

Lexington Police Department
DATE 08/20/2021
TIME 8:43:35

LEXINGTON POLICE DEPARTMENT
INCIDENT REPORT

PAGE 1
PL1190
PWADE

INCIDENT #: 2021-00036103 ORI #: LFUCG PD INCIDENT TYPE: 115 P Burglary

LOCATION . . . : 201 FOREST PARK RD VENUE: Lexington
PHONE NUMBER :
NATURE OF CALL: JH/ S2 COMPL AT HQ'S RE: B&E RPT

CALL : 03/08/2021 18:30:49 Monday
DISPATCH . . : 03/08/2021 18:32:12
ARRIVE 1 . . . : 03/08/2021 18:32:12
CLEAR : 03/09/2021 3:09:07

AREA . . : 1-West SECTION : BEAT 1A BEAT: 1-1A
QUADRANT: DISTRICT: GRID:

UNIT 1 #: 221C ID # 1: MILLER, DAWN, L, ID # 2:
UNIT 2 #: ID # 3: ID # 4:

RECEIVED ORI/ID : LFUCG PD HARRIS, JOHNESIA, ,
DISPATCH ORI/ID : LFUCG PD COX, JUDITH, ,
DISPATCH SHIFT : 0700-1500
SOURCE : Telephone REPORT REQUIRED: YES MUTUAL AID:
DISPOSITION . . : 17 PRIORITY : 4 CLEARED BY: BEAUREGARD

ORIGINAL INFORMATION:

LOCATION : 201 FOREST PARK RD VENUE: Lexington
INCD TYPE: 115 P Burglary PRIORITY: 4

STATUS/DISPOSITIONS:

DISPOSITION: UNIT: DATE: TIME: ID # 1: / ID # 2:
17 221C 03/09/2021 3:09:07 MILLER, DAWN, L,

ADDITIONAL INFORMATION:

YES

RADIO LOG:

UNIT:	TYPE:	STATUS:	DISPATCH:	ARRIVE:	CLEAR:	ID # 1:	ID # 2:
#####	SGT	Chg Asgnmt		18:32:12			
221C	1MAN	AssgnUnit	18:32:38			MILLER, DAWN, L,	
221C	1MAN	Dispatch	18:32:38			MILLER, DAWN, L,	
221C	1MAN	En Route	18:32:38			MILLER, DAWN, L,	
221C	1MAN	Secd Loc	18:32:43			MILLER, DAWN, L,	
	SEC. LOC.: RT HQ						
221C	1MAN	Arrive		18:40:10		MILLER, DAWN, L,	
221C	1MAN	Secd Loc		18:40:11		MILLER, DAWN, L,	
	SEC. LOC.: HQ						
221C	1MAN	Secd Loc		19:20:10		MILLER, DAWN, L,	
	SEC. LOC.: RT ORIG						
#####		Hazards		19:22:43			
221C	1MAN	Rpt Writng		21:09:40		MILLER, DAWN, L,	
	SEC. LOC.: RCC						
#####		Hazards		1:15:56			
221C	1MAN	Check-In		1:52:15		MILLER, DAWN, L,	
	SEC. LOC.: RCC						

Lexington Police Department
DATE 08/20/2021
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LEXINGTON POLICE DEPARTMENT
INCIDENT REPORT

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Hazards 2:16:43
221C 1MAN Clear Unit 3:09:07 MILLER, DAWN, L,

DOCUMENTS:

Dispatch Narrative

Information on the units assigned to the call follows.

