

OFFENSE INCIDENT REPORT

Juvenile 1. Original 1
2. Supplement

Agency ORI Number HP05		Agency Name FLORIDA HIGHWAY PATROL				Agency Report Number FHP06OFF036880																	
Reported Day MON		Date 04/03/2006		Time (mil) 09:00		Time Dispatched (mil)		Time Arrived (mil)		Time Completed (mil)													
Incident Type 1. Felony 2. Traffic Felony		3. Misdemeanor 4. Traffic Misdemeanor		5. Ordinance 9. Other		Incident: Day From MON		Date 03/27/2006		Time (mil) 08:31													
Day MON		Date 03/27/2006		Time (mil) 08:31		To MON		Date 03/27/2006		Time (mil) 08:31													
Offense # 1		Type 1		Description THEFT-OBTAINING CREDIT CARD THROUGH FRAUD				A-Attempted C-Committed		Statute Violation Number 817.60 .1													
Offense # 2		Type 1		Description FRAUDULENT USE OF CREDIT CARD				A-Attempted C-Committed		Statute Violation Number 816.61													
Incident Location (Street, Apt. Number) 06 05 10007 US 19, PORT RICHEY 34668										City		Zip		Geographical Indicator									
Business Name / Area Identifier 7/11										Geographical Area		Forced Entry 0. N/A 2. No 1. Yes		Occupancy 0. N/A 2. Unoccupied 1. Occupied 3. Abandoned									
Location Type 01. Residence-Single 02. Apartment/Condo 03. Residence-Other 04. Hotel/Motel										05. Convenience Store 06. Gas Station 07. Liquor Sales 08. Bar/Nightclub		09. Supermarket 10. Dept/Discount Store 11. Specialty Store 12. Drug Store/Hospital		13. Bank/Financial Inst 14. Commercial/Office Bldg 15. Industrial/Mfg. 16. Storage		17. Gov/Public Bldg. 18. School/University 19. Jail/Prison 20. Religious Bldg.		21. Airport 22. Bus/Rail Terminal 23. Construction Site 24. Other Structure		25. Parking Lot/Garage 26. Highway/Roadway 27. Park/Woods/Field 28. Lake/Waterway		29. Motor Vehicle 30. Other Mobile 99. Other	
# Offenses 2		# Victims 1		# Offenders 2		# Prem. Ent. 0		# Veh. Stolen 0		Type Weapon 00. N/A 01. Handgun		02. Rifle 03. Shotgun 04. Firearm		05. Knife/Cutting Instrument 06. Blunt Object		07. Hands/Fists/Feet 08. Poison 09. Explosives		10. Fire/Incendary 11. Threat Intimidation 12. Simulated Weapon		13. Drugs 88. Unknown 99. Other		06	
V/W Code V-Victim W-Witness C-Reporting Person		P-Proprietor Z-Other		Victim Type 0. N/A 1. Juvenile 2. L.E. Officer 3. Adult		4. Business 5. Government 6. Church 9. Other		Race A-N/A W-White B-Black		I-American Indian O-Oriental/Asian U-Unknown		Sex M-Male F-Female U-Unknown		Residence Type 0. N/A 1. City 2. County 3. Florida 4. Out-of-State		Residence Status 0. N/A 1. Full Time 2. Part Time 3. Non-Resident		Extent of Injury 0. None 1. Minor 2. Serious 3. Fatal					
Injury Type 00. N/A 01. Gunshot 02. Stabbed		03. Laceration 04. Unconscious 05. Poss. Broken Bones 06. Poss. Internal Injury		07. Loss of Teeth 08. Burns 09. Abrasions/Bruiases 99. Other		Victim Relationship To Offender 00. N/A 01. Undetermined 02. Stranger		03. Spouse 04. Ex-Spouse 05. Co-Habitant		06. Parent 07. Brother 08. Child 09. Step-Parent		10. Step-Child 11. In-Law 12. Other Family 13. Student		14. Teacher 15. Child of Boy/Girl 16. Friend 17. Friend		18. Neighbor 19. Sitter/Day Care 20. Employee		21. Employer 22. Landlord/Tenant 23. Acquaintance 99. Other Known					
Offense Indicator 1. #1 3. Both 2. #2		V/W Code # 3 V 1		V. Type 3		Name (Last, First, Middle or Business) STEVEN, SHANNON L						Residence Phone (727)946-0747											
Address (Street, Apt. Number) 3022 CALDWELL DRIVE, HOLIDAY FL 34691												City		State		Zip		Business Phone					
Other Contact Info. (Time Available, Interpreter, etc.)										Synopsis of Involvement													
# Victim Type 1, 2, or 3		Race W		Sex M		Date of Birth or Age 07/29/1971		Res. Type 34		Res. Status 2		Extent of Injury 1		Injury Type 00		Relationship 00		Ethnicity WHITE					
Offense Indicator 1. #1 3. Both 2. #2		V/W Code # 3		V. Type		Name (Last, First, Middle or Business)						Residence Phone											
Address (Street, Apt. Number)												City		State		Zip		Business Phone					
Other Contact Info. (Time Available, Interpreter, etc.)										Synopsis of Involvement													
# Victim Type 1, 2, or 3		Race		Sex		Date of Birth or Age		Res. Type		Res. Status		Extent of Injury		Injury Type		Relationship		Ethnicity					
Offense Indicator 1. #1 3. Both 2. #2		Suspect Code B-Suspect A-Accused		Code # 1		Code # S		Juvenile		Name (Last, First, Middle or Business) UNKNOWN,						Residence Phone							
Maiden Name				Nickname/ Street Name				Place of Birth				Residence Phone											
Last Known Address (Street, Apt. Number) UK												City		State		Zip		Business Phone					
Occupation UK				Employer/School, Address UK								Social Security Number											
Driver's License State/Number UK				Immigration and Naturalization Number				Other ID. Number				OBTS Number (Arrested)				FIC/NCIC							
Clothing (Describe) UK										Scars/Marks/Tattoos (Location/Describe)													
Race		Sex		Date of Birth or Age				Height		Weight		Eye Color		Hair Color		Hair Length		Hair Style					
Complexion		Build		Facial Hair		Teeth		Speech/Voice		Special Identifiers													
CAD INCIDENT DISPOSITION CODE: []												ON APRIL, 5, 2006 THE VICTIM'S MOTHER, MS. SHELLY STEPHEN, INFORMED ME THAT HER SONS CREDIT CARD, CAPITAL ONE VISA, HAD BEEN STOLEN AND USED. THE CREDIT CARD WAS USED TO PURCHASE GAS AT THE 7/11 STORE AT 10007 US 19 IN PORT RICHEY. THE AMOUNT CHARGED WAS \$79.50. THE CREDIT CARD WAS USED ON MARCH 27, 2006, AT 8:31AM. MR. STEPHEN WAS INCARCERATED IN THE PASCO COUNTY JAIL AT THAT TIME. A COPY OF A VIDEO RECORDING OF THE STORE FROM 8:00 AM TO 9:00 AM ON MARCH 27, 2006, WAS GIVEN TO MR STEPHEN'S ATTORNEY, MR. K.L FOOTE, VIA PRIVATE INVESTIGATOR MR. JONATHON FOOTE ON APRIL 19, 2006. THE VIDEO WAS											
Report Contains										Related Report Number(s)													
Officer Reporting LIEUTENANT ERIC MADILL						ID. Number(s) 1544-194		Troop C		Date 04/05/2006													
Officer Reviewing (If Applicable) <i>[Signature]</i>						ID. Number 0180-000		Routed To		Referred To		Assigned To		By		Date							
Case Status		Clearance Type 1. Arrest 2. Exceptional 3. Unfounded				A-Adult J-Juvenile		Date Cleared		Arrest Number		Number Arrested											
Exception Type 1. Extradition Declined		2. Arrest on Primary Offense Secondary Offense Without Prosecution		3. Death of Offender 4. V/W Refused to Cooperate		5. Prosecution Declined 6. Juvenile / No Custody		OBTS Number				Page 1 of 2											

