

SA	AGENCY ID. (ORI) GA GA0440200	INCIDENT REPORT			CASE NUMBER 07-148361		
INCIDENT TYPE FRAUDULENT ACTIVITY 16-9-1 THEFT BY TAKING 16-8-2			COUNTS 1 1	INCIDENT CODE 2699 2399	PREMISE TYPE 1 HIGHWAY 2 SVC. STATION 3 CONVENIENCE STORE 4 BANK 5 COMMERCIAL 6 RESIDENCE 7 SCHOOL/CAMPUS 8 ALL OTHER		
EVENT	INCIDENT LOCATION 2555 FIELD SPRING DR LITHONIA GA			LOC CODE 441	WEAPON TYPE 1 GUN 2 KNIFE 3 HANDB/FIST, ETC. 4 CUTTING TOOL 5 OTHER		
INCIDENT DATE TO	TIME 10/30/2007 15:40	DATE	TIME 15:40	STRANGER TO STRANGER YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK <input type="checkbox"/>	WEAPON TYPE 1 GUN 2 KNIFE 3 HANDB/FIST, ETC. 4 CUTTING TOOL 5 OTHER		
VICTIM	COMPLAINANT	ADDRESS	PHONE NUMBER				
VICTIM	VICTIM'S NAME GILMORE, LOVELL	RACE B	SEX M	AGE 30	RESIDENCE PHONE 404-433-4466	BUSINESS PHONE	
VICTIM	ADDRESS 4608 WOODYHILL CT LITHONIA GA 30058-	CENSUS TRACT			EMPLOYER OR OCCUPATION UNKNOWN OR NOT STATED		
OFFENDER	STUDENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO NAME BRIDGEWATER, SHARON	RACE B	SEX F	DATE OF BIRTH 04/11/1962	AGE 45		
OFFENDER	WANTED ADDRESS 2555 FIELD SPRING DR LITHONIA GA 30058-	CENSUS TRACT	HEIGHT 5'07	WEIGHT 145	HAIR 1 BLACK	EYES 2 BROWN	
OFFENDER	WARRANT CHARGES THEFT BY TAKING 16-8-2	COUNTS 1	OFFENSE CODE 2399	OFFENSE/ARREST 1	JURIS 1. CITY 2. COUNTY 3. STATE 4. OUT OF STATE 5. UNKNOWN		
ARREST	TOTAL NUMBER ARRESTED 1	ARREST AT OR NEAR OFFENSE SCENE YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	DATE OF OFFENSE 10/30/2007				
VEHICLE	TAG NUMBER STOLEN RECOVD SUSPECTS	STATE YEAR MAKE	YEAR MODEL	STYLE	COLOR		
VEHICLE	MOTOR SIZE (CID)	AUTO TRANS <input type="checkbox"/>	MAN. <input type="checkbox"/>	INSURED BY			
WITNESS	NAMES	ADDRESS	PHONE NUMBER				
PROPERTY	VEHICLES STOLEN RECOVERED	CURRENCY, NOTES, ETC OFFICE EQUIP.	JEWELRY, PREC. METALS TV, RADIO, ETC.	FURS HOUSEHOLD GOODS	PROPERTY RECOVERY INFO ONLY THEFT/RECOVERY 1 <input type="checkbox"/> DATE OF THEFT 10/30/2007		
PROPERTY	CLOTHING STOLEN RECOVERED	CONSUMABLE GOODS LIVESTOCK	OTHER \$3.00 \$3.00	TOTAL \$3.00 \$3.00	JURISDICTION CODES 1 CITY 2 COUNTY 3 STATE 4. OUT OF STATE 5. UNKNOWN		
ADM.	GCIC ENTRY <input type="checkbox"/> WARRANT <input type="checkbox"/> MISSING PERSONS <input type="checkbox"/> VEHICLE <input type="checkbox"/> ARTICLE <input type="checkbox"/> BOAT <input type="checkbox"/> GUN <input type="checkbox"/> SECURITIES <input type="checkbox"/> WHITE REFRIGERATOR <input type="checkbox"/>						
DRUG	DID INVESTIGATION INDICATE THAT THIS INCIDENT WAS DRUG-RELATED? IF YES PLEASE INDICATE THE TYPE OF DRUG(S) USED BY OFFENDER			YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
DRUG	<input type="checkbox"/> 1 - AMPHETAMINE <input type="checkbox"/> 2 - BARBITURATE <input type="checkbox"/> 3 - COCAINE <input type="checkbox"/> 4 - HALLUCINOGEN <input type="checkbox"/> 5 - HEROIN <input type="checkbox"/> 6 - MARIJUANA <input type="checkbox"/> 7 - METHAMPHETAMINE <input type="checkbox"/> 8 - OPIUM <input type="checkbox"/> 9 - SYNTHETIC NARCOTIC <input type="checkbox"/> U - UNKNOWN						
CLEAR	REQUIRED DATA FIELDS FOR CLEARANCE REPORT DATE OF CLEARANCE 10/30/2007	CLEARED BY ARREST <input checked="" type="checkbox"/>	EXCEPTIONALLY CLEARED <input type="checkbox"/>	UNFOUNDED <input type="checkbox"/>	REPORT DATE 10/30/2007		
CLEAR	ADULT <input checked="" type="checkbox"/>	JUVENILE <input type="checkbox"/>					
NARRATIVE	***** Narrative Title: SUPPLEMENTAL NARRATIVE Date Entered: 10/31/2007 9:54:25 PM						
REPORTING OFFICER C Y SCHREINER	NUMBER 2491	APPROVING OFFICER	NUMBER				