Unit: 221C Radio: Ofcr 1: 55457 Ofcr 2:

DSP: 03/08/21 18:32 ARV: 03/08/21 18:40 CLR: 03/09/21 03:09

221C RT ORIG/ ALSO NTFD UK PD REF THIS 19:20:15

221C ADV REL CR 21-35132 19:21:42

CAD System Narrative

Dispatcher has over-ridden priority processing

NAMES:

Caller :



Lexington Police Department

General Investigative Report

Case: 2021-00036103

Victim: COLTON WYATT FRASIER

Officer: DAWN L MILLER [55457]

Location: 2XX FOREST PARK RD

Beat: 11A

Date/Time Occurred: 03/06/2021 @ 22:00 -- 03/07/2021 @ 02:26

Date/Time Reported: 03/08/2021 @ 18:32

Status: Cleared By Arrest [As Of: 08/20/2021]

OFFENSES

BURGLARY 1ST DEGREE
 ASSAULT-4TH MINOR INJURY
 WANTON ENDANGERMENT-1ST DEGREE

KRS/VIOLATIONS

22060 511.020
 00796 508.030
 13201 508.060

VICTIM LIST

	NAME	DOB	SEX	RACE	HAIR	EYES	HEIGHT	WEIGHT
1	COLTON WYATT FRASIER	xx/xx/2000	XXXX	XXXX	BRO	GRN	5.09	145
INJURY:	EXTENT:	HOSPITAL:						
	TREATMENT:	TRANSPORT:						
2	JACKSON GARRETT THIELMEIER	xx/xx/2000	XXXX	XXXX	BRO	BLU	5.1	165
INJURY:	EXTENT:	HOSPITAL:						
	TREATMENT:	TRANSPORT:						
3	DANIEL FAUD ZOELLER	xx/xx/2001	XXXX	XXXX	XXX	BRO	5.1	150
INJURY:	EXTENT:	HOSPITAL:						
	TREATMENT:	TRANSPORT:						
4	TREVOR DONALD WILSON	xx/xx/2001	XXXX	XXXX	BRO	BLU	6	135
INJURY:	EXTENT:	HOSPITAL:						
	TREATMENT:	TRANSPORT:						
5	OLIVIA KATHRYN TUTT	xx/xx/2001	XXXX	XXXX	BRO	BLU	5.1	120
INJURY:	EXTENT:	HOSPITAL:						
	TREATMENT:	TRANSPORT:						
6	BURKE TY PATRICK	xx/xx/2001	XXXX	XXXX	BLN	BLU	5.11	170
INJURY:	EXTENT:	HOSPITAL:						
	TREATMENT:	TRANSPORT:						
7	AMELIA CAROLINE PASSIAS	xx/xx/2001	XXXX	XXXX	BRO	GRN	5.04	120
INJURY:	EXTENT:	HOSPITAL:						
	TREATMENT:	TRANSPORT:						
8	JAMES OLIVER KING IV	xx/xx/2001	XXXX	XXXX	BRO	BRO	5.11	135
INJURY:	EXTENT:	HOSPITAL:						
	TREATMENT:	TRANSPORT:						
9	LAUREN DANIELLE JACKSON	xx/xx/2002	XXXX	XXXX	BLK	UK	5.05	135
INJURY:	EXTENT:	HOSPITAL:						
	TREATMENT:	TRANSPORT:						
10	BRANDON J ANDERSON	xx/xx/2001	XXXX	XXXX	BRO	HAZ	6	195
INJURY:	EXTENT:	HOSPITAL:						
	TREATMENT:	TRANSPORT:						

NARRATIVE

The victims stated the suspects, with the intent to commit a crime, knowingly entered or remained unlawfully in a building, and were armed



Lexington Police Department

General Investigative Report

Case: 2021-00036103

Victim: COLTON WYATT FRASIER

with deadly weapons and caused physical injury to any person who is not a participant in the crime. The victims stated, under circumstances manifesting extreme indifference to the value of human life, wantonly engaged in conduct which created a substantial danger of death or serious physical injury to another person. The victims stated the suspected intentionally or wantonly caused physical injury to another person.

