

RICHLAND COUNTY SHERIFF'S DEPARTMENT INCIDENT REPORT

AGENCY I.D.
SC0RI 400000

CASE NUMBER
22010445-25

NCIC
INQ ENTD

EVENT	INCIDENT TYPE				COMPLETED	FORCED ENTRY	PREMISE TYPE	UNITS ENTERED	TYPE VICTIM				
	1. All Other Offenses				<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	53		<input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> BUSINESS <input checked="" type="checkbox"/> FINANCIAL INST <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> RELIG. ORGN. <input type="checkbox"/> SOC/PUBLIC <input type="checkbox"/> OTHER <input type="checkbox"/> UNKNOWN <input type="checkbox"/> POLICE OFFICER				
	2.				<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO							
	3.				<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO							
INCIDENT LOCATION (SUBDIVISION, APARTMENT AND NUMBER, STREET AND NAME AND NUMBER)								SUBDIVISION	ZIP CODE	WEAPON TYPE			
763 Fashion Drive, Columbia SC (Richland Dist#2 R2I2)									29229	99			
INCIDENT DATE		24 HR. CLOCK	TO	DATE	24 HR. CLOCK	DISPATCH DATE / TIME 24 HR. CLOCK			AREA	GRID			
01/25/22		17:00		01/25/22	17:30	DISP. DATE	DISP. TIME	TIME ARRIVED	DEPART TIME				
COMPLAINANT'S NAME (LAST, FIRST, MIDDLE)				RELATIONSHIP TO SUBJECT			RES	RACE	SEX	AGE	ETH.	DAYTIME PHONE	EVENING PHONE
[REDACTED]				1	2	3	[REDACTED]	[REDACTED]	[REDACTED]		N	[REDACTED]	[REDACTED]
ADDRESS				CITY			STATE	ZIP CODE					
763 Fashion Drive				Columbia			SC	29229					

VICTIM NO. 1	VICTIM'S NAME (LAST, FIRST, MIDDLE)				RELATIONSHIP TO SUBJECT			RES	RACE	SEX	AGE	ETH.	DAYTIME PHONE	EVENING PHONE
	State of SC				1	2	3						(803)	576-3000
	HEIGHT	WEIGHT	HAIR	EYES	FACIAL HAIR, SCARS, TATOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC.									
ADDRESS				CITY			STATE	ZIP CODE	LOCATION					
5623 Two Notch Road				Columbia			SC	29223						
VISIBLE INJURY (VICT. 1) <input type="checkbox"/> YES <input type="checkbox"/> NO				EXPLAIN:				COMPLAINT OF ANY NON-VISIBLE INJURIES: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO						
VICTIM (NO. 1) USING: ALCOHOL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK.				DRUGS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK.				TYPE:						
<input type="checkbox"/> TWO-MAN VEH. <input type="checkbox"/> ONE-MAN VEH. <input type="checkbox"/> DET./SPEC. ASMNT <input type="checkbox"/> OTHER <input type="checkbox"/> ALONE <input type="checkbox"/> ASSISTED				J = THIS JURISDICTION S = STATE O = OUT OF STATE U = UNKNOWN										

SUBJECT NO. 1	<input checked="" type="checkbox"/> SUBJECT	NAME (LAST, FIRST, MIDDLE)				RACE	SEX	AGE	ETH.	DATE OF BIRTH	HEIGHT	WEIGHT	HAIR	EYES
	<input type="checkbox"/> RUNAWAY	[REDACTED]				[REDACTED]	[REDACTED]						[REDACTED]	[REDACTED]
	<input type="checkbox"/> WANTED	FACIAL HAIR, SCARS, TATOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC.				NCIC NUMBER								
	<input type="checkbox"/> WARRANT	[REDACTED]												
<input type="checkbox"/> ARREST	ADDRESS				CITY			STATE	ZIP CODE	LOCATION NO.				
<input type="checkbox"/> JAIL														
<input type="checkbox"/> SUMMONS	SUBJECT (NO. 1) USING: ALCOHOL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK.				ARRESTED NEAR OFFENSE SCENE: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				DATE / TIME OF OFFENSE		DATE / TIME OF ARREST			
	DRUGS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK. TYPE:				TOTAL # ARRESTED:									

NARRATIVE

(BWC/ON) R/O was notified by the complainant (Dist2 [REDACTED]) that a disturbance was taking place within the boardroom prior to the school board meeting. Upon entering the boardroom, I observed security personnel speaking with two members of the public in reference to their behavior. I was notified by [REDACTED] of security that several verbal disputes occurred between subject #1 and the remaining subjects. Subjects#2 and #3 was placed on trespass notice by security and escorted from the building. All parties involved and witnesses provided statements as to what occurred (statements attached). Security personnel stated that video surveillance is not available because security cameras are not in the boardroom.

PROPERTY	EVIDENCE NUMBER:				JURISDICTION OF THEFT LAW ENFORCEMENT AGENCY				JURISDICTION OF RECOVERY LAW ENFORCEMENT AGENCY			
	HOLD ROOM				EVIDENCE ROOM							
	SEIZED	\$	BURNED	\$	DAMAGED	\$						

ADMINISTRATIVE	SUBJECT IDENTIFIED		SUBJECT LOCATED		<input checked="" type="checkbox"/> ACTIVE <input type="checkbox"/> ADM. CLOSED		<input type="checkbox"/> ARRESTED UNDER 18		<input type="checkbox"/> EX-CLEAR UNDER 18	
	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> UNFOUNDED		<input type="checkbox"/> ARRESTED 18 AND OVER		<input type="checkbox"/> EX-CLEAR 18 AND OVER	
	REASON FOR EXCEPTIONAL CLEARANCE:									
	1. <input type="checkbox"/> OFFENDER DEATH 2. <input type="checkbox"/> NO PROSECUTION 3. <input type="checkbox"/> EXTRADITION DENIED 4. <input type="checkbox"/> VICTIM DECLINES COOPERATION 5. <input type="checkbox"/> JUVENILE - NO CUSTODY									
REPORTING OFFICER(S)			DATE	DEPT. NO.	APPROVING OFFICER			DATE	DEPT. NO.	
T. Ford			01/25/22	832	T. Ford			1/25/22	832	
FOLLOW UP INVESTIGATION OFFICER										
<input type="checkbox"/> YES <input type="checkbox"/> NO										