

DIVISION CODE		AGENCY ORI NUMBER		AGENCY NAME		AGENCY REPORT NUMBER	
FD 550000		SSSO		SSSO		99103099	
DATE OF ARREST (MO/Y)		TIME OF ARREST		LOCATION OF ARREST		ARRESTED BY	
04/13/99		2130		SSSO		DET. M.R. QUINTELL	
ARREST NUMBER		O.B.T.S. NUMBER		WEAPON SEIZED (TYPE)		INFLUENCE OF ALCOHOL	
99-1410		55010010545					
DEFENDANT'S NAME (LAST, FIRST, MIDDLE)						ALIAS	
HAIRSTON, DARNELL WAYNE							
ADDRESS - PERMANENT		(STREET, APT. NUMBER)		(CITY)		ZIP CODE	
15 BARCELONA DR		ST AUGUSTINE		FL		32092	
ADDRESS - LOCAL		(STREET, APT. NUMBER)		(CITY)		ZIP CODE	
ADDRESS - OTHER (EMPLOYER / SCHOOL) (STR. APT. #)		(CITY)		(STATE)		ZIP CODE	
POB (CITY, STATE, COUNTRY)		CITY		DRIVER'S LICENSE NUMBER		SOCIAL SECURITY NUMBER	
ST AUGUSTINE FL		USA		H623179650950 (FL)			
RACE		SEX		DATE OF BIRTH (MO/Y)		AGE	
W		M		03/15/69		34	
GLASS		BUILD		SPL. ID		SCARS, MARKS AND TATTOOS	
CO-DEFENDANT		1.		2.		3.	
CHARGE DESCRIPTION		CHARGE TYPE		STATUTE VIOLATION		ORDINANCE	
#1 KIDNAPPING		1		787.01.13		0801	
CHARGE DESCRIPTION		CHARGE TYPE		STATUTE VIOLATION		ORDINANCE	
#2 KIDNAPPING CHILD UNDER AGE 13		1		787.01.13		0801	
THE UNDERSIGNED CERTIFIES AND SWEARS THAT HE / SHE HAS JUST CAUSE TO BELIEVE, AND DOES BELIEVE THAT THE ABOVE NAMED DEFENDANT COMMITTED THE FOLLOWING VIOLATION OF THE LAW: (FACTS CONSTITUTING THE CAUSE FOR ARREST).							
ON THE 13 DAY OF APR 19 99 AT 9:30 (AM) (PM), THE DEFENDANT, AT MURRAY PTS ON HOLMES BLVD WITHIN ST JOHNS COUNTY, VIOLATED THE LAW AND DID THEN AND THERE: WILLFULLY AND UNLAWFULLY							
① FORCIBLY CONFINED AND IMPRISONED A W WITH THE INTENT TO INFLECT BODILY HARM; ② FORCIBLY CONFINED AND IMPRISONED A 18 MONTH OLD CHILD, M WITH THE INTENT TO INFLECT BODILY HARM; ③ FORCIBLY CONFINED AND IMPRISONED A 4 MONTH OLD CHILD, D W WITH THE INTENT TO INFLECT BODILY HARM; ④ DURING THE KIDNAPPING USED AN ELECTRONIC STUN GUN TO SHOCK A W CAUSING MARKS AND ABRASIONS; ⑤ DURING THE KIDNAPPING USED AN ELECTRONIC							
AND I SWEAR THE FOLLOWING ARE WITNESS TO SOME OR ALL ELEMENTS OF THIS VIOLATION:							
1. SANDY J. HOPKINS 1284 L20 ST 1 829-2234 1 PART							
2. 1 1 1							
3. 1 1 1							
NAME ADDRESS PHONE # ELEMENTS							
☐ MANDATORY COURT APPEARANCE							
☐ YOU NEED NOT APPEAR IN COURT BUT MUST COMPLY WITH INSTRUCTIONS ON REVERSE SIDE							
TIME MONTH DAY YEAR TIME (AM) (PM)							
I AGREE TO APPEAR AT THE PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED IN THIS NOTICE TO APPEAR OR PAY THE FINE SET FORTH ON THIS FORM THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST WILL BE ISSUED. *** I HEREBY CERTIFY BY MY SIGNATURE THAT THE PERMANENT ADDRESS LISTED ABOVE IS MY CORRECT MAILING ADDRESS. ***							
SIGNATURE OF DEFENDANT				SIGNATURE OF JUVENILE PARENT OR CUSTODIAN			
DATE				DATE			
I SWEAR / AFFIRM THE ABOVE ATTACHED STATEMENTS ARE TRUE AND CORRECT.				SWORN TO AND SUBSCRIBED BEFORE ME, THE UNDERSIGNED			
OFFICER'S / COMPLAINANT'S SIGNATURE				AUTHORITY THIS 13 DAY OF APRIL 19 99			
NAME (PRINTED)				NAME / TITLE OF PERSON AUTHORIZED TO ADMINISTER OATH (NOTARY PUBLIC OR LAW ENFORCEMENT OFFICER) PER FSS 117.10			
ID NUMBER							

STATE VS. Hlairston, Darnell Wayne

FIRST APPEARANCE DATE: 04.14.99 0825

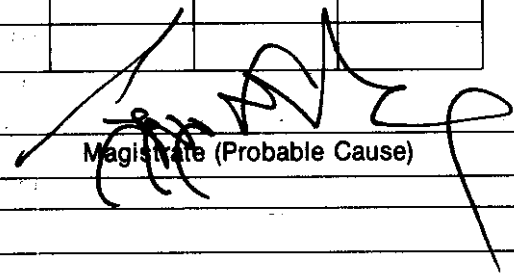
The defendant was advised of his rights and furnished a copy of the complaint.

Defendant (☒) requested and was appointed a Public Defender after being found indigent.

Defendant (☐) not indigent, has or will retain _____ as counsel.

The COURT has examined the sworn complaint and finds:

CHARGE						
Probable Cause Found	☒	☒	☒	☒	☒	☒
PC Undet. - 72 hours						
PC Undet. - 96 hours						
Insufficient PC						
BOND SET AT	<u>500</u>	<u>000</u>	<u>BIB</u>			
ROR						
PTR						
Other						


Magistrate (Probable Cause)

Defendant's Written Plea of Not Guilty Received, date _____

Public Defender Appointed (☐), date _____

Arraignment, date _____

Plea: _____

Set for Pre-Trial, date _____ Set for Trial, date _____

Judge's Notes: _____

Plea Change: _____ date _____

Adjudication: _____

Sentence: _____ Fine & Costs _____

Other: _____

County Judge

ARREST / BOOKING REPORT ☐NOTICE TO APPEAR ☐COMPLAINT AFFIDAVIT ☒☒ ADULT
☐ JUVENILE

CONTINUATION ... CONTINUATION ... CONTINUATION

ADMINISTRATIVE	AGENCY ORI NUMBER FLO 550000	AGENCY NAME SSSO	AGENCY REPORT NUMBER 99103099	PAGE 2 OF 3 PAGES
DEF.	DATE OF ARREST (MM/DD) 04/13/99	TIME OF ARREST 2130	LOCATION OF ARREST SSSO CSD	ARRESTED BY DET. M.R. QUINTELL
	NAME (LAST, FIRST, MIDDLE) HAIRSTON, DARNELL WAYNE			ID NUMBER 2472

