

# LITTLE ROCK POLICE DEPARTMENT INCIDENT REPORT

<input checked="" type="checkbox"/> JUVENILE INFORMATION		<b>INCIDENT</b>			Report generated: 7/31/2020 4:37 PM	
INCIDENT NUMBER <b>2020-085658</b>		UNIT ASSIGNED <b>1X61</b>	CALL DATE <b>07/29/2020</b>	CALL TIME <b>10:34:00</b>	TYPE OF CALL <b>DIS</b>	
INCIDENT DATE <b>7/29/2020 10:38:02 AM</b>			LOCATION OF INCIDENT (ADDRESS / BUSINESS NAME) <b>6501 W 12TH ST</b>			DISTRICT <b>61</b>

OFFENSE			
INCIDENT OFFENSE TYPE			OFFENSE STATUS
1. DISTURBANCE	5.		Attempted 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>
2.	6.		Completed 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>
3.	7.		Attempted 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/>
4.	8.		Completed 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/>
SUSPECTS USED:		TYPE OF CRIMINAL ACTIVITY:	
<input type="checkbox"/> (A) Alcohol <input type="checkbox"/> (D) Drugs <input type="checkbox"/> (C) Computer Equip <input checked="" type="checkbox"/> (N) Not Applicable / Unknown		<input type="checkbox"/> (B) Buying / Receiving <input type="checkbox"/> (C) Cultivate / Manufacture / Publish <input type="checkbox"/> (E) Exploiting Children <input type="checkbox"/> (O) Operating / Promoting / Assisting <input type="checkbox"/> (T) Transport / Transmit / Import <input type="checkbox"/> (U) Using / Consuming <input type="checkbox"/> (D) Distributing / Selling <input type="checkbox"/> (P) Possessing / Concealing	
GANG RELATED INFO:			
<input type="checkbox"/> (J) Juvenile Gang <input type="checkbox"/> (G) Other Gang <input type="checkbox"/> (N) None / Unknown			
LOCATION CODE:			
<input type="checkbox"/> (01) Air / Bus / Train Terminal <input type="checkbox"/> (16) Lake / Waterway <input type="checkbox"/> (44) Daycare Facility <input type="checkbox"/> (51) Rest Area <input type="checkbox"/> (02) Bank / Savings & Loan <input type="checkbox"/> (17) Liquor Store <input type="checkbox"/> (45) Dock / Wharf / Freight Terminal <input type="checkbox"/> (52) School - College / University <input type="checkbox"/> (03) Bar / Night Club <input type="checkbox"/> (18) Parking Lot / Garage <input type="checkbox"/> (46) Farm Facility <input type="checkbox"/> (53) School - Elementary / Secondary <input type="checkbox"/> (04) Church / Synagogue / Temple <input type="checkbox"/> (19) Rental / Storage Facility <input type="checkbox"/> (47) Gambling / Casino / Racetrack <input type="checkbox"/> (54) Shelter - Mission / Homeless <input type="checkbox"/> (05) Commercial / Office Building <input type="checkbox"/> (20) Residence / House <input type="checkbox"/> (48) Industrial Site <input type="checkbox"/> (55) Shopping Mall <input type="checkbox"/> (06) Construction Site <input type="checkbox"/> (21) Restaurant <input type="checkbox"/> (49) Military Installation <input type="checkbox"/> (56) Tribal Lands <input type="checkbox"/> (07) Convenience Store <input type="checkbox"/> (22) School / College <input type="checkbox"/> (50) Park / Playground <input type="checkbox"/> (57) Community Center <input type="checkbox"/> (08) Department / Discount Store <input type="checkbox"/> (23) Service / Gas Station <input type="checkbox"/> (09) Drug Store / DR Office / Hospital <input type="checkbox"/> (24) Specialty Store (TV, Fur, Etc) <input type="checkbox"/> (10) Field / Woods <input checked="" type="checkbox"/> (25) Other / Unknown <input type="checkbox"/> (11) Government / Public Building <input type="checkbox"/> (37) Abandoned/Condemned Structure <input type="checkbox"/> (12) Grocery / Supermarket <input type="checkbox"/> (38) Amusement Park <input type="checkbox"/> (13) Highway / Road / Alley <input type="checkbox"/> (39) Arena / Stadium / Fairgrounds <input type="checkbox"/> (14) Hotel / Motel / Etc <input type="checkbox"/> (40) ATM Separate from Bank <input type="checkbox"/> (15) Jail / Penitentiary <input type="checkbox"/> (41) Auto Dealership New / Used <input type="checkbox"/> (42) Camp / Campground			
(FOR BURGLARY ONLY)		METHOD OF ENTRY:	
NUMBER OF PREMISES ENTERED _____		<input type="checkbox"/> (F) Forcible <input type="checkbox"/> (N) No Force	
WEAPON FORCE: (on 11-15, an "A" denotes Automatic or Semi-Automatic)			
<input type="checkbox"/> (11) Firearm (Unknown) <input type="checkbox"/> (50) Poison <input type="checkbox"/> (12) Handgun <input type="checkbox"/> (60) Explosives <input type="checkbox"/> (13) Rifle <input type="checkbox"/> (65) Fire / Incendiary Device <input type="checkbox"/> (14) Shotgun <input type="checkbox"/> (70) Narcotics / Drugs / Sleeping Pills <input type="checkbox"/> (15) Other Firearm <input type="checkbox"/> (85) Asphyxiation <input type="checkbox"/> (20) Knife / Cutting Instr (Axe, etc) <input type="checkbox"/> (90) Other <input type="checkbox"/> (30) Blunt Object (Club, etc) <input type="checkbox"/> (95) Unknown <input type="checkbox"/> (35) Motor Vehicle (as weapon) <input type="checkbox"/> (99) None <input type="checkbox"/> (40) Personal Weapons (hands, etc)			
NARCAN USED: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Other			