15

NARRATIVE CONTINUATION

1. Offense **1** Juvenile
2. Arrest
1. Original **1**
2. Supplement

Agency ORI Number HP05	Agency Name FLORIDA HIGHWAY PATROL	Agency Report Number FHP06OFF036880
----------------------------------	--	---

Original Date Reported 04/03/2006	Case Reference
---	----------------

FOR MR. STEPHEN TO VIEW TO SEE IF HE (MR. STEPHEN) RECOGNIZED ANYONE. MR JONATHAN FOOTE VIEWED THE VIDEO WITH MR. STEPHEN; HOWEVER, THIS PROVED FRUITLESS. IT IS UNKNOWN WHEN AND WHERE THE CREDIT CARD WAS LOST OR STOLEN.

NARRATIVE CONTINUATION

Report Contains		Related Perort Number(s)	
Officer(s) Reporting LIEUTENANT ERIC MADILL		ID. Number(s) 1544-194	Troop C
Officer Reviewing (If Applicable) <i>[Signature]</i>		Routed To	Referred To
Case Studies		Assigned To	By
Date 04/05/2006		Date	
Clearance Type 1. Arrest 2. Exceptional	3. Unfounded	A-Adult J-Juvenile	Date Cleared
Arrest Number	Number Arrested	OBTS Number	Page 2 of 2
Exception Type 1. Extradiction Declined	2. Arrest on Primary Offense Secondary Offense Without Prosecution	3. Death of Offender 4. V/W Refused to Cooperate	5. Prosecution Declined 6. Juvenile / No Custody