

FAULKNER COUNTY SHERIFFS OFFICE

Incident Report

DATE: 11/13/2020
TIME: 07:42:02AM

Case Number: 20005138J

Page 1 of 2

INCIDENT #: 20005138J

ADDRESS: 161 SKUNK HOLLOW RD

City: CONWAY

State: AR

ZipCode: 72032

REPORTING OFFICER: 1105 - COORS, ROBERT

DATE: 10/11/2020

TIME: 13:05

Date Occured From: 10/11/2020 / 12:55

Date Occured Thru: 10/11/2020 / 13:05

INCIDENT STATUS: Cleared

EXCEPTIONAL CLEARANCE:

DATE:

ZONE: D

SUBDIVISION:

JUVENILE: Y

SCHOOL:

Offenses

U.C.R. CODE: 90Z OFFENSE: GENERAL INFORMATION REPORTS

STATUTE: GEN INFO

BIAS MOTIVATION: NONE

LOCATION: HOSPITAL

OFFENSE STATUS: COMPLETED

OFFENDER USED: NOT APPLICABLE

CRIMINAL ACTIVITY:

WEAPON / FORCE:

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 90Z

ALL OTHER OFFENSES

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

D.O.B:

DL#:

Hispanic: No

NAME:

RACE:

SEX:

HAIR:

Eyes: BRO WEIGHT: 270

ADDRESS: 161 SKUNK HOLLOW RD

CITY, STATE ZIP: CONWAY, AR. 72034-

HEIGHT: 602

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: SOCIETY / PUBLIC

NAME: SOCIETY,

RACE:

SEX:

HEIGHT:

ADDRESS:

WEIGHT:

HAIR:

EYES:

CITY STATE ZIP:

Hispanic:

HOME PHONE:

WORK PHONE:

OCCUPATION:

EMPLOYER:

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

D.O.B.:

DL#:

INJURY TYPE:

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 /

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Complainant Segment

NAME: [REDACTED] RACE: B SEX: F HEIGHT: 602 WEIGHT: 270
ADDRESS: 161 SKUNK HOLLOW RD HAIR: [REDACTED] EYES: [REDACTED] D.O.B.: [REDACTED]
ADDRESS: CITY, STATE ZIP: CONWAY, AR. 72032-
HOME PHONE: (501) - WORK PHONE: Hispanic:
OCCUPATION: EMPLOYER:
S.S.N.: XXX-XX-XXXX D.L.N.:

Case Segment

APPROVING OFFICER: 0939 - PRUETT, CHAD DATE: 10/13/2020
ASSIGNED OFFICER: DATE:

Others Involved Segment

NAME: HARDING, LATOYA MONEI RACE: B SEX: F HEIGHT: 504 WEIGHT: 170
INVOLVEMENT: HAIR: EYES: BRO DOB: 03/08/1984
ADDRESS: 3308 PRIVATEWOOD RD CITY, STATE ZIP: PINE BLUFF, AR. 71603-
ADDRESS: HOME PHONE: (501) - WORK PHONE: (855) 977-9188
OCCUPATION: EMPLOYER: DIRECTOR
S.S.N.: XXX-XX-XXXX D.L.N.:

Narrative

On 10/11/20, Juv 1, who is a patient at Little Creek Behavioral Health, called 911 and advised she was feeling suicidal. I arrived a short time later at the facility. I asked dispatch to call the facility to have someone let me in the lobby. I learned the staff did not know Juv 1 called 911.

I made contact with Latoya Harding, who is the director of the facility. She brought Juv 1 to the lobby so MEMS and I could make sure she was ok. I spoke to Juv 1 for a short time about her family problems she was having and she told me that's why she was thinking about harming herself.

Ms. Harding advised me the in house doctors would be taking care of Juv 1. I gave her this incident number for her records.

COORS, R - F12 - 10/12/2020 9:42:35 AM

Officer Signature: _____ Date: _____ Supervisor: _____