## **VOLUSIA COUNTY SHERIFF'S OFFICE**

	Juvenile Hate Crime								INCIE	ENT	RE	REPORT Page 1 of 4 Page											
	Gang		Elderly Abus									Agency Report Number											
	Domesti	ce \	/OR	—   A	gency ORI	Number	140018980   Der   Zone #   Telephone Handled									1. Yes							
	Endang	ered / Ot	ther _				.0640000						35	Telephone Handled 1. Yes Call? (T.H.C.) 2. No 2									
	Reported: D	Day	Date	Time (ı	mil.) Time	Dispatched	d (mil.)	Time	Arrived (mi	l.)   <sup>1</sup>	Time Co	mpleted (mil.)	Nature of	of Call (Report Type)									
	Saturday		07-12-2	2014 1749	1749	)		1809					37A	Attempted Suicide									
	Incident Typ 1. Felony	e:	Misder     Traffic		Ordinance Other	Incident: D From	ay D	ate	Tir I	me (mil.)		TO	Date	· · · · · · · · · · · · · · · · · · ·									
_	2. Traffic Fel			emeanor		Saturo	day 07	7-12-20°				Saturday	07-1	2-2014	1749	N - I	Night		N				
DAT,	Offens #1	se   19	'	tute Violation Nu	imber				Description		Person	/All other non-	crimes		A - Attempted C - Committed								
	""	Ť		tute Violation Nu	ımber				Death/Missing Person/All other non-crimes     C - Committed       Description     A - Attempted														
ËN	#2 Incident Loc	otion (St	Number\					C - Committed															
	1300 RED										,	ONA BEACH				Zip 32124							
"	Business Na				# Prem. E	Entered	Drug Rela	g Related Alcohol Related Forced Entry Arson-Inhabited								T A	Arson-Atter						
	VOLUSIA	COUN	ITY BRA	ANCH JAIL			0. N/A 1. 2.	Yes No 0	0. N//	<ol> <li>1. Yes</li> <li>2. No</li> </ol>	0	1. Yes 3. Atte 2. No	empted	Occupie     Unoccup		Abandoned		1. Yes 2. No					
	Location Typ		cation Typ.		Convenience Sto	ore 09.5	upermarket	,	13 Bank	/Financial	Inet	17.Gov't/Pu	ıblic Blda 2	1.Airport		25.Parking Lot/	Garage	20 M	otor Vehicle				
		.Apartmer	nt/Condo 06.	Gas Station	10.D	ept/Discou	nt Store	14.Com	mercial/O		lg. 18.School/l	University 2	2.Bus/Rail Te		26.Highway/Ro	adway	30.O	ther Mobile					
	19		3.Resideno 4.Hotel/Mo		Liquor Sales Bar/Nightclub		pecialty Sto rug Store/F		15.Indus 16.Stora	strial/Mfg. age		19.Jail/Pris 20.Religiou		3.Construction 4.Other Struction		27.Park/Woodla 28.Lake/Watery		ld 88.Ui 99.O	nknown ther				
	V/W Code			Victim/Subject	t Type 4. Business	- 1	ress/Phone					Race		Sex		ence Type		esidence S	tatus				
,,	V-Victim W-Witness	N-Ne O-Otl	xt of Kin her	1. Juvenile	<ol><li>Governmer</li></ol>	nt B.B C.C	usiness/Wo ell		Message Next of Kin	P. Pa S. So		W-White O-O B-Black U-Ur	riental/Asian nknown	M-Male F-Female	0. NA 1. City	<ol> <li>Florida</li> <li>Out-of-St</li> </ol>	ate 1	1. Full Year					
ES	R-Reporting	g Person		2. L.E. Office 3. Adult	9. Other	Н. Н	lome	Ο.	Other	V. Va	acation	I-American India	I	U-Unknown	2. Cou	nty		Par. Year     Non-Resident					
ODE	Means of Att	tack	O Oth	er Dangerous	Extent of 00.N/A		3.Laceration		06 Da	oss. Intern	ol Injur	y 09.Abrasion	o/Pruisso	Domestic \	/iolence	Victim R S-Spouse							
0		itting Ins		ds, Fists, Feet,	Etc. 01.Guns	shot 04	1.Unconscio	ous	07.Lc	ss of Tee		10.No Visibl	le Injury	1. Yes 2. No		P-Parent	O-C	3. Non-Resident Inship to Offender I-Sibling Z-Othe D-Other Family I-Co-Habitant					