CHARGES	CHARGE DESCRIPTION #3 KIDNAPPING CHILD UNDER AGE 13	CHARGE TYPE 1	☒ F.S. ☐ ORD.	STATUTE VIOLATION 7.87.01.1.B	ORDINANCE	CIS CODE 08.0.1
	DRUG ACT. N	DRUG TYPE N	DRUG UNIT N	DRUG AMT.	MULTI-CL. INDIC. VIC / ARR. RELAT.	BOND MADE BY
	CHARGE DESCRIPTION #4 USE OF A WEAPON IN COMMISSION OF FELONY	CHARGE TYPE 1	☒ F.S. ☐ ORD.	STATUTE VIOLATION 7.75.08.7.1.A	ORDINANCE	CIS CODE 8.0.3.8
	DRUG ACT. N	DRUG TYPE N	DRUG UNIT N	DRUG AMT.	MULTI-CL. INDIC. VIC / ARR. RELAT.	BOND MADE BY
	CHARGE DESCRIPTION #5 POSSESSION OF A WEAPON IN COMMISSION OF FEL.	CHARGE TYPE 1	☒ F.S. ☐ ORD.	STATUTE VIOLATION 7.75.08.7.1.A	ORDINANCE	CIS CODE 8.0.3.8
	DRUG ACT. N	DRUG TYPE N	DRUG UNIT N	DRUG AMT.	MULTI-CL. INDIC. VIC / ARR. RELAT.	BOND MADE BY

STUN GUN TO THREATEN M. [REDACTED] T. [REDACTED], A 18 MONTH OLD CHILD; (C) DURING THE KIDNAPPING USED AN ELECTRONIC STUN GUN TO THREATEN D. [REDACTED] W. [REDACTED] A 4 MONTH OLD CHILD.

PROBABLE CAUSE STATEMENT

FILED
99 APR 14 PM 2:23
CLERK OF DISTRICT COURT
ST. JOHNS COUNTY, FL

ADMINISTRATIVE	I SWEAR / AFFIRM THE ABOVE ATTACHED STATEMENTS ARE TRUE AND CORRECT. [Signature] 2735 OFFICER'S / COMPLAINANT'S SIGNATURE DET. T. ERWIN NAME (PRINTED) ID NUMBER	SWORN TO AND SUBSCRIBED BEFORE ME, THE UNDERSIGNED AUTHORITY THIS 13 DAY OF APRIL 19 99 DEPUTY [Signature] 2555 NAME / TITLE OF PERSON AUTHORIZED TO ADMINISTER OATH (NOTARY PUBLIC OR LAW ENFORCEMENT OFFICER) PER FSS 117.10
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ARREST / BOOKING REPORT ☐NOTICE TO APPEAR ☐COMPLAINT AFFIDAVIT ☒☒ ADULT
☐ JUVENILE

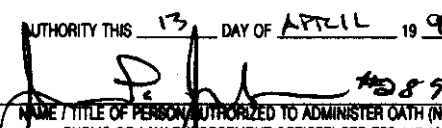
CONTINUATION . . . CONTINUATION . . . CONTINUATION

ADMINISTRATIVE	AGENCY ORI NUMBER FLO 550000	AGENCY NAME SISO	AGENCY REPORT NUMBER 99103099	PAGE 3 OF 3 PAGES
DEF.	DATE OF ARREST (MM/YY) 04/13/99	TIME OF ARREST 2130	LOCATION OF ARREST SISO CED	ARRESTED BY D.E. M. R. QUINTERO 2422
	NAME (LAST, FIRST, MIDDLE) HAIZSTON, DARNELL WAYNE			ALIAS
CHARGES	CHARGE DESCRIPTION POSSESSION OF A WEAPON IN COMMISSION OF FEL			
	CHARGE TYPE 1	☒ F.S. ☐ ORD.	STATUTE VIOLATION 775.087.1A	ORDINANCE A
	DRUG ACT. N	DRUG TYPE N	DRUG UNIT	DRUG AMT.
	MULTI-CL. INDIC.	VIC / ARR. RELAT.	BOND	MADE BY
	CHARGE DESCRIPTION			
#4	CHARGE TYPE	☐ F.S. ☐ ORD.	STATUTE VIOLATION	ORDINANCE
	DRUG ACT.	DRUG TYPE	DRUG UNIT	DRUG AMT.
	MULTI-CL. INDIC.	VIC / ARR. RELAT.	BOND	MADE BY
	CHARGE DESCRIPTION			
#5	CHARGE TYPE	☐ F.S. ☐ ORD.	STATUTE VIOLATION	ORDINANCE
	DRUG ACT.	DRUG TYPE	DRUG UNIT	DRUG AMT.
	MULTI-CL. INDIC.	VIC / ARR. RELAT.	BOND	MADE BY

* SEE NARRATIVE ON PAGE 2 *

PROBABLE CAUSE STATEMENT

FILED
APR 14 PM 2:23
CLERK OF COURT
ST. JOHNS COUNTY FL

ADMINISTRATIVE	I SWEAR / AFFIRM THE ABOVE ATTACHED STATEMENTS ARE TRUE AND CORRECT.	SWORN TO AND SUBSCRIBED BEFORE ME, THE UNDERSIGNED
	 OFFICER'S / COMPLAINANT'S SIGNATURE	AUTHORITY THIS 13 DAY OF APRIL 19 99
	DEP. T. ERWIN NAME (PRINTED)	DEPUTY  #2855
	2735 ID NUMBER	NAME / TITLE OF PERSON AUTHORIZED TO ADMINISTER OATH (NOTARY PUBLIC OR LAW ENFORCEMENT OFFICER) PER FSS 117.10



GENERAL OFFENSE/INCIDENT REPORT

OFFICE OF THE SHERIFF
ST. JOHNS COUNTY
ST. AUGUSTINE, FLORIDA

10CR

99105079

10CR

99105079

CL 05801					M 04		D 03		T 09		L 26				
Zone 6		T/C F		Attempted/Committed () ()		M.C.I.		Offense/Incident KIDNAPPING F.S. 787.01. 1A3							
Complainant (Last Name, First, Middle) HOPKINS SANDY JEAN								Location of Offense/Incident PITS AREA, HOLMES BLVD							
Complainant's Address 284 LEO ST								Day, Date/Time of Occurrence TUE 04-15-99, APPROXIMATELY 0950							
City/State ST AUGUSTINE FL								Sex F		Race W		DOB 05-03-64			
Complainant's Place of Emp./School COMFORT INN								Bus. Phone 824 5554		Day/Date/Time Reported TUE 04-15-99 1013 HRS					
Victim (Last Name, First, Middle) [REDACTED]								Victim's Address [REDACTED]							
Victim's Place of Emp./School COMFORT INN								Home Phone -		Bus. Phone -					
Sex F		Race W		DOB 05-14-79		Age 20		Height 502		Weight 110		Hair BLD		Eyes BRN	
Method Used to Gain Entry/Instrument Used STUN GUN								Victim Type 3 ADULT		Residence Status 1 FULL YEAR		Residence Type 2 COUNTRY			
Physical Evidence (Description)								Injury Type 09 BRUISES/ABRASIONS		Victim's Relationship to Offender 17 SISTER					
Disposition of Evidence Property Room () Other ()								Describe Nature of Injuries (Victim #1) ☐ None ☒ Minor ☐ Serious ☐ Fatal		NA ()					
Weather Conditions ☒ Clear ☐ Cold ☐ Cloudy ☐ Hot								Lighting Conditions ☐ Day ☐ Dusk ☐ Night ☐ Dawn		Street Light On? ☐ Yes ☒ No		Building Lit? ☐ Yes ☒ No			
Detective Called to Scene (Name, I.D. Number) DET. C. STRICKLAND / DET. T. WEAVER								Exact Location of Victim #1 on Premises INSIDE VEHICLE		Will Victim Prosecute? Yes ☒ No ☐ Unk. ☐ NA ()					
Location Type ROADWAY								Victim #2 (Last Name, First, Middle) [REDACTED]		City [REDACTED]		State [REDACTED]			
Point of Entry -								Victim #2 Address [REDACTED]		City [REDACTED]		State [REDACTED]			
No. of Premises Entered -								Victim #2's Place of Emp./School -		Home Phone -		Bus. Phone -			
Sex F		Race W		DOB 01-23-97		Age 1		Height 200		Weight 19		Hair BRN		Eyes BRN	
Point of Exit -								Victim Type 1 JUVENILE		Residence Status 1 FULL YEAR		Residence Type 2 COUNTRY			
No. of Offences 06								No. of Victims 03		No. of Suspects 01		Describe Nature of Injuries (Victim #2) ☒ None ☐ Minor ☐ Serious ☐ Fatal			
Alcohol Related ☐ Yes ☒ No ☐ Unk.								Drug Related ☐ Yes ☒ No ☐ Unk.		Exact Location of Victim #2 on Premises INSIDE VEHICLE		Will Victim Prosecute? Yes ☐ No ☐ NA () Unk. ☐			
Drug Activity -								Drug Type NA		Weapon Seized Type 00 NA		Latent Prints ☐ Yes ☒ No		Photographs Taken ☐ Yes ☒ No	
F.I. Card ☐ Yes ☒ No								Suspicious Vehicle(s) in Area (Tag # Color Make) -		Neighbors Contacted ☐ Yes ☒ No		Suspect Contacted ☐ Yes ☒ No			
Victim Statement ☒ Yes ☐ No								Witness Statement ☒ Yes ☐ No		Suspect Statement ☐ Yes ☒ No		Kidnapping Circumstances 5 UNKNOWN			
Witness #1 (Last Name, First, Middle) HOPKINS SANDY JEAN								Witness #2 (Last Name, First, Middle)							
Address 284 LEO ST ST AUGUSTINE FL								Address							
Sex F		Race W		DOB 05-03-64		Age 34		Home Phone 824-2234		Sex		Race		DOB	
Relationship to Victim MOTHER		Occupation COMFORT INN		Business Phone 824-5554		Relationship to Victim		Occupation		Business Phone		Sex		Race	
Witness #3 (Last Name, First, Middle)								Witness #4 (Last Name, First, Middle)							
Address								Address							
Sex		Race		DOB		Age		Home Phone		Sex		Race		DOB	
Relationship to Victim		Occupation		Business Phone		Relationship to Victim		Occupation		Business Phone		Relationship to Victim		Occupation	

