

GREENVILLE COUNTY SHERIFF'S OFFICE

Incident Report

Agency I.D.
SC0230000

RTA

Case Number

16000142758

Adult/Juv

EVENT	INCIDENT TYPE				OFFENSE COMPLETED	FORCED ENTRY	PREMISE TYPE			UNITS ENTERED	TYPE VICTIM		
	M411 - Suspicious Person				Y	N	28 - Apts./Condos/Duplex			0	<input type="checkbox"/> Individual <input type="checkbox"/> Business <input type="checkbox"/> Financial Inst. <input type="checkbox"/> Government <input type="checkbox"/> Religious Org. <input type="checkbox"/> Soc / Public <input type="checkbox"/> Other <input type="checkbox"/> Unknown <input type="checkbox"/> Police Officer		
	Incident Location (Subdivision, Mill Village, Apartment & Number, Street Name & Number)						Closest Intersection			Zip Code			
	25 Fleetwood Dr Greenville SC (Fleetwood Manor)						Coolbrook Dr			29605			
VICTIM	Incident Date	Time	To	Date	Time	Weapon Type	Time Arrived	Time Completed	Patrol District				
	08/21/2016	11:38		08/21/2016	11:39	99	11:38	13:00	05				
	Victim's Name (Last, first, Middle)				Resident	Race	Sex	Primary Phone		Business Phone		Mobile Phone	
	Address				City	State		Zip Code		Patrol District			
SUBJECT	Victim's Name (Last, first, Middle)				Victim Relationship To Subject	Resident	Ethnicity	Race	Sex	Age	Primary Phone	Business Phone	Mobile Phone
	Address				City		State		Zip Code		Patrol District		
	Visible Injury (Vict 1) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Explain:												
	Complaint of any Non-Visible Injuries <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No												
NARRATIVE	Victim (No.1) Using Alcohol <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk Drugs <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk Type:												
	Two-Man Veh <input type="checkbox"/> One Man Veh <input type="checkbox"/> Detective/SPLASMT <input type="checkbox"/> Other <input type="checkbox"/>				ALONE <input type="checkbox"/> ASSISTED <input type="checkbox"/>		Jurisdiction: -						
	<input type="checkbox"/> Suspect <input type="checkbox"/> Runaway <input type="checkbox"/> Wanted <input type="checkbox"/> Arrest <input type="checkbox"/> Missing												
	Subject's Name (Last, first, Middle) _____ Ethnicity _____ Race _____ Sex _____ Age _____ Date of Birth _____ Height _____ Weight _____ Hair _____ Eyes _____ Address _____ SSN _____ Facial Hair, Scars, Tattoos, Glasses, Clothing, Physical, Peculiarities, Etc. _____ City _____ State _____ Zip Code _____ Patrol District _____ Subject (No. 1) Using Alcohol <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk Arrested Near Offense Scene <input type="checkbox"/> Yes <input type="checkbox"/> No Date/Time of Offense _____ Date of Arrest _____ Drugs <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk Type _____ Total Arrested 0 Arrestee Armed <input type="checkbox"/> Yes <input type="checkbox"/> No Weapon Type _____ Arrested on Current Offense <input type="checkbox"/> Cleared By Arrest on Prior Offense <input type="checkbox"/> Juvenile Disposition <input type="checkbox"/> Handled Released <input type="checkbox"/> Referred To Other Authority <input type="checkbox"/> On View Arrest <input type="checkbox"/> Summoned <input type="checkbox"/> Custody												
VEHICLE	Charge _____ Warrant Number _____ Ticket Number _____												
	Arrest Location _____ Gang Affiliation NG - Not Gang Related												
	Arrest Location _____ Gang Affiliation NG - Not Gang Related												
	Arrest Location _____ Gang Affiliation NG - Not Gang Related												
PROPERTY	Arrest Location _____ Gang Affiliation NG - Not Gang Related												
	I arrived at the incident location in response to a suspicious person												
	Jurisdiction of Theft :						Jurisdiction of Recovery :						
	<input type="checkbox"/> Towed <input type="checkbox"/> Stolen <input type="checkbox"/> Recovered <input type="checkbox"/> Suspect <input type="checkbox"/> Victim												
ADMIN	Tag Number _____ State _____ Year _____ VIN _____ Value _____ Year _____ Make _____ Model _____ Style _____ Color _____ Tag Only <input type="checkbox"/> Additional Vehicle description _____												
	Status _____ Property Type _____ Quantity _____ Property Make _____ Color _____ Description _____ Serial # / OAN _____ Value _____												
	Subject Identified <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Subject Located <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Active <input type="checkbox"/> Admin Closed <input type="checkbox"/> Arrested Under 18 <input type="checkbox"/> Ex-Cleared Under 18 <input type="checkbox"/> Unfounded <input type="checkbox"/> Arrested 18 and Over <input checked="" type="checkbox"/> Ex-Cleared 18 and Over												
	Reason For Exceptional Clearance <input type="checkbox"/> Offender Death <input checked="" type="checkbox"/> No Prosecution <input type="checkbox"/> Victim Declines Cooperation <input type="checkbox"/> Extradition Denied <input type="checkbox"/> Juvenile No Arrest Reporting Officer(s) _____ Date _____ Unit#/Star# _____ Approving Officer _____ Date _____ Unit#/Star# _____ KICKLIGHTER, DARREL 09/21/2016 A16 / 00998 MCALISTER, BRAD 08/21/2016 A04 / 00505 JONES, DA 08/21/2016 A16A / 01516 Follow Up Investigation <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Officer) _____ /												