	Offense Inc	dicator	Ι\	//W Code	# V. Type		5.Poss.Brok f Call (for V					99.Other Se			First)	C-Child	H-C	o-Habitant	(Middle)				
ြ ဟ	1. #1 3	B. Both	1 <sub>1</sub>   F	1	2	l rataro o	· can (ror v	, a		о.аотку		INVESTIGAT	,	,					(maaio)				
ES	2. #2 Address (Str	reet, Apt.		<u> </u>	4						City		State	Zip		Resid	ence Ph	ione					
ΙE				SUITE 183			0			State	DELA		FL	327		(386) Business/School	547-6						
∣₹	Business/Sc	chool/Oth	ner Addres	s (Street, Apt. N	lumber)		City		S		Zip		Address T		- 1	Phone Type B							
≧	Other Conta	act Info (T	Γime Avail	able, Interpreter	, etc.)				Syno	psis of Inv	olveme	((333) - 13 3 123							Ь				
VICTIM/WITNE	FAX (386)			1-	1			1=				AFFAIRS INVI				I =		1					
^	If Victim Type 1, 2, or 3	e	Race <i>N</i>	Sex M	Date of Birth		Age	Ethnicit N	У	Res. Ty	pe	Res. Status M	eans of Attack	Extent of	Injury	Domestic Viol	ence	Relations	ihip				
	Offense Indi	icator		•	# V. Type	Nature of	f Call (for V		ferent from			Name (Last/Bus	iness)	(	First)				(Middle)				
SS	1. #1 3 2. #2	3. Both	1 V	V 1	2							OFFICER J Y	OUNK 1229	9									
빌	Address (Str										City		State	Zip			ence Ph						
VICTIM/WITN	1300 RED JOHN DRIVE Business/School/Other Address (Street, Apt. Number)							City State					TONA BEACH FL Zip			32124 (386) 254 ress Type   Business/School/Othe			Phone Type				
I≧	Other Contact Info (Time Available, Interpreter, etc.)  Synopsis of Involvement																						
ΙĒ	Other Conta	ect Info (T	Time Avail	able, Interpreter	, etc.)				1 '			ent ISCOVERED 1	\/1										
=	If Victim Type	e F	Race	Sex	Date of Birth		Age	Ethnicit		Res. Ty			eans of Attack	Extent of	Injury	Domestic Viol	ence	Relations	hip				
	1, 2, or 3	V	N I.	M	" IV T	LNistant		N	· · · · · · · · · · · · · · · · · · ·	2		1							(A.P. I. II.)				
၂ က		B. Both		1	# V. Type	ivalure or	f Call (for V	icum, ii aii	nerent nom	i iriciderit)		Name (Last/Bus	,	,	First)				(Middle)				
ES	2. #2 Address (Str	1 V . Number)					City	OFFICER K I	State	Zip		Resid	ence Ph	ione									
<u>Z</u>	1300 RED JOHN DRIVE										DAYT	ONA BEACH F	FL .	3212			254-1						
Į₹	Business/Sc	chool/Oth	ner Addres	s (Street, Apt. N	lumber)		City		S	State		Zip		Address T	/pe   E	hone	Phone Type						
VICTIM/WITNE	Other Conta	act Info (T	Γime Avail	able, Interpreter	, etc.)				Syno	psis of Inv	olveme	ent		1									
<u> </u>														Y FROM CELL									
>	If Victim Type 1, 2, or 3	e	Race <i>N</i>	Sex	Date of Birth		Age	Ethnicit N	у	Res. Ty	ре	Res. Status M	eans of Attack	Extent of	Injury	Domestic Viol	ence	Relations	hip				
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SS	1. #1 3. Both 2. #2 1 W 3 2									SERGEANT STORMER 969													
											City		State	Zip			ence Ph						
	Address (Str										$\neg \land \lor \top$	ONA BEACH F	=1	32124 (386) 254-15 Address Type Business/School/Other Ph				540	Phone Type				
⊨	Address (Str 1300 RED	JOHN	N DRIVE		lumber\		City				DATI												
TIW/I	Address (Str 1300 RED	JOHN	N DRIVE	s (Street, Apt. N	lumber)		City		S	State	<u>DATI</u>	Zip		Address T									
TIM/MIT	Address (Str 1300 RED Business/Sc	D JOHN chool/Oth	N DRIVE				City		Syno	State psis of Inv	volveme	Zip		Address T	/pe E	Business/School			Thore Type				