Page 2 of 10		GENERAL OFFENSE/INCIDENT REPORT				Offense/Incident KIDNAPPING		CCR Number 99103099							
DOCUMENT	Document Status		Type of Document		Number on Document		Date of Document		Date of Transaction		Amount				
	Name of Bank				City		Made Payable To			Signature on Face					
	Name on Account				Account Number			Person Handling Transaction							
PROPERTY	Property Status		A. Stolen B. Recovered		C. Stolen/Recovered D. Recovered - Other Juris.		E. Evidence/Seized F. Other (Arson)		Day		Date		Time of Recovery		
	Code	Quan.	Type	Description (I.D. Number, color, model, manufacturer, etc.)						Value Stolen		Value Damaged		Value Recovered	
This is to acknowledge that I have received/retained the property described in the narrative this day of , 19 Signature:															
VEHICLES	Status		Type		Year		Make		Model		Color		License Number, State, Year		
	I.D. Number													Verified by Officer Yes () No ()	
	Recovery Code							Location Recovered							
	Value Stolen		Value Damaged		Value Recovered		No. of Veh. Stolen			Day/Date/Time Recovered					
	NCIC Notified?		Date/Time		Number		No. of Veh. Recovered			If Towed, Location of Garage					
	Yes () No ()														
	I am the owner/custodian of this vehicle and I will prosecute the offender if apprehended. If my vehicle is recovered and efforts to contact me fail or if after being contacted I am unable to immediately pick it up at the recovery location, I authorize the Sheriff's Office to tow and store my vehicle. I will be responsible for any towing and storage charges. Signature of Owner Date and Time:														
SUSPECT	Suspect A (Last Name, First, Middle) HAIRSTON DARNELL WAYNE						Suspect Code S SUSPECT		At Large (Y) Arrested () Charge: F.S. 787.01 1A3		Arrest No.				
	Suspect's Address 15 BARCELONA DR ST AUGUSTINE FL						Known Associate or Area Frequented								
	Sex M	Race W	D.O.B. 03-15-65	Age 34	Height 509	Weight 190	Hair Color BRN	Eye Color BLU	Distinguishing Marks/Characteristics H623179650950 SSN [REDACTED]						
	Hair Length MEDIUM		Hair Style WAVE		Facial Hair UNSHAVEN		Complexion MEDIUM		Voice LOW		General Appearance DIRTY				
	Clothing Description BLUE JEANS BLUE SHIRT														
	Suspect B (Last Name, First, Middle) —						Suspect Code		At Large () () Charge:		Arrest No.				
	Suspect's Address						Known Associate or Area Frequented								
	Sex	Race	D.O.B.	Age	Height	Weight	Hair Color	Eye Color	Distinguishing Marks/Characteristics						
	Hair Length		Hair Style		Facial Hair		Complexion		Voice		General Appearance				
	Clothing Description														
Case Clearance		1. () Cleared by Arrest 2. () Exceptionally Cleared 3. () Unfounded				4. () Investigation Cont. 5. () Inactive 6. () Not a Crime				Exception Type		Date Cleared			
ADDITIONAL INFORMATION	Are there additional victims in the narrative? Are there additional suspects in the narrative? Are there additional property listed in the narrative? Are there other reports pertinent to this incident?						Yes () No () Yes () No () Yes () No () Yes () No ()		Distribution ☐ State Atty. ☐ Other		☐ S.A.P.D.		☐ H.R.S.		
	Reporting Deputy DET. T. ERWIN 2135						I.D. Number 04-13-09		Date/Time 1550		Reporting Deputy I.D. Number Date/Time				
Supervisor						I.D. Number		Date/Time		Watch Commander		I.D. Number		Reviewer I.D. Number	

NARRATIVE REPORT

SAINT JOHN'S SHERIFF'S OFFICE
ST. AUGUSTINE, FLORIDA

Page <u>3</u> of <u>10</u>	Offense/Incident KIDNAPPING	CCR Number 99103000
Victim's Name and Address A. W. [REDACTED] J. W. [REDACTED]		

I RESPONDED TO THE COMFORT INN ON NORTH TOWER DE LEON BLVD IN REFERENCE TO A POSSIBLE KIDNAPPING. UPON MY ARRIVAL I MET WITH S. HOPKINS WHO TOLD ME THAT HER DAUGHTER, A. W. [REDACTED] AND HER CHILDREN, D. W. [REDACTED] AND M. T. [REDACTED], HAD BEEN KIDNAPPED BY D. HAIRSTON.

S. HOPKINS SAID THAT SHE RECEIVED A TELEPHONE CALL FROM A. W. [REDACTED]. A. W. [REDACTED] WAS CRYING AND SAID D. HAIRSTON HAD HER AND THE CHILDREN AND WANTED S. HOPKINS TO MEET THEM AT BUDDY BOYS. A. W. [REDACTED] TOLD S. HOPKINS NOT TO CALL THE POLICE OR SHE WOULD NEVER SEE A. W. [REDACTED] OR THE CHILDREN AGAIN. S. HOPKINS SAID SHE COULD HEAR D. HAIRSTON IN THE BACKGROUND GIVING A. W. [REDACTED] INSTRUCTIONS. S. HOPKINS THEN CALLED 911.

I CONTACTED SGT. L. MAHN AND NOTIFIED HIM OF THIS INFORMATION. L. MAHN INSTRUCTED ME TO BRING S. HOPKINS TO THE STATION 3 FIRE DEPARTMENT. WHILE ENROUTE S. HOPKINS TOLD ME THAT D. HAIRSTON HAD BEEN ON CRACK COCAINE AND WAS CRAZY. S. HOPKINS SAID SHE WAS AFRAID D. HAIRSTON WOULD KILL A. W. [REDACTED] AND THE CHILDREN.

