Preliminary Public MPD Document

Metropolitan Police Department Washington, D.C.

Incident - Based Event Report

REPORT NUMBER: 13136237

PART I - CLASSIFICATION OF EVENT

TYPE OF REPORT	EVENT START DATE / TIME	EVENT END DATE / TIME	DATE OF REPORT	TIME OF REPORT
Offense	09/23/2013 / 0253	09/23/2013 / 0253	09/23/2013	0253

DISTRICT	SECTOR	PSA	COMPLAINT NUMBER
2D		207	13136237

EVENT LOCATION ADDRESS	POSITION	REPORT RECEIVED BY	RADIO RUN LOCATION IF DIFFERENT FROM EVENT LOCATION	PROPERTY TYPE
15TH ST NW / I ST NW	IN FRONT OF	OFFICER		PUBLIC

EVENT NO. 1 INJURED PERSON TO HOSPITAL

FORCED ENTRY	POINT OF ENTRY	Method Used	WEATHER CONDITIONS
NO	FRONT		CLEAR

SUSPECTED HATE CRIME?	SECURITY SYSTEM	LOCATION TYPE	DESIGNATED AREAS
NONE (NO BIAS)		SIDEWALK	OTHER

PART II - VICTIM INFORMATION

	TYPE	NAME OF COMPLAINANT/VICTIM/MISSING PERSON NO.	RELATED TO EVENT NO(S).	VICTIM TYPE
1	COMPLAINANT	JONES, JACOBY	1	INDIVIDUAL

DATE OF BIRTH	AGE RANGE	SEX	HOME PHONE	BUSINESS PHONE
07/11/1984	29	MALE	[redacted]	

RACE / ETHNICITY	HOME ADDRESS
BLACK	[redacted]

BUSINESS ADDRESS/SCHOOL	OCCUPATION	IS EVENT RELATED TO OCCUPATION?
		NO

ADDITIONAL MEANS TO CONTACT COMPLAINANT/VICTIM NO.

INJURIES Use the following codes to describe injuries.

N = None Visible	O=Other Major Injury	M = Apparent Minor Injury	I = Possible Internal Injury
T = Loss of Teeth	L=Severe Laceration	B = Apparent Broken Bones	G = Gunshot / U = Unconscious

	INJURED	NUMBER	INJURY CODE	DESCRIBE INJURY	WHERE TAKEN	BY WHOM	DCFD AMB.	DCFD AMB#
1	COMPLAINANT	1	L	SEVERE LACERATION				

NARRATIVE Describe event and action taken.

ON THE LISTED DATE TIME AND LOCATION THE UNDERSIGNED OFFICER WAS FLAGGED DOWN FOR A FIGHT IN PROGRESS UPON ARRIVAL THE UNDERSIGNED OFFICER NOTICED C-1 WAS BLEEDING FROM THE HEAD. C-1 AND SEVERAL OTHER WITNESSES STATED THAT THE TWO INVOLVED WERE NO LONGER ON SCENE. C-1 ALSO STATED THAT HE DOES NOT KNOW HOW HE INJURED HIS HEAD. AMBULANCE 16 RESPONDED AND C-1 REFUSED TREATMENT AND REFUSED TO GO TO THE HOSPITAL.

CRU 2080 AND 2070 WERE ON SCENE
2D 5 WAS ON SCENE

EVIDENCE TECHNICIAN/CSES #	NAME OF INVESTIGATOR NOTIFIED	TELETYPE NOTIFIED (Name)	NOTIFICATION ALSO REQUIRED WHENEVER MISSING PERSON LOCATED		
TELETYPE #	REPORTING OFFICER'S SIGNATURE AYODEJI, HAKEEM	REPORTING OFFICER'S EMAIL		BADGE NUMBER CA8516	ELEMENT 2D
OTHER POLICE AGENCY	SECOND OFFICER'S NAME	SECOND OFFICER'S EMAIL		BADGE NUMBER	ELEMENT

SIGNATURE OF SUPERVISOR	SUPERVISOR'S EMAIL	BADGE NUMBER	ELEMENT	REVIEWER	STATUS
HUNTER, ROBERT M		S0668	2D		OPEN