AGENCY: DEKALB COUNTY POLICE DEPARTMENT
Jurisdiction: GA0440200
Report Date / Time: 10/30/2007 3:40:00 PM
Incident/Case Number: 07-148361
Case Description: 12
Primary Officer Name/ID: C Y SCHREINER/2491
Approved By:
Date/Time Printed: 7/14/2008 8:06:21 AM

Narrative: Page 2

ON 10/30/07 AT 3:40P.M., I RESPONDED TO ASSIST OFFICER C. SCHREINER #2491 (REFERENCE CASE #148274) IN REFERENCE TO A TRAFFIC STOP WITH THREE OCCUPANTS. UPON MY ARRIVAL, I SPOKE WITH TWO MALE OCCUPANTS AND OBSERVED A LARGE REFRIGERATOR, A STOVE, AND A POSSIBLE DISHWASHER IN THE REAR OF THE VAN THAT WAS STOPPED. THE MALES STATED THAT THE DRIVER, IDENTIFIED AS SHARON BRIDGEWATER HAD PICKED THEM UP AT THE CORNER OF HILLVALE ROAD AND DEKALB MEDICAL TO HELP HER MOVE THE APPLIANCES.

I SPOKE WITH SHARON BRIDGEWATER AND ASKED HER WHO'S PROPERTY WAS IN THE REAR OF THE VAN. BRIDGEWATER STATED IT WAS HERS AND SHE WAS GOING AROUND TRYING TO SELL THE ITEMS. I ASKED HER WHERE SHE LIVED AND SHE STATED AT 2555 FIELDSPRINGS DRIVE, WHICH WAS RIGHT AROUND THE CORNER FROM THE TRAFFIC STOP. I ASKED HER IF SHE OWNED THE HOUSE OR RENTED. BRIDGEWATER STATED SHE RENTED THE PROPERTY. I QUESTIONED HER ABOUT TAKING PROPERTY OUT OF THE RENTAL PROPERTY AND SHE STATED IT WAS HER PROPERTY. BRIDGEWATER STATED THAT THE TWO MALES HAD HELP HER LOAD THE APPLIANCES IN HER VAN AND SPENT THE NIGHT WITH HER THEN SHE HAD DROPPED THEM OFF BRIEFLY PICKING THEM UP AGAIN SHORTLY BEFORE THE TRAFFIC STOP.

I WENT TO 2555 FIELDSPRING ROAD TO DO A PROPERTY CHECK AND FOUND THE BACK DOOR OPEN. I CONDUCTED A SECURITY SWEEP OF THE RESIDENCE AND OBSERVED THAT SEVERAL APPLIANCES WAS MISSING FROM THE KITCHEN. DURING MY SWEEP I OBSERVED A PHOTOCOPY OF A WHITE MALES LICENSE AND SOCIAL SECURITY CARD (CHARLES ALLEN DORSEY 1/1/1951) WHICH SEEMED OUT OF PLACE. THE ONLY THING IN THE RESIDENCE WAS PAPERWORK, TWO COMPUTERS, AND A COUPLE OF MATRESSES. I ATTEMPTED TO LOCATE THE OWNER OF THE PROPERTY'S INFORMATION AND FOUND THE OWNERS NAME, LOWELL GILMORE WITH A CELLPHONE NUMBER. I SPOKE WITH GILMORE BRIEFLY AND HE STATED THAT BRIDGEWATER WAS SUPPOSE TO BE MANAGING THE PROPERTY WITH RENTERS BUT HAD NOT RECEIVED ANY FUNDS FOR ANY RENTER. GILMORE STATED GILMORE WAS NOT SUPPOSE TO BE LIVING IN THE HOUSE ONLY MANAGING THE PROPERTY AND NOT TAKING ANY ITEMS FROM THE RESIDENCE.