UPON ARRIVAL AT STATION 3 I HEARD DET. J. JACKSON GO IN PURSUIT OF A BLUE CHEVROLET EXTENDED CAB PICKUP TRUCK OCCUPIED BY D. HAIRSTON, A. W. [REDACTED], D. W. [REDACTED] AND M. T. [REDACTED]. APPARENTLY THE TRUCK TURNED OFF OF RACETRACK ROAD AND DROVE BACK TO THE AREA NORTH OF THE WILKINSON CREEK CEMETARY. DET. JACKSON CONTACTED A. W. [REDACTED], D. W. [REDACTED] AND M. T. [REDACTED]. THEY WERE TRANSPORTED TO A STAGING AREA BY LOOPS NURSE ON RACETRACK RD. I TRANSPORTED S. HOPKINS TO THE STAGING AREA AND MET WITH A. W. [REDACTED].

A. W. [REDACTED] TOLD ME THAT SHE WAS AT HER HOUSE GETTING THE CHILDREN READY TO LEAVE WHEN SHE NOTICED SOME BAGS OF GROCERIES ON THE FRONT PORCH AT [REDACTED]. A. W. [REDACTED] SAID THAT D. HAIRSTON APPROACHED HER AND SAID "THOSE ARE MINE" AND OFFERED TO GIVE HER SOME STEAKS IF SHE WOULD TAKE HIM TO HIS TRUCK. D. HAIRSTON GOT IN THE CAR AND A. W. [REDACTED] DROVE HIM TO HIS TRUCK WHICH WAS PARKED OFF HOLMES BLVD IN THE MURRAY PITS AREA. A. W. [REDACTED] SAID D. HAIRSTON BLOCKED HER CAR, APPROACHED HER, PRODUCED AN ELECTRONIC STUN GUN, AND ASKED "HAVE YOU EVER SEEN ONE OF THESE?", THEN SHOCKED HER ON HER LEFT ARM, SHOULDER, AND BACK OF NECK.

Reporting Deputy DET. T. ERWIN 2735	I.D. Number 04-13-99	Date/Time 1550 HRS	Reporting Deputy	I.D. Number	Date/Time
Supervisor ASLBH Jamm	I.D. Number 2578	Date/Time 4/13/99	Watch Commander	I.D. Number	Reviewer
		1640			

NARRATIVE REPORT

SAINT JOHN'S SHERIFF'S OFFICE
ST. AUGUSTINE, FLORIDA

Page <u>4</u> of <u>10</u>	Offense/Incident <u>KIDNAPPING</u>	CCR Number <u>99105699</u>
Victim's Name and Address <u>AMANDA J. WILLIS 2100 B DEER RUN RD</u>		

A. W. [REDACTED] CLIMBED INTO THE PASSENGER'S SEAT AT WHICH TIME D. HAIRSTON PICKED UP M. T. [REDACTED] AND THREATENED TO SHOCK HER IF A. W. [REDACTED] DID NOT DO AS INSTRUCTED. A. W. [REDACTED] SAID SHE WAS AFRAID D. HAIRSTON WAS GOING TO HURT HER CHILDREN SO SHE AGREED TO GO ALONG WITH D. HAIRSTON'S INSTRUCTIONS.

D. HAIRSTON INSTRUCTED A. W. [REDACTED] TO GET M. T. [REDACTED] AND D. W. [REDACTED] AND PUT THEM IN THE TRUCK. D. HAIRSTON DROVE WEST ON SR 16 TO HORTON'S STORE WHERE HE MADE A. W. [REDACTED] USE THE PAY PHONE TO CALL S. HOPKINS INSTRUCTING HER TO MEET THEM AT BUDDY BOYS AND NOT TO CALL THE POLICE.

A. W. [REDACTED] SAID THEY WENT TO BUDDY BOYS AND DROVE AROUND THE AREA FOR AWHILE. NOBODY GOT OUT OF THE TRUCK AT BUDDY BOYS AND THEY DID NOT STOP. A. W. [REDACTED] INDICATED D. HAIRSTON SAW A HELICOPTER IN THE AREA AND SAID, "IT'S THE COPS. THE DEAL'S OFF. YOU'RE GOING WITH ME. I KNEW I COULDN'T TRUST YOUR MOM."

A. W. [REDACTED] SAID SHE WAS UNSURE OF WHICH ROAD THEY WERE ON BUT THEY PASSED TWO PATROL CARS ON THE ROAD. THE PATROL CARS STOPPED THE TRUCK AND THE DEPUTY, DET. JACKSON, INSTRUCTED D. HAIRSTON TO GET OUT OF THE TRUCK. D. HAIRSTON SAID, "OKAY," BUT THEN DROVE AWAY. D. HAIRSTON DROVE TO THE AREA NORTH OF THE JULINGTON CREEK CEMETARY AND STRUCK A TREE. D. HAIRSTON GOT OUT OF THE TRUCK AND SAID, "I'M GOING TO GO SEE IF THE COPS ARE GONE, STAY HERE" AND WENT TOWARDS FACE TRACK ROAD ON FOOT. A. W. [REDACTED] THEN GOT ON THE DRIVER'S SEAT AND DROVE BACK TOWARDS THE CEMETARY WHERE SHE ABANDONED THE TRUCK AND WALKED TO FACE TRACK RD. THIS IS WHERE SHE MET WITH DET. JACKSON.

I NOTICED MARKS AND ABRASIONS ON A. W. [REDACTED] LEFT ARM, LEFT SHOULDER, AND BACK OF HER NECK. A. W. [REDACTED] SAID SHE DID NOT NEED RESCUE. BOTH D. W. [REDACTED] AND M. T. [REDACTED] WERE UNINJURED. A. W. [REDACTED] AND S. HOPKINS PROVIDED ME WITH AFFIDAVITS.

SJSO STAFF WAS NOTIFIED OF THE INCIDENT. SJSO C.E.T., C.I.T., K-9 UNIT DET. G. LETTS, K-9 LAMBCHOP, SJSO AIR-1, JSO K-9 UNIT DET. J.C. "CHIP" WILLIAMS #7063, JSO K-9 NITRO AND FHP AIE UNIT ALL RESPONDED TO ASSIST IN SEARCHING FOR D. HAIRSTON. D. HAIRSTON

Reporting Deputy <u>DET. T. ERWIN 2735 04-13-99 1550</u>	I.D. Number	Date/Time	Reporting Deputy	I.D. Number	Date/Time
Supervisor <u>ASL BH Turner 2578 1638</u>	I.D. Number	Date/Time	Watch Commander	I.D. Number	Reviewer I.D. Number

NARRATIVE REPORT

SAINT JOHNS SHERIFFS OFFICE
ST. AUGUSTINE, FLORIDA

Page <u>5</u> of <u>10</u>	Offense / Incident KIDNAPPING	CCR Number 99103099
Victim's Name and Address AMANDA J WILLIS 2100 E DEER RUN RD.		

WAS NOT LOCATED.

A. W. [REDACTED] HAD FAMILY MEMBERS INVITED AND TRANSPORT HER HOME ALONG WITH D. W. [REDACTED], M. T. [REDACTED], AND S. HARRIS. A. W. [REDACTED] WAS TOLD SHE COULD GO PICK UP HER CAR FROM WHERE SHE LEFT IT.

DET. J. JACKSON INVENTORIED THE TRUCK THAT WAS DRIVEN BY D. HARRIS AND HAD IT TOWED TO THE SHERIFFS OFFICE.

I SIGNED COMPLAINT AFFIDAVIT S#701 11715310 AGAINST D. HARRIS FOR KIDNAPPING F.S. 787.01.13, TWO COUNTS OF KIDNAPPING A CHILD UNDER AGE 15, F.S. 787.01.13, ONE COUNT OF USE OF A WEAPON IN THE COMMISSION OF A FELONY, F.S. 775.087.1A, AND TWO COUNTS OF POSSESSION OF A WEAPON IN THE COMMISSION OF A FELONY, F.S. 775.087.1A.

