## **VOLUSIA COUNTY SHERIFF'S OFFICE**

	Juvenile     Hate Crime       Gang     Elderly Abuse / Exploitation										Agency Rep			<u>1</u> of	<u>5</u> Pages	
	Domestic Violence				-						Zone #	19000159		Telephone Handle		
	Reported: Day Date Time (mil.) Time Dispat					FL0640000       tched (mil.)       Time Arrived (mil.)				ompleted (mil.)	31 Nature c	1     Call? (T.H.C.)     2. No     2       lature of Call (Report Type)				
	Incident Type:	01-20-201 3. Misdemea	anor 5. C		Incident: Day	Da	0112 ite	_ Tir	me (mil.)	Day	DEAD	Dead F	<b>Person</b> Time (mi	il.)   Occuri	ed During:	
A	1. Felony 2. Traffic Felony Offense Typ	4. Traffic Misdeme			From Sunday	01	-20-2019	01 Descriptio		TO Sunda	y 01-2	20-2019	0109	D - Da N - Nig		N
DAT/	#1 9	77777					C		lissing Persor	n/All other no	on-crimes				C - Committ	ed C
ENT	#2 Incident Location (Stre			IDel				Jescriptic	City					Zip	A - Attempte C - Committ	
EVE	2040 OCEAN SH Business Name / Area		,		· · · [ ]	ug Relate		Alaah	-	OND BEACH				32176		
	OCEAN CREST I			# Prem. E		N/A 1. 2. 1	Yes		A 1. Yes 2. No 1	1. Yes 3. A		Arson-Inha 1. Occupie 2. Unoccu	ed 3. /	Abandoned 2	Arson-At 1. \ 2. N	'es
	01.1 02.7 03.1	cation Type ( Residence-S Apartment/C Residence/C Hotel/Motel	Single 05.C Condo 06.G Other 07.Li	onvenience Sto as Station quor Sales ar/Nightclub	10.Dep 11.Spe	ermarket t/Discount cialty Stor store/Ho	re	14.Com	/Financial Inst. mercial/Office Bl strial/Mfg.	dg. 18.Scho 19.Jail/P	ol/University Prison	21.Airport 22.Bus/Rail Te 23.Constructio 24.Other Struc	rminal n Site	25.Parking Lot/Ga 26.Highway/Road 27.Park/Woodland 28.Lake/Waterwa	way 30 Is/Field 88	9.Motor Vehicle 9.Other Mobile 8.Unknown 9.Other
	V/W Code V-Victim N-Nex	ct of Kin C	/ictim/Subject <sup>*</sup> ). N/A	4. Business	B. Busi	s/Phone <sup>·</sup> iness/Woi	• •	essage	P. Pager	Race W-White O	-Oriental/Asian	Sex M-Male	Resider 0. NA	nce Type 3. Florida	Residenc 0. N/A	e Status
ODES	W-Witness O-Oth R-Reporting Person	ier 2	. Juvenile 2. L.E. Officer 3. Adult	5. Governmen 6. Church 9. Other Extent of	H. Hon		N. N O. O	ext of Kin ther	S. School V. Vacation		-Unknown	F-Female U-Unknown			1. Full Ye 2. Par. Ye 3. Non-Re tionship to Of	ear esident
8	F-Firearm K-Knife/Cutting Inst	O-Other D t. H-Hands,		00.N/A c. 01.Guns	03.L hot 04.U	aceration nconsciou	us		oss. Internal Inju oss of Teeth	10.No Vi	ions/Bruises sible Injury	1. Yes 2. No		S-Spouse P-Parent	B-Sibling O-Other Far	Z-Other nily
	Offense Indicator	. V/W	Code #	02.Stabb V. Type	Nature of C	oss.Broke all (for Vic		08.Bu rent from		99.Other Name (Last/E	Serious Injury Business)		First)	C-Child	H-Co-Habita	(Middle)
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	Other Contact Info (Ti							Syno	psis of Involvem	ent						
VICTIN		ace	Sex	Date of Birth		Age	Ethnicity	VICT		Res. Status	Means of Attac	Extent of	Iniurv	Domestic Violen	ce Relatio	onship
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TNE T	Address (Street, Apt. 2040 OCEAN SH	IORE BLV					ORMOND BEACH FL				State FL	Zip Residence Phone 32176				
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## INCIDENT REPORT (CONT.)