KSP Doc ID#: C4D97FD2-B17E-41AF-A704-6F056018DF60 08/20/2021 11:29:49
KSP Control08 ID#: 03193092

VETERAN

JUVENILE OFFENDER

SERVING WARRANT
 SERVING SUMMONS

COMMONWEALTH OF KENTUCKY UNIFORM CITATION

KSP 206 (REV 2/1/16)

COURT

OFFENDER / VIOLATOR	AGENCY LEXINGTON POLICE DEPARTMENT ORI: KY 0340200									
	NAME (L-F-M) ADAMS, REUBEN JELANI SKIP A SPACE BETWEEN NAMES									
	ALIAS _____ HOME PHONE _____									
	ADDRESS (RFD/STREET/APT. NO. ETC.) _____									
VEHICLE	KENTUCKY RESIDENT STATUS 2021 F. <input checked="" type="checkbox"/> FULL TIME P. <input type="checkbox"/> PART TIME N. <input type="checkbox"/> NON RESIDENT									
	MARRIAGE STATUS PAYETTE CIRCUIT CLERK DEPUTY									
	VICTIM'S RELATIONSHIP TO OFFENDER _____									
	ETHNIC ORIGIN _____									
DATE / TIME	VEH. MAKE N/A VEH. TYPE 1A VEH. YEAR _____ COLOR TOP/BOTTOM									
	REG. STATE _____ REG. YEAR _____ REGISTRATION NO. _____ MPH _____ IN MPH ZONE _____ VOL. KEY _____									
	VIOLATION DATE 03 07 21 VIOLATION TIME 0200 EXACT LOCATION OF VIOLATION / ARREST 11A									
	DATE OF ARREST _____ TIME OF ARREST _____ MILES 1 DIRECTION N CITY LEXINGTON COUNTY OF VIOLATION 034 SECTOR 1									
CHARGE(S)	VIOLATION CODE 22060 ASCF 511.020 STATUTE / ORD. 1 CHARGES 1 # 1 PLEA _____ FINDING _____ FINAL VIOLATION CODE _____ DISP. CODE _____ FINE _____ COSTS _____ FEE _____ JAIL / PRISON _____ PROB. TIME _____									
	COURT DATE 08 20 21 COURT TIME 1:00 PM PAYABLE <input type="checkbox"/> COURT <input checked="" type="checkbox"/> COURT LOCATION 150 N LIMESTONE COURT CASE NO. _____ DISP. DATE _____ TRIAL <input type="checkbox"/> B <input type="checkbox"/> J <input type="checkbox"/> N CLERKS INITIALS _____									
	POST-ARREST COMPLAINT Burglary 1st									
	SUMMONS SERVED AS CASE DETECTIVE E WARRANT # E03410004030623									
CDL	CDL LICENSE <input type="checkbox"/> No <input type="checkbox"/> Yes PLACARDED HAZARDOUS VEHICLE <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes									
	COMMERCIAL VEHICLE <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes CDL CLASS <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C									
CASE	NAME OF WITNESS _____ ADDRESS _____ CITY/STATE _____									
	NAME OF WITNESS _____ ADDRESS _____									
	CASE NO. 2021-036103									
	CARRIED FOR UCR BY CONTRIBUTOR: <input checked="" type="checkbox"/> OTHER AGENCY: <input type="checkbox"/> SPECIFY _____									
OFFICER'S SIGNATURE X [Signature] BADGE / I.D. NUMBER 12216 ASSIGNMENT 17411										
YEAR 21 CONTROL NUMBER P174108 TYPE 04										

VETERAN

JUVENILE OFFENDER

SERVING WARRANT
 SERVING SUMMONS

COMMONWEALTH OF KENTUCKY UNIFORM CITATION

KSP 206 (REV 2/1/16)

