

# FAULKNER COUNTY SHERIFFS OFFICE

## Incident Report

DATE: 11/13/2020

TIME: 07:41:51AM

Case Number: 20005151

Page 1 of 2

INCIDENT #: 20005151

ADDRESS: 161 SKUNK HOLLOW RD

City: CONWAY

State: AR

ZipCode: 72032-

REPORTING OFFICER: 1273 - GULLEY, MACKENZIE

DATE: 10/11/2020

TIME: 23:57

Date Occured From: 10/11/2020 / 23:57

Date Occured Thru: 10/11/2020 / 23:57

INCIDENT STATUS: Cleared

EXCEPTIONAL CLEARANCE:

DATE:

ZONE: D

SUBDIVISION:

JUVENILE: N

SCHOOL:

### Offenses

U.C.R. CODE: 13B OFFENSE: BATTERY - 3RD / D241

STATUTE: 5-13-203A(

BIAS MOTIVATION: NONE

LOCATION: HOSPITAL

OFFENSE STATUS: COMPLETED

OFFENDER USED: NOT APPLICABLE

CRIMINAL ACTIVITY:

WEAPON / FORCE: PERSONAL WEAPONS

Auto:

Auto:

METHOD OF ENTRY:

GANG ACTIVITY: N

PREMISES ENTERED: 0

GANG TYPE:

GANG NAME:

HOME INVASION: N

### Offender Segment

ARRESTED: No

DATE ARRESTED:

TIME:

OFFICER:

LOCATION:

UCR CODE 13B ASSAULT SIMPLE

S.S.N.: XXX-XX-XXXX

D.O.B.: [REDACTED]

DL#:

Hispanic: No

NAME: [REDACTED]

RACE: [REDACTED]

SEX: [REDACTED] HAIR:

Eyes: WEIGHT:

ADDRESS: 161 SKUNK HOLLOW RD

CITY, STATE ZIP: CONWAY, AR. 72032-

HEIGHT:

HOME PHONE: (501)

WORK PHONE:

OCCUPATION:

EMPLOYER:

VEHICLE INFORMATION:

SCARS:

CLOTHES:

STATE CONTROL:

ARREST TYPE:

MULTIPLE CLEARANCE INDICATOR:

WARRANT:

ARRESSTEE ARMED WITH: UNARMED

DISPOSITION UNDER 18:

### Victim Segment

VICTIM TYPE: INDIVIDUAL

NAME: HIBBERT, ALEX OSHANE

RACE: B SEX: M HEIGHT: 600

ADDRESS: 11814 219TH ST

WEIGHT: HAIR: BRO EYES: BRO

ITY STATE ZIP: CAMBRIA HTS, NY. 11411-

Hispanic: No

HOME PHONE:

WORK PHONE:

OCCUPATION:

EMPLOYER:

S.S.N.: XXX-XX-XXXX

D.O.B.: 12/05/1994

DL#:

INJURY TYPE: MINOR INJURY

AGGRAVATED ASSAULT / HOMICIDE:

NEGLIGENT MANSLAUGHTER:

JUSTIFIABLE HOMICIDE:

ADDITIONAL JUSTIFIABLE HOMICIDE:

OFFENSE OCCURED ON CAMPUS: No

SCHOOL NAME:

ORDER OF PROTECTION:

VICTIM TRANSPORTED TO SAFE PLACE:

TYPE OF LEOKA:

TYPE OF VEHICLE:

TRANSPORT TIME:

ASSIGNMENT TYPE:

VIC-OFF: 001-RU /

# FAULKNER COUNTY SHERIFFS OFFICE

Incident Report

DATE: 11/13/2020  
TIME: 07:41:51AM

Case Number: 20005151

Page 2 of 2

## Complainant Segment

NAME: HIBBERT, ALEX OSHANE

RACE: B SEX: M HEIGHT: 600 WEIGHT:

ADDRESS: 11814 219TH ST

HAIR: BRO EYES: BRO D.O.B.: 12/05/1984

ADDRESS:

CITY, STATE ZIP: CAMBRIA HTS, NY. 11411-

HOME PHONE: (404) 644-0806

WORK PHONE:

Hispanic: No

OCCUPATION:

EMPLOYER:

S.S.N.: XXX-XX-XXXX

D.L.N.:

## Case Segment

APPROVING OFFICER: 1089 - ROSS, DAVID

DATE: 10/24/2020

ASSIGNED OFFICER:

DATE:

## Narrative

On 10-11-20 I was dispatched to Little Creek Behavioral for a reported assault.

Once on scene I made contact with Alex Hibbert (complainant/victim). He stated that [REDACTED] asked him to turn the light on in his room for a second. Mr. Hibbert stated that he did and when he turned the light back off [REDACTED] started attacking him. Mr. Hibbert stated that he was hit in the face back and arms.

There weren't any injuries visible at the time. Mr. Hibbert stated that he wanted to press charges.

I advised Mr. Hibbert of the warrants process.

GULLEY, M - F24 - 10/14/2020 3:28:18 AM

Officer Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Supervisor: \_\_\_\_\_