I CONTACTED DETECTIVE GEORGE AND LT. HAMILTON FROM THE EAST CRIMINAL INVESTIGATION DIVISION AND WAS INSTRUCTED TO OBTAIN THE PAPER WORK LEFT IN THE RESIDENCE. ALL ITEMS OBTAINED WAS TURNED OVER TO CID FOR FURTHER INVESTIGATION.

Narrative Title: INITIAL REPORT
Date Entered: 10/31/2007 10:08:38 PM

ON 10/30/2007 AT APPROXIMATELY 1540 HOURS, I OBSERVED A WHITE CHEVY VAN, TRAVELING EASTBOUND ON HILLVALE RD. I OBSERVED THE VEHICLE HAD A DRIVE OUT TAG. I THEN

AGENCY: DEKALB COUNTY POLICE DEPARTMENT
Jurisdiction: GA0440200
Report Date / Time: 10/30/2007 3:40:00 PM
Incident/Case Number: 07-148361
Case Description: 12
Primary Officer Name/ID: C Y SCHREINER/2491
Approved By:
Date/Time Printed: 7/14/2008 8:06:21 AM

Narrative: Page 3

INITIATED MY BLUE LIGHTS.

I APPROACHED THE DRIVER (IDENTIFIED AS SHARON BRIDgewater) AND ASKED FOR A LICENSE. THERE WERE TWO BLACK MALE SUBJECTS ALSO IN THE VAN WITH HER, IDENTIFIED AS:

SHANE MCFARLANE 11/21/1977
 2087 RAINTREE BEND
 LITHONIA, GA 30058

JOHNНИE BOY MCNEILL 6/26/1952
 116 WOODCREST WALK
 LITHONIA, GA 30058

THE TWO SUBJECTS ADVISED MS. BRIDgewater PICKED THEM UP AT COVINGTON HWY AND DEKALB MEDICAL PKWY. THEY STATED SHE WANTED THEM TO HELP MOVE A REFRIGERATOR INTO HER RESIDENCE AT 2555 FIELD SPRING DR. OFC. FRANKLIN ASKED MS. BRIDgewater IF SHE OWNED THE HOUSE. SHE STATED SHE WAS RENTING THE RESIDENCE. OFC. FRANKLIN ASKED MS. BRIDgewater FOR A PHONE NUMBER TO CONTACT THE LANDLORD AND SHE STATED SHE DID NOT HAVE IT IN HER CELL PHONE, BUT IT WAS AT THE HOUSE.

OFC. FRANKLIN WENT TO THE HOUSE TO CHECK THE LOCATION AND VERIFY MS. BRIDgewater'S STATEMENT. UPON CHECKING THE LOCATION, OFC. FRANKLIN LOCATED AN UNSECURED BACK DOOR. UPON CHECKING THE INSIDE OF THE RESIDENCE, OFC. FRANKLIN ADVISED SEVERAL OF THE KITCHEN APPLIANCES WERE MISSING. (SEE SUPPLEMENTAL).

UPON TALKING TO THE TWO MALE SUBJECTS, MR. MCFARLANE AND MR. MCNEILL ADVISED THAT THEY DID KNOW MS. BRIDgewater. MR MCFARLANE STATED THAT HE STAYED AT HER RESIDENCE LAST NIGHT, BECAUSE HIS MOM KICKED HIM OUT OF HER HOUSE ON RAINTREE BEND.

DETECTIVE LT. HAMILTON WAS CONTACTED AND NOTIFIED OF THE INCIDENT.

AFTER I HAD TRANSPORTED MS. BRIDgewater TO DEKALB COUNTY JAIL, I MET WITH OFC. FRANKLIN BACK AT THE RESIDENCE. UPON WALKING THROUGH THE RESIDENCE, WE LOCATED A FOLDER WITH MORTAGE INFORMATION IN IT. WRITTEN ON TOP OF THE FOLDER WAS THE NAME LOWELL GILMORE, ALONG WITH A PHONE NUMBER. OFC. FRANKLIN CALLED THE NUMBER AND TALKED TO MR. GILMORE. I ALSO SPOKE WITH MR. GILMORE OVER THE PHONE. HE STATED HE WAS FAMILIAR WITH MS. BRIDgewater. HE ADVISED THEY WERE SUPPOSE TO PURCHASE THE HOUSE TOGETHER, BUT IT FELL THROUGH. HE STATED HE THEN PURCHASED THE HOUSE ALONE. MR. GILMORE ADVISED MS. BRIDgewater STATED SHE HAD ANOTHER INVESTOR WHO WAS INTERESTED IN BUYING THE HOUSE. HE STATED MS. BRIDgewater WAS ACTING AS HIS REALESTATE AGENT. HE FURTHER ADVISED HE HAS NOT HEARD FROM MS. BRIDgewater FOR SEVERAL MONTHS, UNTIL SHE CONTACTED HIM BY