Original Report Status Change Additional Victims Additional Stolen Property Incident Type M411 - Suspicious Person

Supplemental Report Other Report Additional Defendants Additional Recovered Property Patrol District 05 Page 1 of 2 Pages

I.D. OVERFLOW

Complainant Victim Subject Runaway Wanted Arrest Missing Jail Other

Subject's Name (Last, first, Middle): _____ Victim Relationship To Subject _____ Ethnicity _____ Resident _____ Race _____ Sex _____ Age _____ Date of Birth _____

Address _____ City _____ State _____ Zip Code _____ Patrol District _____ Day Phone _____ Evening Phone _____

Height _____ Weight _____ Hair _____ Eyes _____ Facial Hair, Scars, Tattoos, Glasses, Clothing, Physical, Peculiarities, Etc. _____

Victim No. _____ Visible Injury Yes No Complaint of any Non-Visible Injuries Yes No Victim Using Alcohol No Yes Unk Two-Man Veh One Man Veh ALONE Explain: _____ Drugs No Yes Type: _____ Detective Other ASSISTED

Subject No. _____ Using Alcohol No Yes Unk Arrested on Current Offense

Using Drugs No Yes Unk Type: _____ Cleared By Arrest on Prior Offense

Arrestee Armed Yes No Weapon Type _____ On View Arrest Summoned Custody

Juvenile Disposition Handled Released Referred To Other Authority

Arrest Location _____

Overflow:

Witness 1 Complainant 1

DOB: _____

:Witness 2

RACE: Black, SEX: Female, RESIDENT: Primary Jurisdiction, Mobile: 25 Fleetwood Dr Greenville 29605 05

Narrative:

On 8/21/16 I was conducting a follow up investigation in reference to residents making several reports of a suspicious character, dressed in circus clown attire and white face paint, enticing kids to follow him/her into the woods.

Speaking with resident, _____ she stated that on Friday night, approximately 2030 hrs, she was in front of her apartment when her son, _____ approached her and stated that he seen clowns in the woods whispering and making strange noises. advised that she went over to the area that her son mentioned and observed several clowns in the woods flashing green laser lights then ran away into the woods. Her eldest son, _____ stated that he heard chains and banging on the front door of the residence on Saturday approximately 2030 hrs.

Speaking with another resident, _____ stated that she was walking to her residence 0230 hrs this morning and saw a large-figured clown with a blinking nose, standing under a post light near the garbage dumpster area. She stated the suspect waved at her and she waved back while she made her way to her residence safely. The suspect did not approach her or harm her.

Several children of the community stated that several clowns have been appearing in the woods behind building "D" and try to persuade them into the woods further by displaying large amounts of money. They advised that they believe the clowns stay in a house located near a pond at the end of a man-made trail in the woods.