VICTIM/WIT	Address (Str 1300 RED Business/Scr Other Conta	D JOHN chool/Oth act Info (T	N DRIVE	s (Street, Apt. N	, etc.)			Ethnicit	Syno	state psis of Inv	olveme	Zip ent OUND THE LE	ETTER INSI	Address Ty	POPER	Business/School	Other P	Phone					
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INCIDENT REPORT (CONT.)  Page 2 of 4 Pages																							
	Offe	nse Indicator 1 3. Both	Subject Code S-Suspect V-Victim				Code # Subj. Type Name (Last)						(First)				(Middle			Sex	Ethi	nicity	
	2. #2		D-Defenda Age		ssing Per Height		o Height	-	Weight	To V	Veight	Eye Cold	or		Hair Color	r		Maio	den Name				
	Nic	kname / Street Name				Place of	f Birth	- City	,	County		State	l Er	nployer/Other/	/School				Occupati	on			
				1				- 7								A 11		l Bi				I	
	Las	st Known Address (Stree	et, Apt. Num	nber)				C	ity		5	tate	Zip	o 		Addres	s rype	Phone	9			Phone Type	
	Oth	ner Address (Street, Apt	Number)					С	ity		S	tate	Zip	0		Addres	s Type	Phone	Э			Phone Type	
NO NO	Dri	ver's License State/Nun	nber				Social	Securi	ity Number	r			Other	r ID Number							D Type		
SECTION	Clo	thing (Describe)			,		,		,		Scars	/Marks/Tatt	oos (Ty <sub>l</sub>	pe/Describe)			Scars/I	Marks/T	attoos (Typ	e/Descri	be)		
	Hai	r Length /Style	/	Skin	/ B	Build	/ F	acial F	eatures				Speed	h/Voice [	Deformity						Glasses		
NSS		/ / Demeano	r Masi	k	Weapon	Туре			/		/			/			ubject Wa		/ Warrant From: 1. Yes   1. This Agency   2. No   2. Other Agency				
MS	If S	Subject: / Date of Last Contact		ate of Emano	cipation	/ Cau	ution	С	/ aution Rea	ason	/		/		If Arrest Personal I		Custody Orugs / Alc	2.	. Ýes . No	2. (	nis Ager Other Age	ency	
SUBJECT / MISSING		May Be With:		Physic	cal Condit	tion:			Тм	ental Con	dition:			Doctor	Name <sup>.</sup>				Dentist Na	ime.			
BJE	ð	1 -		1 Hyor	oai oonan					1	union.								Donation No.				
S	SSING	Incident Type 1. Runaway 2. Parents		Disaster     Victim			Foul Play Suspecte			Mis	ssing Be	fore?		Fingerprints Available?		P	hoto Avail	lable?		Dental Availab			
	Σ			7. Voluntary Adult	′		1. Yes 2. No		1	1. \ 2. I	Yes No			1. Yes 2. No	1		. Yes . No		ı	1. Yes 2. No		1	
	<u></u>	5. Endangered		8. Unknown	1		B. Unkno	own			Jnknowi	า		2.140			. 140			2.110			
		I, (Printed) (Signature) certify that I have reported the above person as a missing person; and this agency has my permission to enter this person in a statewide alert.															issing						
		nse Indicator	Subject Co	ode			ode		Subj. Type	Name	(Last)			(First)			(Midd	dle)	Race	Sex	Eth	nicity	
	1. #2 2. #2 Dat		S-Suspect D-Defenda Age		im ssing Per Height		o Height		Weight	To V	Veight	Eye Cold	or		Hair Color	,		Maio	den Name				
			, igo	107.90	l													····					
		kname / Street Name				Place of	f Birth			County		State		nployer/Other	School				Occupati	on			
	Las	st Known Address (Stree	et, Apt. Num	nber)				С	ity		S	tate	Zip	0		Addres	s Type	Phone	Э			Phone Type	
	Other Address (Street, Apt. Number)								ity		S	tate	Ziţ	)		Addres	s Type	Phone	Э			Phone Type	
NO NO	Driver's License State/Number						Social	Security Number Other ID Number									1	D Type	l .				