IT SHOULD BE NOTED THAT THE THIRD VICTIM IS D. [REDACTED] L. [REDACTED] W. [REDACTED], W/F, 12-11-98 APPROXIMATELY 1'06" TALL AND 12 POUND. DAUGHTER OF A. W. [REDACTED]

DET. J. JACKSON PROVIDED ME WITH AN AFFIDAVIT.

Reporting Officer DET. T. EDWIN 2735 04-13-99 1550 HRS	LD. Number	Date / Time	Reporting Officer	LD. Number	Date / Time
Supervisor ASL BH Janner 2578 4/13/99 640	LD. Number	Date / Time	Date / Time Reproduced	Reviewer	LD. Number

AFFIDAVIT

PAGE 6 OF 13

STATE OF FLORIDA, IN AND FOR ST. JOHNS COUNTY

NAME: [REDACTED] ADDRESS: [REDACTED]

DOB: 3-19-79 HOME PHONE: [REDACTED]

Before me, the undersigned personally appeared, who being by me duly sworn, deposes and says:

That on the April day of 13, 1999.

I walked outside to leave there was
bag food on my step I started to look threw it
then Darnell came and said it was his and
I could have it and he said he had steaks
that I could have in his truck in the woods
it I took him. So I did one and my kids
he got out and blocked my car with his
truck and then he asked me if I ever seen
one of these and began to shock me and I
tried to get away then he grabed M [REDACTED]
and said he would shock her if I didn't come
here. so I came and told him please just
stop I'll do what ever he wants. He said o.k. made
me get my kids and get in his truck. He said he
wanted me to call someone to meet him. That
someone was my mom. He took me to the store
where I called her. then we drove around
waiting for her not stopping just driven. The
he seen the hellerCoper and said she called
the cops deals off and I'm going with
him. Well Passed to police cars one start

I SWEAR/AFFIRM THE ABOVE STATEMENT IS TRUE AND CORRECT.

SWORN TO AND SUBSCRIBED BEFORE ME, THE UNDERSIGNED

AUTHORITY THIS 13 DAY OF APRIL 1999.

OFFICIAL/NOTARY SIGNATURE

NAME (PRINTED)

ID NUMBER

DATE

TIME

NAME/TITLE OF PERSON AUTHORIZED TO ADMINISTER OATH
(NOTARY PUBLIC OR LAW ENFORCEMENT OFFICER) PER FS 117.10

NAME:

A [REDACTED] W [REDACTED]

CASE NUMBER:

Page 7 of 10
99103099

AFFIDAVIT

CONTINUATION OF STATEMENT

to follow us the pulled us over. He pulled off the cop asked him to turn off the truck and come here. He said o.k. then took off the chase began. I asked him to let me and my kids out before he wrecked. He said no. Then he said for me to put my kids in the car seats because he was going to jump out and I had to drive. But he didn't. He pulled into some woods stop better some trees. Showed me the keys where in the truck asked me to stay while he walked and seen if the cops where gone. I sat there for a second looked around at how hard it would been to drive the truck out. Then I called his name twice he never answered. So I then drove the truck the best way I could. I didn't know how to get out. I came to the code but couldn't drive on it. So then got out with my kids. Claimed over that thing. tried to wave down a black car they hit their brake and I seen cop car. So started to have down cop and the stopped.

I SWEAR/AFFIRM THE ABOVE STATEMENT IS TRUE AND CORRECT

OFFICE:

NAME (PRINTED)

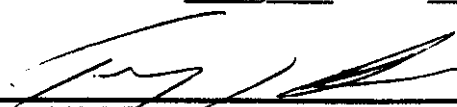
ID NUMBER

DATE

TIME

SWORN TO AND SUBSCRIBED BEFORE ME, THE UNDERSIGNED

AUTHORITY THIS Tue, 13 DAY OF April, 1999.

 2735
 NAME/TITLE OF PERSON AUTHORIZED TO ADMINISTER OATH
 (NOTARY PUBLIC OR LAW ENFORCEMENT OFFICER) PER PBS 117.10

AFFIDAVIT

STATE OF FLORIDA, IN AND FOR ST. JOHNS COUNTY

NAME: Sandra Hopkins ADDRESS: 284 Leo St. ST. AUG
DOB: 5/3/64 HOME PHONE: 829-2234 WORK NUMBER: 824-5554

Before me, the undersigned personally appeared, who being by me duly sworn, deposes and says:

That on the 13 day of April, 1999.

My Daughter A [REDACTED] called me about 10:30 am
at work. She said Darnell Hairston had her &
my Grandbaby's Mom [REDACTED] & I [REDACTED] And wanted me
to meet him at Biddy Boy's and said if I
called the police I would never see them again.
[REDACTED] Begged me not to call the police She
was crying & scared. I swore to her I would not
& she told me she loved me & hung up. I ran to
the front desk at work and called 911.

I SWEAR/AFFIRM THE ABOVE STATEMENT IS TRUE AND CORRECT.

SWORN TO AND SUBSCRIBED BEFORE ME, THE UNDERSIGNED

X Sandra Hopkins
OFFICER/AFFIANT SIGNATURE

AUTHORITY THIS 13 TH DAY OF April 1999

Sandra Hopkins
NAME (PRINTED)

ID NUMBER

Sgt. J. M. [REDACTED] 2057
NAME/TITLE OF PERSON AUTHORIZED TO ADMINISTER OATH
(NOTARY PUBLIC OR LAW ENFORCEMENT OFFICER) PER FRS 117.18

4/13/99
DATE

1250
TIME

AFFIDAVIT

STATE OF FLORIDA, IN AND FOR ST. JOHNS COUNTY

NAME: DEPUTY J.P. JACKSON 2855 ADDRESS: STJO

DOB: HOME PHONE: WORK NUMBER: 824-8304

Before me, the undersigned personally appeared, who being by me duly sworn, deposes and says:

That on the 13 day of APRIL, 1999

WHILE IN THE AREA OF SR 13 NORTH AT SR 16, I
SAW A BLUE CHEVY S-10 PICKUP HEADING NORTH ON SR 13
THE VEHICLE MATCHED THE DESCRIPTION OF A POSSIBLE SUSPECTS
VEHICLE. INFORMATION GIVEN TO ME WAS TO BOLO FOR A
BLUE PICKUP TRUCK OR A BLUE DODGE DAYTONA.

I FOLLOWED THE VEHICLE TO THE AREA OF CR 210 AND
CIMMARONE COUNTRY CLUB. I COULD NOT SEE IN THE VEHICLE
VERY WELL DUE TO SOMETHING BLOCKING THE REAR WINDOW.
THE SUSPECT VEHICLE WAS SUPPOSED TO BE OCCUPIED BY A WHITE
MALE, WHITE FEMALE AND TWO JUVENILES. I COULD ONLY SEE THAT
THE VEHICLE WAS OCCUPIED BY TWO INDIVIDUALS. I CALLED
IN THE TAG OF THE VEHICLE WHICH CAME BACK NOT WAITED.

I TOLD TAG-3 THAT I WAS GOING TO STOP THE VEHICLE AT CR 210
IN FRONT OF CIMMARONE COUNTRY CLUB. I TURNED ON MY LIGHTS AND
THE VEHICLE PULLED OVER TO THE RIGHT SIDE OF THE ROAD (OFF THE ROAD).
I EXITED MY VEHICLE AND ASKED THE DRIVER TO STEP OUT
OF THE VEHICLE AND WALK BACK TO MY VEHICLE. THE DRIVER OF
THE PICKUP TRUCK DROVE OFF HEADING EAST ON CR 210. I ADVISED
TAG-3 OF THE SITUATION. THE VEHICLE WAS TRAVELING AT APPROX
70 MPH AND TURNED ONTO RUSSEL SAMPSON RD, WHERE THE VEHICLE'S
SPEED REACHED BETWEEN 20-30 MPH. I BACKED OFF OF THE VEHICLE.

I SWEAR/AFFIRM THE ABOVE STATEMENT IS TRUE AND CORRECT.

