

DAYTONA BEACH POLICE DEPARTMENT

NARRATIVE / SUPPLEMENT

| EVNT | Report Date | Report Time | Orig. Reported Date | Nature of Call (for Incident) | Agency Report Number | 1.Original 2.Supplement |
|------|-------------|-------------|---------------------|-------------------------------|----------------------|----------------------------|
| | 02-27-2015 | 2050 | 02-27-2015 | 33 | 150003648 | 2 |

1 On the above date and time, I responded to this incident as a support unit in the vehicle pursuit. I attempted to get to a location so to deploy my
 2 department issued stop sticks on the suspect vehicle. I was never able to do so. Once the suspect vehicle crashed in the 700 Blk of South Street, I
 3 responded to that area to assist with setting up a perimeter. While in the area of Bellevue Ave and School Street, Central advised that a resident
 4 on Lee Street located a firearm in an alleyway between Lee Street and Edwards Street. I then responded to that location to retrieve the firearm
 5 due to the fact that a firearm was used in the aggravated assault and the pursuit had taken this exact road just minutes before. It turned out that
 6 the gun was reported stolen (see case number 150002262 for theft and recovery information). The firearm was photographed and collected for
 7 evidentiary purposes. I turned the firearm which had one magazine and 6 live rounds over to Crime Scene officer Lampe at 129 Valor Blvd.
 8 Reference to suspect vehicle, I completed the stolen vehicle recovery report which is under DBPD case number 20150003655. I also completed
 9 the stolen firearm recovery supplement. I then had no further action in this incident.
 10
 11 It should be noted that my AXON body camera (2098) was on for the entire incident.

NARRATIVE / CONTINUATION

| | | | | | | |
|---|--|---|---|------------------------------------|--------------------------------------|--|
| ADMINISTRATIVE | Final Case Status: | Final Case Status Codes: 1.Arrest/Adult 2.Arrest/Juv. 3.Exceptional/Adult 4.Exceptional/Juv. 5.Closed 6.Unfounded | <input type="checkbox"/> Victim Advocate | <input type="checkbox"/> Triad | <input type="checkbox"/> SA Referral | |
| | <input type="checkbox"/> DCF Hotline <input type="checkbox"/> CAC | Date: _____ Time: _____ | <input type="checkbox"/> FCIC / NCIC Entry <input type="checkbox"/> FCIC / NCIC Cancel | <input type="checkbox"/> T.T. BOLO | Date: _____ By: _____ | |
| | Connecting Report Number _____ Agency _____ | Additional Forms Attached: <input type="checkbox"/> Narrative <input type="checkbox"/> SA 707 <input type="checkbox"/> Persons <input type="checkbox"/> Property <input type="checkbox"/> Veh./Tow Sheet <input type="checkbox"/> Other Describe: _____ | | | | |
| | Officer Reporting - Printed Beres, Michael | Officer Reporting - Signature | ID. Number D44433 | Unit | Date 02-27-2015 | |
| Officer Reviewing - Printed (If Applicable) | Officer Reviewing - Signature (If Applicable) | ID. Number | Unit | Date | | |

