICE INCIDENT REPORT

AGENCY ID
GA0640000CASE NUMBER
12-06-0053

NARRATIVE

Narrative Type	Reporting Officer 1	Statement Date	Time
NARRATIVE	151 SEAN HENERY	06/02/2012	

On Friday, 1st June, 2012 at approximately 2359 hours, Deputy S. M. HENERY, Sergeant K. R. RICKETT, and Deputy T. R. JONES responded to 932 Highway 411, Ranger, Gordon County, Georgia, in reference to a report of a subject at that location with gunshot wounds

Upon arrival, Deputy HENERY, Sergeant RICKETT, and Deputy JONES met with the complaints, Mr. CHARLES WADE and his step-son, Mr. JUSTIN MIDDLEBROOKS, at the end of the driveway. Mr. WADE and Mr. MIDDLEBROOKS advised that when they opened the door to the residence they observed Mr. MIDDLEBROOKS grandmother, Mrs. EDNA FIELDS, lying on the floor with what appeared to be gun shot wounds. Mr. WADE advised they then turned around and went to the end of the driveway and called for law enforcement, because they was unsure if anyone else was in the residence. Deputy HENERY, Sergeant RICKETT, and Deputy JONES then entered the residence and cleared the residence. While clearing the residence, Deputy JONES observed another female with what appeared to be gun shot wounds in a bedroom, lying on the top of a bed.

After clearing the residence, Deputy JONES and Deputy J. C. DAVIS taped off the perimeter of the crime scene with crime scene tape and a crime scene log was started by Deputy JONES. Deputy HENERY met with Mr. WADE, who advised that his wife, Mrs. REBECCA WADE, had dropped him off at work earlier this date, and she advised him that she was going to be at her mother's residence, Mrs. FIELDS, because she had to take Mrs. FIELDS to the doctor. At approximately 1815 hours Mr. WADE attempted to contact Mrs. WADE via telephone at Mrs. FIELDS' residence, but was unable to make contact with anyone. Mr. WADE advised that he had waited a while and attempted to contact Mrs. WADE several more times, but was unsuccessful. Mr. WADE advised he began to worry so he called 911 Centers, Sheriff's Departments, and local Hospitals to ask if there had possibly been any accidents involving his wife and mother-in-law. Mr. WADE then contacted Mr. MIDDLEBROOKS and asked if he could come get him from work and help him try to make contact with Mrs. WADE.

Mr. MIDDLEBROOKS picked Mr. WADE up from his place of employment at approximately 2300 hours, and traveled to Mrs. FIELDS residence. When they arrived Mr. WADE observed his truck in the driveway. The two went to the front door of the residence and began knocking, but could not make contact with anyone. Mr. WADE then went to his truck and got out a screwdriver to pry the front door open. When Mr. WADE and Mr. MIDDLEBROOKS got the door open they observed Mrs. FIELDS on the floor with gunshot wounds.

Mr. WADE advised that a few weeks prior Mrs. WADE's brother, Mr. DOUGLAS PARKER, had been arrested for Family Violence and had been making threats to Mrs. WADE and Mrs. FIELDS.

Deputy JONES turned over the crime scene log to Deputy HENERY. Deputy HENERY obtained written statements from Mr. MIDDLEBROOKS and Mr. WADE. The scene was turned over to Gordon County Sheriff's Office Major Crimes Unit at approximately 0210 hours.

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