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SUBJECT	ŊZ	Incide	nt Type					Foul Pl	Foul Play Missing Before?				ore?		Fingerprint	5	Ph	oto Avai	lable?		Dental R	ecord	
ິ	MISSING	1. Rur 2. Par	,		<ol> <li>Disast Victim</li> </ol>			Suspec	cted?			5			Available?						Available		
	Ν	4. Disa			7. Volunt Adult			1. Yes 2. No			1. Y 2. N	10		1	1. Yes 2. No			Yes No		I	1. Yes 2. No		1
		5. End	angered		8. Unkno	own		8. Unkr	nown		8. L	Jnknown											
		I, person; an	d this ac	nency has	mv perm	ission to	enter this	(Print	/	tatewide al	ert.					(Signature	) certify	that I h	ave rep	ported the	above pe	erson as	a missing
	1	**** BW						•															
	2 3	<b>O</b> n 01-	20-19	at 010	9 hours	Deput	v Arms	strona	resp	onded to	n 2040	) Oce	an Sho	ore Blv	vd (Ocear	n Crest I	Motel)	Ormo	ond P	Seach ir	n refere	nce to	an
Щ	4	attempt	ted su	icide co	mplaint	t. Upor	arriva	I Depu	ity A	rmstrong	g and I	Deput	y Cow	ger ob	served a	female	stand	ing ou	ıtside	the off	ice area	a of th	e Ocean
NARRATIVE	5 6													-	or somec tment co							-	
ARR	7	Cowge	r made	e entry i	into the	apartr	nent a	nd beg	an to	o clear tl	ne roo	ms lo	oking f	or a m	nale with	a gun. C	Deputy	Arms	trong	and D	eputy C	Sowge	r
Ž	8														chen the e up behi			roache	ed the	e living	room a	rea ar	nd
	9 10		su d W			ing gre	зеп ра	nis all(	Jav	vinie SII	ιτιαγιί	iy Ul			∍ uh neui								
		al Case atus:	Final Statu	Case s Codes:	1.Arrest/	Adult	2.Arrest/	Juv. 3	.Excep	otional/Adult	4.Exc	ceptional	l/Juv.	5.Closed	6.Unfound	ded		/ictim Ad	vocate	ΓТ	riad	SA	Referral
∐ ∐	Г	DCF Hotline	 							Date:		me:		FCIC	/ NCIC Entry	, Γ	 ] т.т. во	OLO				By:	
RA.		CAC nnecting Repo		e With:	ency			Additional						FCIC	/ NCIC Cand	cel	_						
<b>ADMINISTRATIVE</b>	00							Additional Attach		Narra	tive		7	ersons	Property	Veh.	/Tow She	eet	Other	Describe:			
DM		icer Reporting						Off	ic <b>l</b> ir Re	eporting - Si	gnature		h			ID. Nu	mber		Unit			Date	010
<		nstrong, Wil icer Reviewing		I (If Applica	ble)			Off		eviewing - S	ignature (	(If Applie	able			1674 ID. Nun	nber		1B31 Unit			1-20-2 Date	019
- 1																		I					

## **VOLUSIA COUNTY SHERIFF'S OFFICE**

## **NARRATIVE / SUPPLEMENT**

Page <u>3</u>	of _	5	_Pages
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F	Report Date	Report Time	Orig. Reported Date	Nature of Call (for Incident)	Agency Report Number	1.Original	
<	01-20-2019	0108	01-20-2019	DEAD	190001591	2.Supplement	1
	11 Doputios A	rmstrong and Co	waar approache	d the male and observed a black	chandoun with a brown handle laving on the floor nea	r hid left foot	

Deputies Armstrong and Cowger approached the male and observed a black handgun with a brown handle laying on the floor near hid left foot.
 Deputy Armstrong used his left foot to swipe the gun away from the victim approximately 2 feet from the body for officer safety reasons. Deputy
 Armstrong observed the victim to have a large amount of blood surrounding his head and he was not breathing.

14 15 Deputy Cowger cleared the rest of the apartment and notified dispatch the scene was clear for rescue. VCFS Station 14 responded and Paramedic Lucas pronounced the victim who was later identified as Davis Ecker(V1) deceased. Sqt Savercool was notified and responded. 16 Deputy Armstrong made contact with Christina Morales(R1) who was still outside the apartment. Morales advised that she and Ecker lived 17 together in the apartment. Morales stated Ecker had been drinking all day and has a drinking problem. Ecker stated to her that he was going 18 19 outside to smoke a cigarette. After walking around looking for cigarette butts to smoke he came back into the apartment and asked her to take him 20 to the store. Morales said she did not want to take him and he became upset. Morales told him it was late and she wanted to stay home and make dinner. Morales said she cooked dinner and they ate. After eating Morales told Ecker she was going to bed and gave him a kiss goodnight. 21 Morales advised she was laying in bed for a short period of time playing on her phone when she heard what sounded like something getting 22 knocked over in the living room. Morales went out into the living room and observed Ecker laying on the floor with what appeared to be a gunshot 23 wound to the head. She went to him and tried to assist him prior to going outside and asking for help. Morales stated Ecker never gave any 24 indication he wanted to harm himself. 25 26

Deputies Armstrong and Cowger secured the scene. Deputy Armstrong started and maintained a crime scene log. Sgt. Savercool notified on call
 Sgt. Turner. Detective Cloutier CSU detective Mott responded. Deputy Armstrong notified the medical examiners office who responded and
 removed Ecker's remains. No further action was taken by Deputy Armstrong. The case was turned over to ISS.

	Final Case         Final Case           Status:         Status Codes:         1.Arrest/Adult         2.Arr	rest/Juv. 3.Exceptional/Adult 4.E	Exceptional/Juv. 5.Closed	6.Unfounded	dvocate	SA Referral
ATIVE	DCF Hotline CAC Spoke With:	Date:		ICIC Entry T.T. BOLO	Date:	By:
NISTR	Connecting Report Number Agency	Additional Forms Attached: Narrative		Property Veh./Tow Sheet	Other Describe:	
IMC	Officer Reporting - Printed Armstrong, William	Officer Flenorting - Signature	° (A	ID. Number 1674	Unit 1B31	Date 01-20-2019
-	Officer Reviewing - Printed (If Applicable)	Officer Reviewing - Signatur	e (If A <b>be</b> licable)	ID. Number	Unit	Date