COURT

OFFENDER / VIOLATOR	AGENCY LEXINGTON POLICE DEPARTMENT			ORI: KY 0340200		
	NAME (L-F-M) SKIP A SPACE BETWEEN NAMES MCLAIN, ROBERT JUTAHN			ATTN: <input type="checkbox"/> HOME PHONE _____		
	ALIAS _____			EMERGENCY PHONE _____		
	ADDRESS (RD/STREET/APT NO. ETC.) _____			KENTUCKY RESIDENT STATUS F. <input checked="" type="checkbox"/> FULL TIME P. <input type="checkbox"/> PART TIME N. <input type="checkbox"/> NON RESIDENT		
	CITY _____		STATE: _____		ZIP _____	
	MARRITAL STATUS FILED		VICTIM'S RELATIONSHIP TO OFFENDER TEST VINCENT RIGGS, CLERK			
ID TYPE/STATE		LD. NUMBER		S.S. NUMBER		
DATE OF BIRTH		SEX		RACE		
<input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE		<input type="checkbox"/> WHITE <input checked="" type="checkbox"/> BLACK		<input type="checkbox"/> AM. INDIAN OR ALASKAN <input type="checkbox"/> ASIAN		
PLACE OF EMPLOYMENT / OCCUPATION			CITY STATE			
HEIGHT 510		WEIGHT 195		HAIR COLOR BLK		
EYE COLOR BRN		ALCOHOL/DRUG INVOLVEMENT (SPECIFY) <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> UNK				

VEHICLE	VEH. MAKE N/A		VEH. TYPE A		VEH. YEAR		COLOR TOP/BOTTOM	
	REG. STATE		REG. YEAR		REGISTRATION NO.		VEHICLE IDENTIFIERS	
MPH		IN MPH ZONE		VOL. KEY				

DATE / TIME	VIOLATION DATE 03 07 21		VIOLATION TIME 0200		EXACT LOCATION OF VIOLATION / ARREST 201 FOREST PARK DR				B.A. RESULTS	
	DATE OF ARREST		TIME OF ARREST		MILES 1 N		DIRECTION N		CITY LEXINGTON	
COUNTY OF VIOLATION 034			SECTOR 1							

VIOLATION CODE	ASCF	STATUTE / ORD.	CHARGES	#	PLEA	FIND-ING	FINAL VIOLATION CODE	DISPN. CODE	FINE	COSTS	FEE	JAIL / PRISON	PROB. TIME
22060	/	511.020	(D)	1									
				2									
				3									
				4									

COURT	COURT DATE 08 20 21		COURT TIME <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM		PAYABLE <input type="checkbox"/> COURT		COURT LOCATION 150 N Limestone		COURT CASE NO.		DISPN. DATE		TRIAL <input type="checkbox"/> B <input type="checkbox"/> J <input type="checkbox"/> N		CLERKS INITIALS	
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POST-ARREST COMPLAINT	POST-ARREST COMPLAINT (D) BURGLARY 1ST															
	SUMMONS SERVED								WARRANT #							
	AS CASE DETECTIVE								E-03410004030665							
	LINK/URL SERVED DWG PA-NR C77:USA															

CDL	CDL LICENSE <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				PLACARDED HAZARDOUS VEHICLE <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				YEAR 21
	COMMERCIAL VEHICLE <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				CDL CLASS <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C				

CASE	NAME OF WITNESS _____ ADDRESS _____ CITY/STATE _____				CONTROL NUMBER P174109	YEAR 21		
	NAME OF WITNESS _____ ADDRESS _____							
	CASE NO. 2021-036103		CASE NO. _____					
	CARRIED FOR UCR BY CONTRIBUTOR: <input checked="" type="checkbox"/>		<input type="checkbox"/> IN-CAR VIDEO <input type="checkbox"/> FINGER PRINTS <input type="checkbox"/> PHOTOS <input type="checkbox"/> EVIDENCE HELD Y					
OFFICER'S SIGNATURE X [Signature]				BADGE / I.D. NUMBER 52216		ASSIGNMENT RTU		TYPE A

SERVING WARRANT
 SERVING SUMMONS

COMMONWEALTH OF KENTUCKY
UNIFORM CITATION

KSP 206 (REV 2/1/16)

