

FORREST CITY POLICE DEPARTMENT

225 N. ROSSER ST.
FORREST CITY, AR. 72335

Incident # **2310010001**

Beat	Rpt Dist	Type	Seq
	1	Criminal Report	1
Attempt	Occurred	Date	Time
<input type="checkbox"/>	On or From	10/01/2023	00:19
<input type="checkbox"/>	To	10/01/2023	Sun
<input type="checkbox"/>	Reported	10/01/2023	00:19
			Sun

Crime / Incident (Primary, Secondary, Tertiary)
5-13-203 BATTERY 3RD DEGREE

Location of Incident **1521 ALBERT ST, FORREST CITY, AR**
Cross Street **1601 NEWCASTLE**

County
ST FRA

Dispo	"V" = Victim	"RP" = Reporting Party	"W" = Witness	"S" = Suspect	"O" = Other
V	Last, First, Middle (Firm if Business)				Home Phone
	Race	Sex	Age	HT	WT
		M			
Address		DOB	DL Number	State	Work Phone
1521 ALBERT ST				AR	(870) 633-3200
City, State, Zip Code		SSN	Local ID #	State #	FBI #
FORREST CITY AR 72335					
	Last, First, Middle (Firm if Business)				Home Phone
	Race	Sex	Age	HT	WT
		M			
Address		DOB	DL Number	State	Work Phone
1521 ALBERT ST				AR	(870) 633-3200
City, State, Zip Code		SSN	Local ID #	State #	FBI #
FORREST CITY AR 72335					
	Last, First, Middle (Firm if Business)				Home Phone
	Race	Sex	Age	HT	WT
Address		DOB	DL Number	State	Work Phone
City, State, Zip Code		SSN	Local ID #	State #	FBI #
	Last, First, Middle (Firm if Business)				Home Phone
	Race	Sex	Age	HT	WT
Address		DOB	DL Number	State	Work Phone
City, State, Zip Code		SSN	Local ID #	State #	FBI #

Synopsis

SOLVABILITY	N	Continuation Attached <input type="checkbox"/>	Property List Attached <input type="checkbox"/>	Property Damage \$ \$0.00
	N	UCR 04E	Press Release <input type="checkbox"/>	Domestic Violence Case <input type="checkbox"/>
	N	Gang Related N	Hate Crime <input type="checkbox"/>	Victim Senior Citizen <input type="checkbox"/>
	N	Pursuit <input type="checkbox"/>	Force Used <input type="checkbox"/>	Child Abuse <input type="checkbox"/>
	N	Solvability Points 0	County Code ST FRA	Disposition SUSP
	N	Connecting Case #		
	N	Report Complete/Ready for Review <input checked="" type="checkbox"/>	CAD/CFS Event # 2310010001	
	N	Assigned To _____ Date _____		

Officer ID **RICE, JAMES** 567 Reviewed By **Lt. Virginia Edwards** Approved **YES** Date **10/01/2023**



**FORREST CITY
POLICE DEPARTMENT**

Crime / Incident (Primary)		Narrative		Incident #
5-13-203 BATTERY 3RD DEGREE		Attempt	Type	2310010001
		<input type="checkbox"/>		Criminal Report
				Seq 1

On October 1, 2023, at approximately 12:19 A.M., I Officer Rice was dispatched to Forrest City Medical Center for a Battery 3rd report. Upon arrival I made contact with Mr. [REDACTED] (complaint/victim). [REDACTED] is doing the report on Mr. [REDACTED] (suspect).

Mr. [REDACTED] explained that he was lying in bed at Woodridge Juvenile facility when he was attacked by Mr. [REDACTED]. Mr. [REDACTED] explained that Mr. [REDACTED] got out of his bed and walked over to his bed and hit him in the eye with a closed fist.

Mr. [REDACTED] was then escorted to Forrest City Medical Center for examination of his eye because it was swelled closed. Forrest City Medical Center explained that Mr. [REDACTED] has a fractured left lamina papyracea.

Mr. [REDACTED] explained that there was no past issue other than Mr. [REDACTED] just being a bully. Mr. [REDACTED] explained that he did try to defend himself but he couldn't because of Mr. [REDACTED] size advantage.

I Officer Rice made contact with Woodridge facility nurses to make contact with a Supervisor to get information in regards to someone signing an affidavit for Mr. [REDACTED]. The facility explained that they will make contact with Mr. [REDACTED] mother to sign an affidavit to press charges.

Officer ID	RICE, JAMES	567	Reviewed By	Lt. Virginia Edwards	Approved	YES	Date	10/01/2023
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