SWORN TO AND SUBSCRIBED BEFORE ME, THE UNDERSIGNED

DEPUTY J.P. JACKSON
OFFICER/AFFIANT SIGNATURE

AUTHORITY THIS 13 DAY OF APRIL, 1999

DEPUTY JAMES R. JACKSON 2855
NAME (PRINTED) ID NUMBER

[Signature] 2835
NAME/TITLE OF PERSON AUTHORIZED TO ADMINISTER OATH
(NOTARY PUBLIC OR LAW ENFORCEMENT OFFICER) PER FSS 117.10

04-13-99 1530
DATE TIME

NAME: DEPT. J.P. JACKSON

CASE NUMBER: 99103113

AFFIDAVIT CONTINUATION OF STATEMENT

DUE TO THE ROAD CONDITION AND LOW VISIBILITY, I SAW THE VEHICLE
HEAD EAST ON RACE TRACK ROAD FROM RUSSEL JACOBSON AND LOST CONTACT
WITH THE VEHICLE IN THE TURNS, IN THE AREA OF CONSTRUCTION. I
CONTINUED ON RACE TRACK ROAD TO US 1, NO SIGN OF THE VEHICLE.
I WENT BACK TO THE CEMETERY ON RACE TRACK ROAD, WHERE I
SAW SIGNS OF A VEHICLE ENTERING THE AREA. UPON LEAVING THE
CEMETERY THE VEHICLE WAS FOUND IN THE WOODS OFF OF RACE
TRACK ROAD JUST WEST OF THE CEMETERY.

INSIDE THE VEHICLE WAS A WHITE FEMALE AND TWO SMALL
CHILDREN WHO SEEMED TO BE OK. THE SUSPECT HAD FLED INTO
THE WOODED AREA ON THE NORTH SIDE OF RACE TRACK ROAD, ACCORDING
TO ONE OF THE VICTIMS.

I COMPLETED AN INVENTORY OF THE VEHICLE AND IT WAS IMPOUNDED.
THE VEHICLE WAS A '95 CHEVY. S-10, BLUE IN COLOR, FLORIDA TAG
LTL K02. A ROTATION WRECKER WAS CALLED FOR AND WILFORDS
TOWING RESPONDED AND REMOVED THE VEHICLE TO THE SHERIFFS
OFFICE, PER DET. T. MEALS #2194.

I SWEAR / AFFIRM THE ABOVE STATEMENT IS TRUE AND CORRECT

SWORN TO AND SUBSCRIBED BEFORE ME, THE UNDERSIGNED

DEPT. J.P. JACKSON
OFFICER / AFFIANT SIGNATURE

AUTHORITY THIS TUE, 13 DAY OF APRIL 1999

DEPT. JAMES P. JACKSON
NAME (PRINTED)

2895
ID NUMBER

[Signature] 2735
NAME / TITLE OF PERSON AUTHORIZED TO ADMINISTER OATH
(NOTARY PUBLIC OR LAW ENFORCEMENT OFFICER) PER FSS 117.29

04-13-99
DATE

1530
TIME

IMPOUNDED MOTOR VEHICLE
SAINT JOHNS SHERIFF'S OFFICE
ST. AUGUSTINE, FLORIDA

1. Vehicle Number ☒ Hold for Inv. Detail:		2. Reason hold placed on vehicle <u>EVIDENCE</u>		3. CCR Number <u>99103113</u>	
4. Date <u>04-13-99</u> Time <u>1102</u> a.m. ☒ p.m. ☐		5. Year and make of car <u>95 CHEVY</u>		Body Type <u>PK</u>	Color <u>BLUE</u>
6. Name of driver <u>DANIEL WAYNE HARTON</u>		7. Tag Number <u>LIL KRZ</u>		State <u>FL</u>	Year <u>99</u>
8. Address <u>503 AVILLA ST ST. AUGUSTINE FL 32085</u>		9. Vehicle Identification Number <u>1GCCS194558210438</u>		10. Arrest No.	
11. Name of owner <u>BOULE BOWEN/TARITHA HARTON</u>		12. Was 10-28 run? vin yes ☒ no ☐ tag yes ☒ no ☐		13. Was 10-29 run? vin yes ☒ no ☐ tag yes ☒ no ☐	
14. Address <u>503 AVILLA ST ST. AUGUSTINE FL 32091</u>		15. Location vehicle removed from <u>WEST OF I 95</u> <u>WOODS AREA/OFF OF MAIN ROAD</u>		16. Zone No. <u>3</u>	
17. Arrest yes ☐ Charge no ☒ <u>KIDNAPPING</u>		18. Name of Wrecker Firm <u>WILFORDS</u>		☒ Rotation ☐ Request	
19. Reason vehicle towed/stored <u>VEHICLE WAS INVOLVED IN AN INCIDENT WITH SC</u>		20. Location vehicle removed to and stored <u>ST. JOHNS SHERIFFS OFFICE 268-5546</u> <u>11445 SAVANNAH BLVD JACKSONVILLE FL</u>			
21. Articles taken from car (circle) Note: Evidence must be removed and placed in property room none keys clothing others (be specific) <u>PURSE / 2 CAR SEATS / BABY BAG</u>					
22. Inventory and condition of vehicle		23. Inventory in vehicle is correct			
Radio ☒		☒ <u>[Signature]</u> (signature of wrecker driver)			
Spare tire ☒					
Tape deck ☒		I hereby acknowledge receipt of a release for the above described vehicle from the St. Johns Sheriff's Office			
Number of tapes <u>1</u>					
CB radio ☒					
Tools <u>MISC</u> ☒					
Other items (be specific) <u>MILEAGE 834284</u>		Signature of owner/operator			
Clock ☒		Address of owner/operator			
Doors locked ☒		Releasing Officer and ID number <u>DEPUTY J.P. [Signature] 2895</u>			
Trunk locked ☒		Date <u>04-13-99</u>			
Keys in lock ☒					

ADDITIONAL INVENTORY AND DAMAGE

MISC CLOTHING, CHILDRENS TOYS, TOOLS, GOLF CLUB, TACKLE BOX,
PLASTIC GAS CONTAINER, 3 CHILD SEAT (VEHICLE)

DAMAGE TO LEFT DRIVERS SIDE DOOR, FRONT END DAMAGE, SCRATCHES
IN RIGHT SIDE OF VEHICLE. REAR BUMPER DAMAGE LT SIDE.

PANTHER STUN GUN CASE (BLACK), DUCT TAPE, MAG LITE (BURNED IN BACK OF TRUCK)
PREVIOUS CRIME

IF VEHICLE IS NOT RELEASED BY INVESTIGATING OFFICER, IT WILL BE NECESSARY FOR THE OWNER TO OBTAIN A VEHICLE RELEASE AT THE ST. JOHNS COUNTY SHERIFF'S COMMUNICATION CENTER, 824-8304, BEFORE OWNER CAN CLAIM HIS VEHICLE. PROOF OF OWNERSHIP MUST BE PRESENTED AT THE TIME RELEASE IS REQUESTED.

IF THE ABOVE RELEASE SECTION, BLOCK #24, IS SIGNED BY THE REPORTING OFFICER, THE CANARY COPY WILL BE USED BY THE OWNER/OPERATOR TO OBTAIN RELEASE OF HIS VEHICLE AT THE WRECKER FIRM.