COURT

OFFENDER / VIOLATOR	AGENCY LEXINGTON POLICE DEPARTMENT		ORI: KY 03A0200		
	NAME (L-F-M) SKIP A SPACE BETWEEN NAMES PHILIPS, ANDREW JACKSON		ATTN: <input type="checkbox"/>	HOME PHONE _____	
	ALIAS _____		EMERGENCY PHONE _____		
	ADDRESS (RFD/STREET/APT. NO., ETC.) _____		KENTUCKY RESIDENT STATUS <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME <input type="checkbox"/> NON RESIDENT		
VEHICLE	CITY _____ STATE _____ ZIP _____		MARITAL STATUS _____		
	LD TYPE/STATE I.D. NUMBER _____ S.S. NUMBER _____		VICTIM'S RELATIONSHIP TO OFFENDER FIXED		
	DATE OF BIRTH _____ SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	RACE <input type="checkbox"/> WHITE <input checked="" type="checkbox"/> BLACK <input type="checkbox"/> AM. INDIAN OR ALASKAN <input type="checkbox"/> ASIAN		ETHNIC ORIGIN AUG 19 2021	
	PLACE OF EMPLOYMENT / OCCUPATION _____ CITY _____ STATE _____		HEIGHT 511 WEIGHT 170 HAIR COLOR BK EYE COLOR BLU		
DATE / TIME	VEH. MAKE N VEH. TYPE TR		ALCOHOL/DRUG INVOLVEMENT (SPECIFY) <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> UNK		
	REG. STATE _____ REG. YEAR _____	REGISTRATION NO. _____	VEHICLE IDENTIFIERS _____	MPH _____ IN MPH ZONE _____ VOL. KEY _____	
	VIOLATION DATE 03/07/21 VIOLATION TIME 0200	EXACT LOCATION OF VIOLATION / ARREST 201 FOREST PARK DR		B.A. RESULTS _____	
	DATE OF ARREST _____ TIME OF ARREST _____	MILES 7 DIRECTION N	CITY LEXINGTON	COUNTY OF VIOLATION 03A SECTOR 1	
CHARGE(S)	VIOLATION CODE 22060 ASCF /	STATUTE / ORD. 511.020	CHARGES ED	# 1	
	PLEA _____ FINDING _____ FINAL VIOLATION CODE _____ DISP. CODE _____ FINE _____ COSTS _____ FEE _____ JAIL / PRISON _____ PROB. TIME _____				
	COURT DATE 08/20/21 COURT TIME <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM PAYABLE <input type="checkbox"/> COURT <input checked="" type="checkbox"/>				
	COURT LOCATION 150 N LIMESTONE COURT CASE NO. _____ DISP. DATE _____ TRIAL <input type="checkbox"/> B <input type="checkbox"/> J <input type="checkbox"/> N CLERKS INITIALS _____				
POST-ARREST COMPLAINT	POST-ARREST COMPLAINT BINGHAM 1ST				
	SUMMONS SERVED AS CASE DETECTIVE				
	EMERGENCY # E-03A-1000 + 030667				
	LINK/MFC: SERVED BWC P-A-NR LET: USA				
CDL	GDL LICENSE <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		PLACARDED HAZARDOUS VEHICLE <input type="checkbox"/> No <input type="checkbox"/> Yes		
	COMMERCIAL VEHICLE <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		CDL CLASS <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C		
CASE	NAME OF WITNESS _____ ADDRESS _____ CITY/STATE _____		NAME OF WITNESS _____ ADDRESS _____		
	CASE NO. 2021-036103	1	2	3	
	CARRIED FOR UCR BY CONTRIBUTOR: <input checked="" type="checkbox"/>		<input type="checkbox"/> IN-CAR VIDEO <input type="checkbox"/> FINGER PRINTS <input type="checkbox"/> PHOTOS <input type="checkbox"/> EVIDENCE HELD Y		
	OFFICER'S SIGNATURE X [Signature]		BADGE / I.D. NUMBER 153516	ASSIGNMENT RHV	

YEAR **21**
CONTROL NUMBER **P174110**
TYPE **04**

VETERAN

JUVENILE OFFENDER

SERVING WARRANT
 SERVING SUMMONS

COMMONWEALTH OF KENTUCKY UNIFORM CITATION

KSP 206 (REV 2/1/16)

COURT

OFFENDER / VIOLATOR

VEHICLE

DATE / TIME

CHARGE(S)