After investigating the trail, I observed a house near a pond that was located in the wooded

PROPERTY

Status	Property Type	Quantity	Property Make	Color	Description	Serial # / OAN	Value

ADMIN

Subject Identified Yes No Subject Located Yes No Active Admin Closed Arrested Under 18 Ex-Cleared Under 18

Unfounded Arrested 18 and Over Ex-Cleared 18 and Over

Reason For Exceptional Clearance Offender Death No Prosecution Victim Declines Cooperation Extradition Denied Juvenile No Arrest

Reporting Officer(s)	Date	Unit#/Star#	Approving Officer	Date	Unit#/Star#
KICKLIGHTER, DARREL	08/21/2016	A16 / 00998	MCALISTER, BRAD	08/21/2016	A04 / 00505
JONES, DA	08/21/2016	A16A / 01516	Follow Up Investigation <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (officer)		

GREENVILLE COUNTY SHERIFF'S OFFICE
Supplemental Report

<input type="checkbox"/> Original Report	<input type="checkbox"/> Status Change	<input type="checkbox"/> Additional Victims	<input type="checkbox"/> Additional Stolen Property	Incident Type <u>M411 - Suspicious Person</u>
<input checked="" type="checkbox"/> Supplemental Report	<input type="checkbox"/> Other Report	<input type="checkbox"/> Additional Defendants	<input type="checkbox"/> Additional Recovered Property	Patrol District <u>05</u> Page <u>2</u> of <u>2</u> Pages

I.D. OVERFLOW	<input type="checkbox"/> Complainant	Subject's Name (Last, first, Middle)		Victim Relationship To Subject	Ethnicity	Resident	Race	Sex	Age	Date of Birth	
	<input type="checkbox"/> Victim	Address		City	State	Zip Code	Patrol District	Day Phone	Evening Phone		
	<input type="checkbox"/> Subject	Height	Weight	Hair	Eyes	Facial Hair, Scars, Tattoos, Glasses, Clothing, Physical, Peculiarities, Etc.					
	<input type="checkbox"/> Runaway	<input type="checkbox"/> Wanted	<input type="checkbox"/> Arrest	<input type="checkbox"/> Missing	<input type="checkbox"/> Jail	<input type="checkbox"/> Other					

<input type="checkbox"/> Victim No. _____	<input type="checkbox"/> Visible Injury <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Complaint of any Non-Visible Injuries <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Victim Using Alcohol <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Unk	<input type="checkbox"/> Two-Man Veh <input type="checkbox"/> One Man Veh <input type="checkbox"/> ALONE <input type="checkbox"/>
Explain:	<input type="checkbox"/> Drugs <input type="checkbox"/> No <input type="checkbox"/> Yes Type:	<input type="checkbox"/> Detective <input type="checkbox"/> Other <input type="checkbox"/> ASSISTED <input type="checkbox"/>		
Subject No. _____	<input type="checkbox"/> Using Alcohol <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Unk	<input type="checkbox"/> Arrested on Current Offense		
<input type="checkbox"/> Using Drugs <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Unk Type:	<input type="checkbox"/> Cleared By Arrest on Prior Offense			

Arrestee Armed <input type="checkbox"/> Yes <input type="checkbox"/> No	Weapon Type _____	<input type="checkbox"/> On View Arrest	<input type="checkbox"/> Summoned	<input type="checkbox"/> Custody
Juvenile Disposition <input type="checkbox"/> Handled Released <input type="checkbox"/> Referred To Other Authority				

Arrest Location

area behind the apartments. There were no signs of suspicious activity or characters dressed in clown attire. There is no video surveillance in the community. There was no further action taken in this incident.

*** while reviewing the call history from the previous night there were reports of gunshots being fired around 2330 hrs. while speaking with the residents I was informed male subjects from the complex heard about the recent clown activity and heard noises in the woods behind building "D". I was told these men fired weapons in the direction of the wooded area. We canvassed the ground area in an attempt to locate shell casings with none located ***

Recent calls involving reports of clown sightings:

16-142276
16-142540

PROPERTY	Status	Property Type	Quantity	Property Make	Color	Description	Serial # / OAN	Value

ADMIN	Subject Identified <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Subject Located <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Active <input type="checkbox"/> Admin Closed	<input type="checkbox"/> Arrested Under 18	<input type="checkbox"/> Ex-Cleared Under 18
			<input type="checkbox"/> Unfounded	<input type="checkbox"/> Arrested 18 and Over	<input checked="" type="checkbox"/> Ex-Cleared 18 and Over
	Reason For Exceptional Clearance <input type="checkbox"/> Offender Death <input checked="" type="checkbox"/> No Prosecution <input type="checkbox"/> Victim Declines Cooperation <input type="checkbox"/> Extradition Denied <input type="checkbox"/> Juvenile No Arrest				
	Reporting Officer(s)	Date	Unit#/Star#	Approving Officer	Date

KICKLIGHTER, DARREL	08/21/2016	A16 / 00998	MCALISTER, BRAD	08/21/2016	A04 / 00505
JONES DA	08/21/2016	A16A / 01516	Follow Up Investigation <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (other)		/