SECTION	Clo	thing (Describe)			,		,			Scars/Marks/Tattoos (Type/Describe) Sc						Scars/I	Marks/T	attoos (Typ	e/Descri	be)			
	Haiı	r Length /Style	/	Skin	/ B	/ Build	/ F	acial F	eatures				Speed	h/Voice [	Deformity		<u> </u>				Glasses		
AISSING		/ / Demeano	r Mas	k	Weapon	туре			/		/			/	If A		ubject Wa			l	arrant Fr	om:	
M	IT S	Subject: / Date of Last Contact	D	ate of Emano	cipation	/ Cau	ution	, C	/ aution Rea	ason	/		/		If Arrest Personal I		Custody Orugs / Alc	2.	. Yes . No	2. (	Other Age	ency	
CT.		May Be With: Physical Condition:							Тм	ental Con	Il Condition:			Doctor Name:					Dentist Na	ıme:			
SUBJECT	9						Foul Pla				Missing Before? Finge				gerprints Photo Av			labla0			DI		
s	MISSING	1. Runaway 2. Parents		6. Disaster Victim			Suspect			IVIIS	ssing be	iore?		Fingerprints Available?			noto Avaii	lable?		Dental Availab			
	M	3. Involuntary 4. Disabled		7. Voluntary Adult	′		1. Yes 2. No		1	1. Y 2. I	Yes No			1. Yes 2. No	1		. Yes . No		1	1. Yes 2. No		1	
	_	5. Endangered 8. Unknown 8. Unknown 8. Unknown																					
		person; and this ag	ency has	mv permissi	ion to en	nter this pe	(Printe	/	atewide a	ılert.				(	(Signature	e) certif	y that I h	ave re	ported the	above p	erson a	s a missing	
	1	On 07/12/201									usia C	ounty E	rancl	h Jail loca	ated at	1300	Red Jo	hn D	rive, Da	ytona	Beac	h in	
	2	reference to a	a possib	le suicide	e atten	npt. Up	on ar	rival	, Depu	ty Gray	y mad	le conta	ct wit	h D. Vani	s (R1)	who w	orks a	s an	internal	affair	s inve	stigator	
	3	for the jail. Inv	estigate/	or Vanis	advise	ed on 07	7/11/2	2014	at app	oroxima	ately 2	2026 ho	urs, I	nmate Ch	nad Spe	ears (\	/1) wa	s fou	nd layin	g on t	he floo	or in his	
NARRATIVE	4	cell (D block							,							•		_				•	
ARF	5	were faint gru				or medi	ical a	ssist	tance v	vas cal	lled. C	Officer Y	ounk	advised	Spears	was s	subseq	uentl	y escor	ted by	whee	I chair to	
Z		medical for fu	rther ob	servation	ns.																		
	7																						
 Щ		al Case Final Status: Status	Case codes:	1.Arrest/Adu	ult 2	.Arrest/Juv	r. 3.E	Except	ional/Adul	t 4.Ex	ceptiona	al/Juv. 5	Closed	6.Unfound	ed		Victim Ad	vocate	Т	riad	S	A Referral	
ADMINISTRATIVE	Ŕ	DCF Hotline CAC Spoke	e With:					D	ate:		ime:	TF	≓	/ NCIC Entry		T.T. E	BOLO		Date	:	By	:	
STR	Cor	nnecting Report Numbe		ncy			ditional F Attache		Narra	ative	SA 70	)7 Pe		Property		./Tow Sh	eet	Other	Describe:				
N N	Offi	icer Reporting - Printed							porting - S				•		ID. Nu			Unit			Date		
AD		ay, Donald icer Reviewing - Printed	(If Applied	رمار)			Į.	) Par Pr	viewing -	75	Uf Appli	caple)			7828 ID. Nur	mher		1B33 Unit			07-12-2	2014	
	"	icer neviewing - Printed	(11 Applicati	(טות			Onio	oi Kê	viewing - S	orgi iature`	(1-MODIII	Javie)			L ID. NUI	IIDEI		Unit			Dale		

## **VOLUSIA COUNTY SHERIFF'S OFFICE**

The case   Paper   Trials   Col. 2014   1748   1748   Col. 2014   1748   Col. 2014   1748   Col. 2014   1748   1748   Col. 2014   1748   Col. 2014   1748   Col. 2014   1748   1748   Col. 2014   1748   Col. 2014   1748   Col. 2014   1748   1748   Col. 2014   1748   Col. 2014   1748   Col. 2014   1748   1748   Col. 2014   1748   Col. 2014   1748   Col. 2014   1748   1748   Col. 2014   1748   Col. 2014   1748   Col. 2014   1748   1748   Col. 2014   1748   Col. 2014   1748   Col. 2014   1748   1748   Col. 2014   1748   Col. 2014   1748   Col. 2014   1748   1748   Col. 2014   1748   Col. 2014   1748   Col. 2014   1748   1748   Col. 2014   1748   Col. 2014   1748   Col. 2014   1748   1748   Col. 2014   1748   Col. 2014   1748   Col. 2014   1748   1							NARF	RATIVE / S	UPPLEMENT	•		1	Page3	of4Pages
Replaced Vanie anxiesd while being monitored by the jair's Registered Nurse; C. Moore (W4), Spears medical concilion declined. Investigator  Vanie indicated due to Spears medical issue, Spears was transported by EVAC to Halifax Medical Corter at approximately 036 pages  replaced to the Control of the Cont	N N			•			,	ent)						