COURT

POST-ARREST COMPLAINT

CDL

CASE

AGENCY: LEXINGTON POLICE DEPARTMENT ORI: KY 0340200

NAME (L-F-M): SANDERS, EARNEST IV SKIP A SPACE BETWEEN NAMES
ATTN: HOME PHONE: _____

ALIAS: _____ EMERGENCY PHONE: _____

ADDRESS (RFD/STREET/APT NO. ETC.): _____
CITY: _____ STATE: _____ ZIP: _____

IDENTIFICATION: ID TYPE/PART: _____ I.D. NUMBER: _____ S.S. NUMBER: _____

DATE OF BIRTH: _____ SEX: MALE FEMALE RACE: WHITE BLACK AM. INDIAN OR ALASKAN ASIAN

PLACE OF EMPLOYMENT / OCCUPATION: _____ CITY: _____ STATE: _____

VEH. MAKE: N/A VEH. TYPE: A VEH. YEAR: _____ COLOR: _____ TOP/BOTTOM: _____

REG. STATE: _____ REG. YEAR: _____ REGISTRATION NO.: _____ VEHICLE IDENTIFIERS: _____ MPH: _____ IN MPH ZONE: _____ VOL. KEY: _____

VIOLATION DATE: 08 07 21 VIOLATION TIME: 0200 EXACT LOCATION OF VIOLATION / ARREST: 11A

DATE OF ARREST: _____ TIME OF ARREST: _____ MILES: 2 DIRECTION: N CITY: LEXINGTON COUNTY OF VIOLATION: 034 SECTOR: 1

VIOLATION CODE: 22060 ASCF: 1 STATUTE / ORD.: 511.020 CHARGES: D # 1

VIOLATION CODE	ASCF	STATUTE / ORD.	CHARGES	#	PLEA	FINDING	FINAL VIOLATION CODE	DISPN. CODE	FINE	COSTS	FEE	JAIL / PRISON	PROB. TIME
22060	1	511.020	D	1									
				2									
				3									
				4									

COURT DATE: 08 20 21 COURT TIME: 1:00 AM PM PAYABLE: COURT COURT LOCATION: 150 N Limestone COURT CASE NO.: _____ DISP. DATE: _____ TRIAL: B J N CLERKS INITIALS: _____

POST-ARREST COMPLAINT: D Burblan / 151

SUMMONS SERVED AS CASE DETECTIVE WARRANT # E03410004030686
LINK/NOTE: SERVED PWC P-A-NR LET:USA

CDL LICENSE: No Yes PLACARDED HAZARDOUS VEHICLE: No Yes
COMMERCIAL VEHICLE: No Yes CDL CLASS: A B C

NAME OF WITNESS: _____ ADDRESS: _____ CITY/STATE: _____
NAME OF WITNESS: _____ ADDRESS: _____

CASE NO. 1: 2021-056103 2: _____ 3: _____ 4: _____

CARRIED FOR UCR BY CONTRIBUTOR: IN-CAR VIDEO FINGER PRINTS EVIDENCE HELD PHOTOS PHOTOS

OFFICER'S SIGNATURE: X / [Signature] BADGE / I.D. NUMBER: 2214 ASSIGNMENT: RTU

YEAR: 21
CONTROL NUMBER: P174111
T/F: 04

SERVING WARRANT
 SERVING SUMMONS

COMMONWEALTH OF KENTUCKY
UNIFORM CITATION

KSP 206 (REV 2/11/16)