25. The owner of this vehicle has ☐ has not ☒ been notified of this action by copy of this form, if not

26. I hereby certify that I am owner of this vehicle and acknowledge receipt of this notice

WHY: INVESTIGATION CONTINUED

[Signature] 2895
 OFFICER'S signature and ID number

[Signature] 2578
 SUPERVISOR'S signature and ID number

owner's signature

Sheriff

NEIL J PERRY

OFFICE
904/824-8304



ST JOHNS COUNTY SHERIFF'S OFFICE

4015 LEWIS SPEEDWAY, SAINT AUGUSTINE, FLORIDA 32085

EVIDENCE SUBMITTAL/RECEIPT

TIME 1727

CR NUMBER 99103099	OFFENSE KIDNAPING	DATE / TIME 05-13-99 / 1013	LOCKER # 3	OFFICER J.P. JACKSON JRS
SUSPECT DARNELL W. HAIRSTON	ARRESTED? YES — NO X JUVENILE — ADULT X	761 #		
SUSPECT —	ARRESTED? YES — NO — JUVENILE — ADULT —	761 #		
SUSPECT —	ARRESTED? YES — NO — JUVENILE — ADULT —	761 #		
VICTIM		LOCATION		

SUMMARY (IF NECESSARY ATTACH COPY OF NARRATIVE)

SUSPECTS VEHICLE KEYS, FROM KIDNAPING

PKG. NO.	QUANT OF ITEMS	BAR CODE	DESCRIPTION
1	6		5 KEYS 1 KEYRING

EXAMINATION REQUESTED

HOLD REF IMPOUNDED VEHICLE

OFFICIAL USE ONLY	DATE	TIME	INITIAL	LOCKER
1) ORIGINAL - EVIDENCE 2) COPY - SUBMITTING PERSON 3) COPY - RECORDS				

[illegible]

NARRATIVE REPORT

ST. JOHNS COUNTY SHERIFF'S OFFICE

ST. AUGUSTINE, FLORIDA

PAGE 2 OF 2

OFFENSE/INCIDENT

KIDNAPPING

OCR NUMBER

99103099

VICTIM'S NAME AND ADDRESS

AMANDA WELLES 2100 LOT 8 DEER RUN RD ST. AUG. FL.

I RESPONDED TO N. HOLMES BLVD. TO PROCESS A VEHICLE FOR EVIDENCE. I WAS ADVISED BY SGT. MAHN THAT THE VEHICLE WAS INVOLVED IN A KIDNAPPING, AND THAT IT NEEDED TO BE PROCESSED FOR LATENT PRINTS, AND PHOTOGRAPHED.

UPON MY ARRIVAL P.S.A. W. AGEE SHOWED ME A CUT OFF ROAD AND TOLD ME THE VEHICLE WAS LOCATED DOWN IT. I FOUND A BLUE 1990 DODGE DAYTONA APPROX. 430 FEET DOWN THE ROAD. I PHOTOGRAPHED THE VEHICLE AND THEN CHECKED FOR LATENT PRINTS I LOCATED SOME LATENTS ON THE EXTERIOR. THE LATENTS WERE SUBMITTED TO EVIDENCE. DUE TO THE GRASSY TERRAIN AROUND THE CAR I WAS UNABLE TO LOCATE ANY FOOTPRINTS.

TECHNICIAN REPORTING AND ID

DATE

SUPERVISOR APPROVING AND ID

DATE

Det. E. J. Burt 2761 04-13-99



GENERAL OFFENSE/INCIDENT REPORT

OFFICE OF THE SHERIFF
ST. JOHNS COUNTY
ST. AUGUSTINE, FLORIDA

/CCR 99103213

Offense/Incident FS812.014.284

GRAND THEFT AUTO / RECOVERED STOLEN VEHICLE

Location of Offense/Incident

N. HOLMES BLVD.

Day, Date/Time of Occurrence

TUE 04/13/99

1900 HRS

Day/Date/Time Reported

TUE 04/13/99

1900 HRS

Victim (Last Name, First, Middle)

BREWER, GERALDINE

Victim's Address

12600 SYNDER ST. JAX, FL

City

32256

State

Victim's Place of Emp./School

Home Phone

Bus. Phone

Sex

Race

D.O.B.

Age

Height

Weight

Hair

Eyes

Victim Type

3 ADULT

Residence Status

3 NON RESIDENT 3 FLORIDA

Residence Type

Injury Type

00 N/A

Victim's Relationship to Offender

02 STRANGER

Describe Nature of Injuries (Victim #1)

☐ None ☐ Minor ☐ Serious ☐ Fatal

N/A (X)

Exact Location of Victim #1 on Premises

N/A

Will Victim Prosecute?

Yes ☒No ☐Unk. ☐

N/A ()

Victim #2 (Last Name, First, Middle)

N/A (X)

Victim #2 Address

City

State

Victim #2's Place of Emp./School

Home Phone

Bus. Phone

Sex

Race

D.O.B.

Age

Height

Weight

Hair

Eyes

Victim Type

Residence Status

Residence Type

Injury Type

Victim's Relationship to Offender

Describe Nature of Injuries (Victim #2)

☐ None ☐ Minor ☐ Serious ☐ Fatal

N/A ()

Exact Location of Victim #2 on Premises

Will Victim Prosecute?

Yes ☐No ☐

N/A ()

Unk. ☐

Weapon Seized Type

00 N/A

Latent Prints

Yes ☒ No

Photographs Taken

Yes ☒ No

F.I. Card

Yes ☐ No ☒

Suspicious Vehicle(s) in Area (Tag # Color Make)

N/A

Neighbors Contacted

Yes ☐ No ☒

Suspect Contacted

Yes ☒ No ☐

Victim Statement

Yes ☐ No ☒

Witness Statement

Yes ☒ No ☐

Suspect Statement

Yes ☐ No ☐

Kidnapping Circumstances

0 N/A

Witness #1 (Last Name, First, Middle)

DET. MEARES, T.

Address

4015 LEWIS SPEEDWAY

Sex

F

Race

W

D.O.B.

Age

Home Phone

Relationship to Victim

Occupation

DETECTIVE

Business Phone

824 8304

Witness #2 (Last Name, First, Middle)

Address

Sex

Race

D.O.B.