AGENCY: DEKALB COUNTY POLICE DEPARTMENT
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Report Date / Time: 10/30/2007 3:40:00 PM
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Date/Time Printed: 7/14/2008 8:06:21 AM

Narrative: Page 4

PHONE, EARLIER THIS DATE.
I RETURNED TO DEKALB COUNTY JAIL TO ADD THEFT BY TAKING CHARGE TO MS. BRIDGEWATER'S JAIL DOCKET. WHEN I ENTERED INTAKE, SHE WAS AT THE COUNTER. I ADVISED HER OF THE SITUATION, SHE STATED MR. GILMORE WAS LYING. SHE ADVISED THERE WAS A FOLDER WITH ALL THE HOUSE INFORMATION IN IT. SHE FURTHER ADVISED IF MR. GILMORE WENT TO THE LOCATION, HE WOULD DESTROY THE PAPERS.
LT. HAMILTON ADVISED OFC. FRANKLIN AND I TO REMOVE THE FOLDER WITH THE MORTAGE INFORMATION AND A COMPUTER FROM THE RESIDENCE.
THE INVESTIGATION WAS TURNED OVER TO EAST CID.
THE APPLIANCES WERE LEFT IN THE VEHICLE. VEHICLE WAS IMPOUNDED BY STATEWIDE TOWING, WHEN MS. BRIDGEWATER WAS TRANSPORTED TO JAIL. (ALSO SEE CASE #07-148274. VALUE OF APPLIANCES ARE UNKNOWN.

ADDITIONAL VICTIMS

CASE NUMBER
07-148361

VICTIMS NAME GILMORE, LOVELL	RACE <input type="checkbox"/> B	SEX <input type="checkbox"/> M	AGE <input type="checkbox"/> 30	RESIDENCE PHONE 404-433-4466	BUSINESS PHONE
ADDRESS 4608 WOODYHILL CT	CENSUS TRACT		EMPLOYER OR OCCUPATION UNKNOWN OR NOT STATED		
STUDENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	IF YES, NAME VICTIM'S SCHOOL				

VICTIMS NAME	RACE <input type="checkbox"/>	SEX <input type="checkbox"/>	AGE <input type="checkbox"/>	RESIDENCE PHONE	BUSINESS PHONE
ADDRESS	CENSUS TRACT		EMPLOYER OR OCCUPATION		
STUDENT? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, NAME VICTIM'S SCHOOL				

VICTIMS NAME	RACE <input type="checkbox"/>	SEX <input type="checkbox"/>	AGE <input type="checkbox"/>	RESIDENCE PHONE	BUSINESS PHONE
ADDRESS	CENSUS TRACT		EMPLOYER OR OCCUPATION		
STUDENT? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, NAME VICTIM'S SCHOOL				

VICTIMS NAME	RACE <input type="checkbox"/>	SEX <input type="checkbox"/>	AGE <input type="checkbox"/>	RESIDENCE PHONE	BUSINESS PHONE
ADDRESS	CENSUS TRACT		EMPLOYER OR OCCUPATION		
STUDENT? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, NAME VICTIM'S SCHOOL				

VICTIMS NAME	RACE <input type="checkbox"/>	SEX <input type="checkbox"/>	AGE <input type="checkbox"/>	RESIDENCE PHONE	BUSINESS PHONE
ADDRESS	CENSUS TRACT		EMPLOYER OR OCCUPATION		
STUDENT? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, NAME VICTIM'S SCHOOL				

VICTIMS NAME	RACE <input type="checkbox"/>	SEX <input type="checkbox"/>	AGE <input type="checkbox"/>	RESIDENCE PHONE	BUSINESS PHONE
ADDRESS	CENSUS TRACT		EMPLOYER OR OCCUPATION		
STUDENT? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, NAME VICTIM'S SCHOOL				

VICTIMS NAME	RACE <input type="checkbox"/>	SEX <input type="checkbox"/>	AGE <input type="checkbox"/>	RESIDENCE PHONE	BUSINESS PHONE
ADDRESS	CENSUS TRACT		EMPLOYER OR OCCUPATION		
STUDENT? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, NAME VICTIM'S SCHOOL				

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ADDRESS	CENSUS TRACT		EMPLOYER OR OCCUPATION		
STUDENT? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, NAME VICTIM'S SCHOOL				

VICTIMS NAME	RACE <input type="checkbox"/>	SEX <input type="checkbox"/>	AGE <input type="checkbox"/>	RESIDENCE PHONE	BUSINESS PHONE
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STUDENT? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, NAME VICTIM'S SCHOOL				

INCIDENT PROPERTY

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07-148361