Incident # 23-00072			Bono Police Department										R	eport D	ate _	02/	09/23					
Page 1 of 2					Incident Report R									Report Time _			19 PM					
Statu			Exce	ption	on Clearance Date Reporting Officer										ORI/Agency							
۸ - ۱				•			Applicable)				1096 Kennedy, Jordo)16070	00			
Act	iive		Assic	ned (Officer		7 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					Entere			roving Office							
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			Assis	ting C	Officers									•								
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	mplainar	nt	Т											I					lo	1.01.1		
SSN/ID/TIN Title ** MASKED **					Name DOB Kimbrough, Yazevnna Keshunna DOS/16/1996									∖ge ≎e	Sex		ent Status nknown					
				Ethni		rougn, 1		nunna						Email		26	'					
Race Black / African American				Ethnic Unkr	nown			ST) SKED **					LIIIali									
Hom	Home Phone				ork Pho	ne		Other Phone Person					onal Cell			Work Cell						
110.0	N:4:	1 1 ^	l'aa		D = = T:				Innered in De				(670)7	776-6149								
Yes	Citizen S	Legal A	lien		Дос Тур	De			Immig Do	C #					Nationality							
	e Address		oro ^	D 70	101										Employer							
1107 Cobb ST, Jonesboro, AR 72401 Dacus Rtc Work Address Occupation									_													
	Church	ST,Bon	o, AR	724	16										Occupation							
Offe	enses																_					
	ent Location Church S		. AD	7044	2						Zone											
	st Possibl			ime		atest Possi	ible Date	Тті	me													
	02/08/20			 15:00		02/08		1.	15:00													
#	Statute/0	Code	Des	scripti	on								Fel/I	Misd	Att/Comp	Loc	Bias		Wpn	CATypes		
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MO																	Method n/a	Of Entr	У	# Prems		
Locat	tion Types	<u> </u>	13 Hwa	ıy/Road	I/Alley	37 Abando	ned/Condemr	ned	48 Industrial	Site		Bia	s Motiva	ation (Codes		L					
14 Hotel/Motel 15 Jail/Prison 18 Bar/Night Club 19 Commercial/Off Bldg 10 Construction Site 10 Rental Storage 11 Air Bus/Train Terminal 10 Bar/Night Club 10 Liquor Store 11 Parking Lot/Garage 12 Parking Lot/Garage 13 Parking Lot/Garage 14 Auto Dealership 15 Jail/Prison 16 Lake/Waterway 17 Cluber 18 Parking Lot/Garage 19 Rental Storage 19 Rental Storage 19 Residence/Home 20 Residence/Home 21 Restaurant 24 Camp/Campground 24 Daycare Facility						49 Military Installation 50 Park/Playground 51 Rest Area 51 School - 43 Lesbian, Ga or Transgender 23 Protestant Group (LGBT) 44 Heterosexue 45 Riseawel 45 Riseawel 46 Riseawel							gender, I GBT) osexual ual Disability Il Disabil	Mixed								
09 D 10 Fi 11 G	rug Str/Dr O eld/Woods ovt/Public B rocery/Supe	ff/Hosp ldg	23 Serv 24 Spe 25 Unk	cialty S	tore	Modal Terr 46 Farm Fa 47 Gamblir	acility	ck	55 Shopping 56 Tribal Lai 57 Commun 58 Cyberspa	nds ity Cer	nter	Ot 21	Native Hacifi Jewish Catholic					71 Trans 72 Gende 88 None 99 Unkno	er Non-C	Conforming		
	ected Of U None	Jsing	G Criminal Activity Types B Buying/Receiving C Cultivating/Manuf. P Possessing/Concealing O Operating/Promot D Distributing/Selling T Transport/Import/ E Exploiting Children U Using/Consuming A Simple/Gross Neglect I Intentional Abuse F Organized Abuse S Sexual Animal At						ting/Assisting Fransmit L & Torment		Weapon Type(s) 11 Firearm (Auto) 12 Handgun (Auto) 13 Rifle (Auto) 14 Shotgun (Auto) 15 Other Firearm 20 Knife/Cutting Inst 30 Blunt Object 35 Motor Vehicle 40 Personal Weapor 50 Poison 60 Explosives						65 Fire/Incendiary Device 70 Drugs/Narc./Sleeping Pills 85 Asphyxiation 90 Other 95 Unknown 99 None					

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Incident # 23-00072

Bono Police Department

Incident Report

Report Date _

02/09/23

Page	2 of 2	Incident Report								Report Time			12:19 PM	
Victim #1 ✓ Is Complainant Event #s Related 1														
SSN/ID/TIN ** MASKED	**	Title		ovene l	K ool	hunna			DC	DB 05/16/1996	Age 26	Se	ex F	Resident Status Unknown
			Kimbrough, Yazı		nunna			_		20		<u>. </u>		
	African	Ethn	•	DL (#, ST)						Email				
Americ	an	Unk	known	** MASKED **										
Home Phone		l M	/ork Phone	Other Phone				Personal Cell			Work Cell			
								(870)776-6149						
US Citizen Legal Alien Yes			Doc Type			Immig Doc#				Nationality				
Home Address 1107 Cobb ST			Employe Dacus											
Work Address 211 Church		R 72	416											
Victim Type	Injury T	ype	Aggravated Ass	sault/Hor	t/Homicide Circumstances Rela					ationship To Suspect				
Individual	None,		None					N/A						
Justifiable Hon	Taken to: (Hospital Name)													
			None											
Injury Descript	on													

Suspe	CL # I													
SSN/ID/T	IN		Title	Name ******* INDIVIDUAL INFORMATION MASKED ******						DOB			Sex M	Resident Status Unknown
Race W	hite		Ethn Unk	icity	DL (#, ST)			'	Email					
Home Phone			V	Work Phone		Other Phone		Personal Cell		,	Work Cell			
US Citize Yes	JS Citizen Legal Alien Yes		n	Doc Type		Immig Doc#			Nationality					
Home Ad	dress									Employer				
Work Add	dress									Occupation				
Height	Weigl	ht Ey	es	Build		AKA								

Narrative & Statements

Narrative - Kennedy, Jordon Lee - 2/9/2023 12:28:10 PM (Initial)

On Thursday February 9, 2023 I was contacted by Yazenna Kimbrough in reference to an assault that had already occurred. When I arrived on scene I made contact with Kimbrough and she advised me that a juvenile client had punched her in the eye the day prior. I advised Kimbrough of the affidavit process.

Jordon Kennedy 524

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