Age

Home Phone

Relationship to Victim

Occupation

Business Phone

Relationship to Victim

Occupation

Business Phone

Relationship to Victim

Occupation

Business Phone

Relationship to Victim

Occupation

Business Phone

Relationship to Victim

Occupation

Business Phone

Relationship to Victim

Occupation

Business Phone

Relationship to Victim

Occupation

Business Phone

Relationship to Victim

Occupation

Business Phone

Page 2 of 6		GENERAL OFFENSE/INCIDENT REPORT				Offense/Incident		CCR Number																			
Document Status		Type of Document		Number on Document		Date of Document		Date of Transaction		Amount																	
Name of Bank				City		Made Payable To				Signature on Face																	
Name on Account				Account Number				Person Handling Transaction																			
Property Status		A. Stolen B. Recovered		C. Stolen/Recovered D. Recovered - Other Juris.		E. Evidence/Seized F. Other (Arson)		Day		Date Time of Recovery																	
Code		Quan.		Type		Description (I.D. Number, color, model, manufacturer, etc.)				Value Stolen		Value Damaged		Value Recovered													
This is to acknowledge that I have received/retained the property described in the narrative this day of , 19 Signature:																											
Status		Type		Year		Make		Model		Color		License Number, State, Year															
2 RECOVERED		2 TRUCK		89		FORD		BRONCO		BLUE		HT862X FL 00															
I.D. Number														Verified by Officer													
1FM EU15NYKLA41250														Yes () No ()													
Recovery Code		Location Recovered																									
3 STOLEN OTHER/RECOVERED LOCAL		9 ROAD																									
Value Stolen		Value Damaged		Value Recovered		No. of Veh. Stolen		Day/Date/Time Recovered																			
2500.00		X		2500.00		1		TUE/04/13/99																			
NCIC Notified?		Date/Time		Number		No. of Veh. Recovered		If Towed, Location of Garage																			
Yes () No ()						1																					
I am the owner/custodian of this vehicle and I will prosecute the offender if apprehended. If my vehicle is recovered and efforts to contact me fail or if after being contacted I am unable to immediately pick it up at the recovery location, I authorize the Sheriff's Office to tow and store my vehicle. I will be responsible for any towing and storage charges.																											
Signature of Owner														Date and Time:													
Suspect A (Last Name, First, Middle)														Suspect Code		At Large () Arrested (X)		Arrest No.									
HAIRSTON, DARNELL WAYNE														A ARRESTEE		Charge: FS 812.01422C6											
Suspect's Address														Known Associate or Areas Frequented													
15 BARCELONA AVE. ST. AUGUSTINE, FL																											
Sex		Race		D.O.B.		Age		Height		Weight		Hair Color		Eye Color		Distinguishing Marks/Characteristics											
M		W		03/15/65		505		140		BLK		BRO															
Hair Length		Hair Style		Facial Hair		Complexion		Voice		General Appearance																	
MED		STRAIGHT		MUSTACHE		MED		LOW		WKEPT																	
Clothing Description																											
BLUE JEANS / T-SHIRT																											
Suspect B (Last Name, First, Middle)														Suspect Code		At Large () ()		Arrest No.									
N/A																Charge:											
Suspect's Address														Known Associate or Areas Frequented													
Sex		Race		D.O.B.		Age		Height		Weight		Hair Color		Eye Color		Distinguishing Marks/Characteristics											
Hair Length		Hair Style		Facial Hair		Complexion		Voice		General Appearance																	
Clothing Description																											
Case Clearance		1. (X) Cleared by Arrest 2. () Exceptionally Cleared 3. () Unfounded				4. () Investigation Cont. 5. () Inactive 6. () Not a Crime				Exception Type		Date Cleared															
A D M		Are there additional victims in the narrative? Are there additional suspects in the narrative? Is there additional property listed in the narrative? Are there other reports pertinent to this incident?				Yes () No (X) Yes () No (X) Yes () No (X) Yes () No (X)				Distribution State Atty. Other		DET. T. MEANE		S.A.P.D. H.R.S.													
Reporting Deputy				I.D. Number				Date/Time				Reporting Deputy				I.D. Number				Date/Time							
DEP F. FERRIS 2672				04/13/99				2000 HRS																			
Supervisor				I.D. Number				Date/Time				Watch Commander				I.D. Number				Reviewer				I.D. Number			
SGT. E.V. GARRETT #				2155				04-13-99				2305 HRS															

NARRATIVE REPORT

SAINT JOHNS SHERIFF'S OFFICE
ST. AUGUSTINE, FLORIDA

Page <u>3 of 6</u>	Offense/Incident <u>STOLEN</u>	CCR Number <u>99/03213</u>
Victim's Name and Address <u>GERALDINE BREWER 12600 SYNDER ST JAX, FL 32256</u>		

I ASSISTED DETTHERESA MEARES STOP A VEHICLE THAT WAS BEING DRIVEN BY DARNELL HAIRSTON WHO HAD OPEN WARRANTS FOR HIS ARREST. AFTER THE SUBJECT WAS SECURED THE VEHICLE LICENSE WAS RAN AND CAME BACK STOLEN OUT OF JACKSONVILLE.

A TELETYPE WAS SENT TO JACKSONVILLE AND THE VEHICLE WAS CONFIRMED STOLEN. D. HAIRSTON WAS ARRESTED FOR GRAND THEFT AUTO AND TRANSPORTED TO THE COUNTY JAIL.

DET. T. MEARES COMPLETED AN AFFIDAVIT THAT WILL BE ATTACHED LATER. THE VEHICLE WAS RELEASED TO THE OWNER WHO SIGNED A PROPERTY RECEIPT.

THIS REPORT NEEDS TO BE CROSS REFERENCED TO CR# 99103099

Reporting Deputy <u>Dya. P. Ferris 2672</u>	I.D. Number <u>04/13/92</u>	Date/Time <u>2000 HRS</u>	Reporting Deputy	I.D. Number	Date/Time
Supervisor <u>A. J. G. L. Garrett, #155, 11-13-92</u>	I.D. Number	Date/Time <u>2345 HRS.</u>	Watch Commander	I.D. Number	Reviewer I.D. Number

50F6

CASE NUMBER: 99103213**AFFIDAVIT**

STATE OF FLORIDA, IN AND FOR ST. JOHNS COUNTY

NAME: Gary Harvey ADDRESS: 12600 Snyder St.
DOB: 9-24-54 HOME PHONE: 268-1030 WORK NUMBER: 403-3099

Before me, the undersigned personally appeared, who being by me duly sworn, deposes and says:

That on the 13 day of APRIL, 1999.

I Gary Harvey came back from doctor
and went to the house for a hour
and see the truck was leaving the
yard and call the police and report
the truck stolen about 2:30 pm

I SWEAR / AFFIRM THE ABOVE STATEMENT IS TRUE AND CORRECT.

SWORN TO AND SUBSCRIBED BEFORE ME, THE UNDERSIGNED

[Signature]
OFFICER / AFFIANT SIGNATURE

AUTHORITY THIS 13 DAY OF APRIL 1999.

GARY HARVEY
NAME (PRINTED) ID NUMBER

[Signature]
NAME / TITLE OF PERSON AUTHORIZED TO ADMINISTER OATH
(NOTARY PUBLIC OR LAW ENFORCEMENT OFFICER) PER FSS 117.10

DATE TIME

6 OF 6

PROPERTY RECEIPT

CR NO. 99103213

DATE 04/13/99

RECEIVED FROM DEP. F. FERRIS 2672

RECEIVED BY GARY HARVEY

THE FOLLOWING ITEMS:

FORD BRONCO 1989 MODEL BLUE IN COLOR HJ862X 00

SIGNED

Dep. F. Ferris 2672
(Received From)

SIGNED

[Signature]
(Received By)

Booking sheet for St. Johns County Jail

Booking Number..... 99-1410 Sheet printed 04-13-1999 at 23:46
 Case Number..... 99103099
 R & I Number..... 20311
 OBTS/Arrest Number. 5501006565

Name..... HAIRSTON, DARNELL WAYNE
 AKA/Nickname.....
 Physical Desc..... White Male Black Hair Brown Eyes 5-07 140
 Build/Complexion... Medium/Medium
 Dt of Birth/Age.... 03-15-1965/34
 SS #/Drv Lic #..... /H623179650950/FL
 Address..... 15 BARCELONA AVE, ST AUG, FL 32084
 Phone..... 461-9787
 Dt/Tm of arrest.... 04-13-1999 at 2130
 Location of arrest. SJSO/CID
 Dt/Tm acceptance... 04-13-1999 at 2150
 Prior record..... Prior Arrests
 DWI Chem tst gvn...
 FCIC Class/Statute. 0001 KIDNAP (787.01.2)

Charges.....	Agcy. Jurs. Warrant/Case#..	Sentence/Bond.....
KIDNAPPING		NO BOND
KIDNAPPING OF A CHILD UNDER 13		NO BOND
KIDNAPPING OF A CHILD UNDER 13		NO BOND
775.087(1)a USE OF WEAPON COMM.		NO BOND
775.087(1)a POSS OF WEAPON COMM		NO BOND
775.087(1)a POSS WEAPON COMM FE		NO BOND
GRAND THEFT OF THE THIRD DEGREE		NO BOND

Court/Next Action.. CIRCUIT/First appe 04-14-99
 Proj Release Date..
 Released/Relsd To.. at /
 Time in County..... LIFE
 Occupation..... UNEMPLOYED /
 Employer/Address... ,
 Religion..... NONE
 Place of Birth..... ST AUG, FL
 Next of Kin..... KABITHE HAIRSTON/WIFE
 Next of Kin Addr... ST AUG, FL
 Disting. Marks.....
 Arrest Agcy/Officer. SJSO/2472 QUINTIERI, M
 Booking Officer.... 2683 CYR, A
 Searched By..... 2844 GRIFFIN, CHARLES
 Fingerprinted By... 2844 GRIFFIN, CHARLES

() Local computer checked	By _____	Date _____	Time _____
() FCIC/NCIC computer checked	By _____	Date _____	Time _____