COURT

OFFENDER / VIOLATOR	AGENCY: LEXINGTON POLICE DEPARTMENT										ORI: KY 03A0200						
	NAME (L-F-M) SKIP A SPACE BETWEEN NAMES TJSDALE, DEVITO LYNICEN										ATTN: <input type="checkbox"/>		HOME PHONE _____				
	ALIASES _____												EMERGENCY PHONE _____				
	ADDRESS (RFD/STREET/APT. NO. ETC.) _____										KENTUCKY RESIDENT STATUS		F. <input type="checkbox"/> FULL TIME P. <input type="checkbox"/> PART TIME N. <input type="checkbox"/> NON RESIDENT				
VEHICLE	CIT. _____ STATE _____ ZIP: _____										MARITAL STATUS _____		VICTIM'S RELATIONSHIP <input checked="" type="checkbox"/> DEFENDER				
	DATE OF BIRTH _____ SEX <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE RACE <input type="checkbox"/> WHITE <input checked="" type="checkbox"/> BLACK <input type="checkbox"/> AM. INDIAN OR ALASKAN <input type="checkbox"/> ASIAN										ETHNIC ORIGIN FILED AUG 19 2021		BY EMMETT CIRCUIT CLERK DEPUTY				
	PLACE OF EMPLOYMENT / OCCUPATION _____ CITY _____ STATE _____										HEIGHT 601 WEIGHT 205 HAIR COLOR BLK EYE COLOR BLU		ALCOHOL/DRUG INVOLVEMENT (SPECIFY) <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> UNK				
	VEH. MAKE N/A VEH. TYPE N/A VEH. YEAR _____ COLOR TOP/BOTTOM _____										REG. STATE _____ REG. YEAR _____ REGISTRATION NO. _____		VEHICLE IDENTIFIERS _____ MPH _____ IN MPH ZONE _____ VOL. KEY _____				
DATE / TIME	VIOLATION DATE 03 07 21		VIOLATION TIME 0200		EXACT LOCATION OF VIOLATION / ARREST 291 FOREST PARK DR						B.A. RESULTS _____						
	DATE OF ARREST _____		TIME OF ARREST _____		MILES 2		DIRECTION N		CITY LEXINGTON		COUNTY OF VIOLATION 034 SECTOR 1						
CHARGE(S)	VIOLATION CODE	ASCF	STATUTE / ORD.	CHARGES	#	PLEA	FIND-ING	FINAL VIOLATION CODE	DISPN. CODE	FINE	COSTS	FEE	JAIL / PRISON	PROB. TIME			
	22060	/	511.020	D	1												
	13201	/	508.060	D	2												
					3												
COURT	COURT DATE 08 20 21		COURT TIME <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM		PAYABLE <input type="checkbox"/> COURT		COURT LOCATION 150 N Limestone				COURT CASE NO. _____		DISPN. DATE _____		TRIAL <input type="checkbox"/> B <input type="checkbox"/> J <input type="checkbox"/> N		CLERKS INITIALS _____
	POST-ARREST COMPLAINT (1) BURGLARY 1ST (2) WANTED ENDANGERMENT 1ST																
POST-ARREST COMPLAINT	SUMMONS SERVED AS CASE DETECTIVE										WARRANT #S						
											E03410004030690						
											E03410004030695						
CDL	CDL LICENSE <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				PLACARDED HAZARDOUS VEHICLE <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				COMMERCIAL VEHICLE <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				CDL CLASS <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C				
	NAME OF WITNESS _____ ADDRESS _____ CITY/STATE _____																
CASE	NAME OF WITNESS _____ ADDRESS _____																
	CASE NO. 2021-036103																
	CARRIED FOR UCR BY CONTRIBUTOR: <input checked="" type="checkbox"/>				OTHER AGENCY: <input type="checkbox"/> SPECIFY _____				<input type="checkbox"/> IN-CAR VIDEO <input type="checkbox"/> FINGER PRINTS <input type="checkbox"/> PHOTOS				EVIDENCE HELD Y				
	OFFICER'S SIGNATURE X [Signature]				BADGE / I.D. NUMBER 53312				ASSIGNMENT RHV				CONTROL NUMBER P174112				
TYPE 04																	

COMMONWEALTH OF KENTUCKY
UNIFORM CITATION

KSP 206 (REV 2/1/16)