a Vanis indicated due to Spears medical issue. Spears was transported by EVAC to Hallfax Medical Center al approximately Q00 hours for further evaluation. Investigator Vanis said at approximately MSO hours. Officer K. Kisner eff128 (VI2) entered Spears cell and removed a plastic bag containing property belonging to Spears Officer K. Kisner placed the property bag in the clinic for safekeeping.  At approximately 1610 hours, Sergeant Stormer 969 (W3) inventoried Spears' property bag. During this time, Sgt. Stormer located a folded note in the bag that Spears words. The note laiked about the pain he is in and the pain he has caused, it also talked about not warning to hut anymore. Additionally, Spears says goodbyse to friends and family. Sgt. Stormer further advised the letter did not specifically mention suicide or how he would die. Sgt. Stormer stated Spears ended the letter by by saying I love you and goodbys. Sgt. Stormer stated after discovering the letter, he secured Spears' property in the Shift Commander's office.  During the investigation, Investigation Vanis advised Spears' medical condition is still decilining. Deputy Gray provided Sergeant T. Savercoal with his preliminary investigation.  During the investigation.  During the investigation.  Spears' property in the Shift Commander's office.  During the investigation of the scene and took over the investigation.  Spears' property of the Vote of Advisor of the Spears' medical condition is still decilining. Deputy Gray provided Sergeant T. Savercoal with his preliminary investigation.  Spears' property of the Spears' property in the Shift Commander's Office of the Spears' property of the Spears' proper								Registered Nur		), Spea	rs medical	conditio	n decline	· · · · · ·
and availuation, Investigator Vanies said at approximately 0590 hours, Officer K. Kisner #128 (W2) antered Spears coll and removed a plastic bag containing property belonging to Spears. Officer K. Kisner placed the property bag in the clinic for safekeeping.  Approximately 1610 hours, Sergeant Stormer 989 (W3) inventoried Spears' property bag. During this time, Sgt. Stormer located a folded note in the bag that Spears wrote. The note talked about the pain he is in and the pain he has caused. It also talked about not wanting to hurt anymore.  Additionally, Spears says goodbye to friends and family. Sgt. Stormer further advised the letter did not specifically mention suicide or how he secured Sgears increased in the Sgt. Stormer stated after discovering the letter, he secured Spears increased in the Sg. Sg. Stormer stated after discovering the letter, he secured Spears increased in the spear			Vanis ind	dicated due to Spe	ars medical iss	sue, Sp	pears was tran	sported by EV	AC to Halifax Med	ical Cer	nter at app	roximate	ely 0200 h	ours for further
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13 A approximately 1610 hours, Sergeant Stormer 969 (W3) inventoried Spears' property bag. During this time, Sqt. Stormer located a folded note in the bag that Spears wrote. The note talked about the pain he is in and the pain he has caused. It also talked about not wanning to hurt anymore.  Additionally, Spears says goodbye to friends and family. Sqt. Stormer further advised the letter did not specifically mention suicide or how he would die. Sqt. Stormer stated Spears anded the letter by by saying I love you and goodbye. Sqt. Stormer stated after discovering the letter, he secured Spears' property in the Shift Commander's office.  18														
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Secured Spears' property in the Shift Commander's office.    18			would die	e. Sgt. Stormer sta	ited Spears en	ded th	e letter by by s	saying I love yo	ou and goodbye. S	gt. Stor	mer stated	after di	scovering	the letter, he
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