ENTRY DATE <b>07/29/2020 11:14:00</b>	REPORTING OFFICER <b>CHARLES STARRATT</b>	ORIGINAL APPROVING SUPERVISOR <b>DAMON WHITENER</b>	<input checked="" type="checkbox"/> MVR in use
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OTHER PERSONS - CONTACT

OTHER PERSON # 1 NAME (Last, First, Middle)

ADDRESS:

HOME PHONE: WORK PHONE: MOBILE PHONE: OTHER PHONE:

SEX: (M) Male (F) Female (U) Unk. ETHNICITY: (H) Hispanic (N) Non-Hispanic (U) Unk. RACE: (W) White (B) Black (I) American Indian (A) Asian / Pacific Islander (U) Unknown DATE OF BIRTH

RES. STATUS: (R) Resident (N) Nonresident (U) Unknown MENTALLY AFFLICTED? (Y) Yes (N) No (U) Unk. OCCUPATION / EMPLOYER:

AGE: Exact Age: 17 Range: (BB) 7-364 Days Old (NN) Under 24 Hrs. Old (99) Over 98 Years Old (NB) 1-6 Days Old (00) Unknown NIC: HEIGHT: Ft 6 In 1 D.L. / ID No. (STATE) WEIGHT: Lbs 250

COMPLEXION: HAIR STYLE: HAIR COLOR: FACAIL HAIR: DEMEANOR: SCAR / MARK: TATTOO: HAIR LENGTH: BUILD: EYE COLOR: TATTOO LOC: CLOTHING DESCRIPTION: HAT COAT SHIRT PANTS/DRESS SHOES

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**OTHER PERSONS - PERSON REPORTING**

OTHER PERSON #  
2

NAME (Last, First, Middle)

**WHITE, TELESSIA**

ADDRESS:

6501 W 12TH ST LITTLE ROCK AR 72204

HOME PHONE:

WORK PHONE:

MOBILE PHONE:

OTHER PHONE:

SEX:  (M) Male  
 (F) Female  (U) Unk.

ETHNICITY:  (H) Hispanic  
 (N) Non-Hispanic  (U) Unk.

RACE:  (W) White  (B) Black  (I) American Indian  
 (A) Asian / Pacific Islander  (U) Unknown

DATE OF BIRTH

RES. STATUS:  (R) Resident  
 (N) Nonresident  (U) Unknown

MENTALLY AFFLICTED?  
 (Y) Yes  (N) No  (U) Unk.

OCCUPATION / EMPLOYER:

AGE:

Exact Age: 33

Range: \_\_\_\_\_ - \_\_\_\_\_  (BB) 7-364 Days Old

(NN) Under 24 Hrs. Old  (99) Over 98 Years Old

(NB) 1-6 Days Old  (00) Unknown

NIC:

D.L. / ID No. (STATE)

HEIGHT:

Ft \_\_\_\_\_ In \_\_\_\_\_

WEIGHT:

Lbs \_\_\_\_\_

COMPLEXION:

- (1) Light
- (2) Medium
- (3) Dark
- (4) Acne
- (5) Freckled
- (6) Ruddy
- (7) Other
- (8) Unknown

HAIR STYLE:

- (01) Afro
- (02) Wavy
- (03) Straight
- (04) Curly
- (05) Braided
- (06) Ponytail
- (07) Military
- (08) Processed
- (09) Wig/Toupee
- (10) Other
- (11) Unknown

HAIR COLOR:

- (1) Black
- (2) Blonde
- (3) Brown
- (4) Grey
- (5) Red
- (6) Sandy
- (7) Other
- (8) Unknown

FACIAL HAIR:

- (01) Clean Shaven
- (02) Unshaven
- (03) Full Beard
- (04) Must. (hvy)
- (05) Must. (thin)
- (06) Brows (hvy)
- (07) Brows (thin)
- (08) Side Burns
- (09) Goatee
- (10) Other
- (11) Unknown

DEMEANOR:

- (01) Angry
- (02) Apologetic
- (03) Calm
- (04) Irrational
- (05) Nervous
- (06) Polite
- (07) Professional
- (08) Stupor
- (09) Violent
- (10) Drunk / High
- (11) Other
- (12) Unknown

SCAR / MARK:

- (01) Head
- (02) Neck
- (03) Hand (rt)
- (04) Hand (lft)
- (05) Arm (rt)
- (06) Arm (lft)
- (07) Body
- (08) Leg (rt)
- (09) Leg (lft)
- (10) Other
- (11) None
- (12) Unknown

TATTOO:

- (1) Designs
- (2) Initials
- (3) Names
- (4) Pictures
- (5) Words
- (6) Numbers
- (7) Insignia
- (8) None
- (9) Unknown

HAIR LENGTH:

- (1) Long
- (2) Medium
- (3) Short
- (4) Bald(ing)
- (5) Other
- (6) Unknown

BUILD:

- (1) Light
- (2) Medium
- (3) Heavy
- (4) Muscular
- (5) Unknown

EYE COLOR:

- (1) Blue
- (2) Brown
- (3) Grey
- (4) Green
- (5) Hazel
- (6) Other
- (7) Unknown

CLOTHING DESCRIPTION

HAT \_\_\_\_\_  
COAT \_\_\_\_\_  
SHIRT \_\_\_\_\_  
PANTS/DRESS \_\_\_\_\_  
SHOES \_\_\_\_\_

TATTOO LOC:

- (01) Arm (lft)
- (02) Arm (rt)
- (03) Leg (lft)
- (04) Leg (rt)
- (05) Hand (lft)
- (06) Hand (rt)
- (07) Face
- (08) Neck
- (09) Finger(s)
- (10) Chest
- (11) Back

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**NARRATIVE**

DVR UNIT 18C446 ACTIVE DURING CONTACT. REPORT CONTAINS JUVENILE INFORMATION.  
PERSON REPORTING WHITE, A COUNSELOR AT THIS FACILITY, ADVISED THAT CONTACT JUVENILE, A PATIENT AT THIS FACILITY, IS ON VIDEO REMOVING HER CELL PHONE FROM HER PURSE WITHOUT PERMISSION.  
CONTACT JUVENILE DISPLAYED DISRUPTIVE AND DISOBEDIENT BEHAVIOR WHEN QUESTIONED BY STAFF AS TO THE LOCATION OF THE CELL PHONE, AFTER OFFICERS ADVISED SHE COULD BE CHARGED WITH FELONY THEFT AND TRANSPORTED TO JUVENILE INTAKE, CONTACT JUVENILE RELEASED THE PHONE TO FACILITY STAFF.

NO FURTHER POLICE INVOLVEMENT WAS REQUESTED BY FACILITY STAFF.

JUVENILE INFORMATION  
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ADDITIONAL HOMICIDE CIRCUMSTANCES

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> (A) Criminal attacked police officer, that officer killed criminal     | <input type="checkbox"/> (C) Criminal attacked a civilian           | <input type="checkbox"/> (F) Criminal resisted arrest                     |
| <input type="checkbox"/> (B) Criminal attacked police officer, criminal killed by other officer | <input type="checkbox"/> (D) Criminal attempted flight from a crime | <input type="checkbox"/> (G) Unable to determine / not enough information |
| <input type="checkbox"/> (E) Criminal killed in commission of a crime                           |   |   |

RELATED CASE NUMBER(S)

CAR JACKING?  YES  NO      DRIVE-BY?  YES  NO      GANG RELATED?  YES  NO

**HATE/BIAS RELATIONSHIP:**  (88) None     YES, SEE BELOW

RACIAL (Anti-)

- (11) White
- (12) Black
- (13) American Indian / Alaskan Native
- (14) Asian / Pacific Islander
- (15) Multi-Racial Group

RELIGIOUS (Anti-)

- (21) Jewish
- (22) Catholic
- (23) Protestant
- (24) Islamic (Muslim)
- (25) Other Religion
- (26) Multi-Religious Group
- (27) Atheist/Agnostic

ETHNICITY / NATIONAL ORIGIN (Anti-)

- (32) Hispanic
- (33) Other Ethnicity

DISABILITY (Anti-)

- (51) Physical Disability
- (52) Mental Disability

SEXUAL (Anti-)

- (41) Male Homosexual (Gay)
- (42) Female Homosexual (Lesbian)
- (43) Homosexual (Gay and Lesbian)
- (44) Heterosexual
- (45) Bisexual