COURT

- SERVING WARRANT
 SERVING SUMMONS

OFFENDER / VIOLATOR	AGENCY LEXINGTON POLICE DEPARTMENT						OR: KY 0349200					
	NAME (L-F-M) SKIP A SPACE BETWEEN NAMES WILLIAMS, JOEL DANDRE						ATTN: <input type="checkbox"/> HOME PHONE _____					
	ALIAS: _____						EMERGENCY PHONE: _____					
	ADDRESS (RFD/STREET/APT. NO. FTT.): _____						KENTUCKY RESIDENT STATUS F. <input type="checkbox"/> FULL TIME P. <input type="checkbox"/> PART TIME N. <input type="checkbox"/> NON RESIDENT					
VEHICLE	CITY _____		STATE: _____		ZIP: _____		MARRIAGE STATUS FILED		ATTEST: VINCENRIGGS, CLERK		VICTIM'S RELATIONSHIP TO OFFENDER AUG 19 2021	
	DATE OF BIRTH _____		SEX _____		RACE _____		ETHNIC ORIGIN _____		FAYETTE CIRCUIT CLERK		BY [Signature] DEPUTY	
	<input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE		<input type="checkbox"/> WHITE <input checked="" type="checkbox"/> BLACK		<input type="checkbox"/> AM. INDIAN OR ALASKAN <input type="checkbox"/> ASIAN		<input type="checkbox"/> HISPANIC <input type="checkbox"/> NON-HISPANIC					
	PLACE OF EMPLOYMENT / OCCUPATION _____						CITY _____		STATE _____		HEIGHT 601 WEIGHT 188 HAIR COLOR BLK EYE COLOR BRN	
DATE / TIME	VEH. MAKE N/A		VEH. TYPE 1A		VEH. YEAR _____		COLOR TOP/BOTTOM _____		ALCOHOL/DRUG INVOLVEMENT (SPECIFY) <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> UNK			
	REG. STATE _____		REG. YEAR _____		REGISTRATION NO. _____		VEHICLE IDENTIFIERS _____		MPH _____		IN MPH ZONE _____	
	VIOLATION DATE 03 07 21		VIOLATION TIME 0200		EXACT LOCATION OF VIOLATION / ARREST 11A				B.A. RESULTS _____			
	DATE OF ARREST _____		TIME OF ARREST _____		MILES I N		DIRECTION _____		CITY LEXINGTON		COUNTY OF VIOLATION 034	
CHARGE(S)	VIOLATION CODE 22060		ASC# -		STATUTE / ORD. 511.020		CHARGES D		# 1		PLEA _____	
COURT	COURT DATE 08 20 21		COURT TIME <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM		PAYABLE <input type="checkbox"/> COURT		COURT LOCATION 150 N Limestone		COURT CASE NO. _____		DISPN. DATE _____	
											TRIAL <input type="checkbox"/> B <input type="checkbox"/> J <input type="checkbox"/> N	
POST-ARREST COMPLAINT	POST-ARREST COMPLAINT Burglary 1st											
	SUMMONS SERVED AS CASE DETECTIVE						WARRANT # E03410004230712					
	LINK / VIZ: SERVED BWC - P-A-NR CZ7: USA											
CDL	CDL LICENSE <input type="checkbox"/> No <input type="checkbox"/> Yes				PLACARDED HAZARDOUS VEHICLE <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				YEAR 21			
	COMMERCIAL VEHICLE <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				CDL CLASS <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C				CONTROL NUMBER P174113			
CASE	NAME OF WITNESS _____						ADDRESS _____					
	NAME OF WITNESS _____						ADDRESS _____					
	CASE NO. 2021-036103		_____		_____		_____		_____		_____	
	CARRIED FOR UCR BY CONTRIBUTOR: <input checked="" type="checkbox"/>						<input type="checkbox"/> IN-CAR VIDEO		<input type="checkbox"/> FINGER PRINTS		EVIDENCE HELD Y	
OTHER AGENCY: <input type="checkbox"/> SPECIFY _____						<input type="checkbox"/> PHOTOS						
OFFICER'S SIGNATURE X [Signature]						BADGE / I.D. NUMBER 63316		ASSIGNMENT RHW				
								TYPE 04				