DAYTONA BEACH POLICE DEPARTMENT

PROPERTY REPORT

| | | | | | | | | | | | | |
|------------------|---|--|--|---|---|--|---|---|--|---|---------------------------------------|--|
| EVTN | Report Date 02-27-2015 | Report Time 2050 | Original Incident Date 02-27-2015 | Nature of Call (for Incident) 33 | Agency Report Number 150003648 | 1.Original 2.Supplement 2 | | | | | | |
| THEFT | Type Theft 00. N/A | Type Theft Codes 01. Burglary 02. Robbery 03. Shoplifting 04. Pocket Picking 05. Purse Snatching 06. Embezzlement 07. From Coin Oper.Machine 08. From Public Access Bldg. 09. From Vehicle 10. Extortion 11. By Computer 12. Fraud 13. Bicycle 14. Motor Vehicle Parts 99.Other | | | | | | | | | | |
| CODES | Person Code V-Victim S-Suspect D-Defendant W-Witness | N-Next of Kin O-Other R-Reporting Party | Person Involvement Code 1. Finder 2. Owner 3. Suspect 4. Other | Status Code: 1. Evidence 2. Damaged Prop. 3. Arson/Burned 4.Photo & Release | | | 5.Lost 6.Recovered 7.Recovered (Outside Agency Recovered) | 8.Found 9.Found/Contraband 10.Prisoner's Pers.Prop. 11.Stolen | 12.Stolen And Recovered 13.Disposal 14.Prop. Of Deceased 15.Return to Owner | 16.Vehicle Inventory Prop. 17.Baker Act 18.Seized/Confiscated 19.Abandoned | 20.Safekeeping 21.Digital Evidence | |
| | Category Code B. Bicycle C. Camera/Photo Equipment D-Data Processing Equipment | | E-Equipment/Measuring Devices/Tools F-Furniture and Furnishings G-Games and Gambling Apparatus H-Household Appliance/Housewares | I-Items of Identification J-Special Docs/Food Stamps/Tickets K-Keepsakes and Collectibles L. Livestock | | M. Musical Instrument O. Office Equipment P.Personal Accessories | R-Radio/TV/Sound Devices S-Sports/Camping/Rec.Equip. T-Toxic Chemicals | V.Viewing Equip (Binoculars) W.Well-drilling Equipment Y-All Other Items and Equipment (GUNS,DRUGS,JWLRY, Etc.) | | | | |
| | DRUG CODES | Activity P. Possess S. Sell B. Buy T. Traffic R. Smuggle | D. Deliver E. Use K. Dispense/Distribute M. Manufacture/Produce/ Cultivate | Z. Other | Type A. Amphetamine B. Barbiturates C. Cocaine E. Heroin H. Hallucinogen | | M. Marijuana O. Opium/Derivative P. Paraphernalia/ Equipment S. Synthetic | U. Unknown Z. Other | Unit 1. Gram 2. Milligram 3. Kilogram 4. Ounce 5. Pound 6. Ton 7. Liter 8. Milliliter 9. Dose Unit/Term 99.Other | | | |
| PROPERTY | Leave Blank: | Person Code # | Pers. Invl. | Item # | Status | Category | Article | Description | | | | |
| | Serial Number NFY766 | Owner Applied Number | Value Recovered: \$500 | | Date Recovered: 02-27-2015 | Forfeiture Y / N: N | F.W.T.C. (Y/N) | Value \$500 | | | | |
| | If Article | Qty. | Brand | Model | Jewelry Type | If Drug | Activity | Type | Quantity | Unit | Estimated Street Value \$ | |
| | If Gun | Make GLC | Model 27 | Caliber 40 | Type/Cat P | Action SEM | Finish BLK | Barrel Length | Barrel Type | | | |
| PROPERTY | Leave Blank: | Person Code # | Pers. Invl. | Item # | Status | Category | Article | Description | | | | |
| | Serial Number | Owner Applied Number | Value Recovered: \$ | | Date Recovered: | Forfeiture Y / N: | F.W.T.C. (Y/N) | Value \$ | | | | |
| | If Article | Qty. | Brand | Model | Jewelry Type | If Drug | Activity | Type | Quantity | Unit | Estimated Street Value \$ | |
| | If Gun | Make | Model | Caliber | Type/Cat | Action | Finish | Barrel Length | Barrel Type | | | |
| PROPERTY | Leave Blank: | Person Code # | Pers. Invl. | Item # | Status | Category | Article | Description | | | | |
| | Serial Number | Owner Applied Number | Value Recovered: \$ | | Date Recovered: | Forfeiture Y / N: | F.W.T.C. (Y/N) | Value \$ | | | | |
| | If Article | Qty. | Brand | Model | Jewelry Type | If Drug | Activity | Type | Quantity | Unit | Estimated Street Value \$ | |
| | If Gun | Make | Model | Caliber | Type/Cat | Action | Finish | Barrel Length | Barrel Type | | | |
| PROPERTY | Leave Blank: | Person Code # | Pers. Invl. | Item # | Status | Category | Article | Description | | | | |
| | Serial Number | Owner Applied Number | Value Recovered: \$ | | Date Recovered: | Forfeiture Y / N: | F.W.T.C. (Y/N) | Value \$ | | | | |
| | If Article | Qty. | Brand | Model | Jewelry Type | If Drug | Activity | Type | Quantity | Unit | Estimated Street Value \$ | |
| | If Gun | Make | Model | Caliber | Type/Cat | Action | Finish | Barrel Length | Barrel Type | | | |
| CHAIN OF CUSTODY | Item # | Date: | Time: | Released by (Printed): | | Released by (Signature): | | Received by (Printed): | | Received by (Signature): | | |
| | Leave Blank: | | | Reason for Change: | | | | | | | | |
| | Item # | Date: | Time: | Released by (Printed): | | Released by (Signature): | | Received by (Printed): | | Received by (Signature): | | |
| | Leave Blank: | | | Reason for Change: | | | | | | | | |
| | Item # | Date: | Time: | Released by (Printed): | | Released by (Signature): | | Received by (Printed): | | Received by (Signature): | | |
| | Leave Blank: | | | Reason for Change: | | | | | | | | |
| | Item # | Date: | Time: | Released by (Printed): | | Released by (Signature): | | Received by (Printed): | | Received by (Signature): | | |
| | Leave Blank: | | | Reason for Change: | | | | | | | | |
| | Item # | Date: | Time: | Released by (Printed): | | Released by (Signature): | | Received by (Printed): | | Received by (Signature): | | |
| | Leave Blank: | | | Reason for Change: | | | | | | | | |
| ADMIN. | Officer Reporting - Printed Beres, Michael | | | Officer Reporting - Signature | | | ID. Number D44433 | Unit | Date 02-27-2015 | | | |
| | Officer Reviewing - Printed (If Applicable) | | | Officer Reviewing - Signature (If Applicable) | | | ID. Number | Unit | Date | | | |