

(JUVENILE)  
- INCIDENT REPORT -  
HINESVILLE POLICE DEPARTMENT

EVENT	INCIDENT TYPE:	AGGRAVATED ASSAULT WITH OTHER DEVICE	COUNTS	2	INCIDENT CODE	16-5-21A3	PREMISE TYPE	<input type="checkbox"/> 1- HIGHWAY	<input type="checkbox"/> 2- SVC.STATION
		ASSIST OTHER AGENCY		1		994	<input type="checkbox"/> 3- CONVENIENCE STORE	<input type="checkbox"/> 4- BANK	
		CRUELTY TO CHILDREN 2ND DEGREE		2		16-5-70C	<input type="checkbox"/> 5- COMMERCIAL	<input type="checkbox"/> 6- RESIDENCE	
	INCIDENT LOCATION		LOC. CODE			<input type="checkbox"/> 7- SCHOOL/ CAMPUS	<input type="checkbox"/> 8- ALL OTHER		

INCIDENT DATE	TIME	DATE	TIME	STRANGER TO STRANGER
06/29/2019	2056	06/29/2019	2114	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> UNK <input type="checkbox"/>

COMPLAINANT'S NAME	ADDRESS	PHONE NUMBER
LOCKETT, ANITA	654 MAHONEY ROAD - HINESVILLE, GA 31313-	- -

VICTIM'S NAME	RACE	SEX	DOB	AGE	RESIDENCE PHONE	BUSINESS PHONE
	W	M			919-429-2703	- -

ADDRESS	CENSUS TRACT	EMPLOYER OR OCCUPATION

STUDENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	IF YES, NAME VICTIM'S SCHOOL	OFFENDER'S NAME	PERSON ID	SSN	RACE	SEX	DATE OF BIRTH	AGE
		FITTON, STEVEN	FIST031584		W	M		35

SUSPECT	ADDRESS	CENSUS TRACT	HEIGHT	WEIGHT	HAIR	EYES
<input type="checkbox"/>			502	140	BRO	BRN

WARRANT	CHARGES	COUNTS	OFFENSE CODE	OFFENSE/ARREST	JURIS.
<input checked="" type="checkbox"/>	AGGRAVATED ASSAULT WITH OTHER DEVICE	2	16-5-21A3	1 1	1. CITY
ARREST	CRUELTY TO CHILDREN 2ND DEGREE	2	16-5-70C	1 1	2. COUNTY
<input checked="" type="checkbox"/>					3. STATE
					4. OUT OF STATE
					5. UNKNOWN

TOTAL NUMBER ARRESTED	ARREST AT OR NEAR OFFENSE SCENE	DATE OF OFFENSE
1	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	06/29/2019

<input type="checkbox"/> STOLEN	TAG NUMBER	STATE	YEAR	V.I.N	PLATE ONLY	VIN PLATE ONLY
<input type="checkbox"/> RECOVD	YEAR	MAKE	MODEL	STYLE	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> SUSPECTS	0					
	MOTOR SIZE (CID)	AUTO	MAN.	SPD.	INSURED BY	
		TRANS.	<input type="checkbox"/>	<input type="checkbox"/>		

WITNESS NAMES	ADDRESS	HOME PHONE	WORK PHONE
NICOLE FITTON	102 SHEHA TERRACE - GOLDSBORO, NC 27534-	919-429-2703	

VEHICLES		CURRENCY, NOTES, ETC.	JEWELRY, PREC METALS	FURS	PROPERTY RECOVERY INFO ONLY THEFT / RECOVERY JURISDICTION CODES <input type="checkbox"/> <input type="checkbox"/> 1. CITY 2. COUNTY 3. STATE 4. OUT OF STATE 5. UNKNOWN
STOLEN	\$0.00	\$0.00	\$0.00	\$0.00	
RECOVERED	\$0.00	\$0.00	\$0.00	\$0.00	DATE OF THEFT
CLOTHING		OFFICE EQUIP.	TV, RADIO, ETC.	HOUSEHOLD GOODS	//
STOLEN	\$0.00	\$0.00	\$0.00	\$0.00	
RECOVERED	\$0.00	\$0.00	\$0.00	\$0.00	
FIREARMS		CONSUMABLE GOODS	LIVESTOCK	OTHER	TOTAL
STOLEN	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
RECOVERED	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

DID INVESTIGATION INDICATE THAT THIS INCIDENT WAS DRUG RELATED?  YES  NO  
 IF YES, PLEASE INDICATE THE TYPE OF DRUG(S) USED BY OFFENDER.

1- AMPHETAMINE  2- BARBITURATE  3- COCAINE  4- HALLUCINOGEN  5- HEROIN  
 6- MARIJUANA  7- METHAMPHETAMINE  8- OPIUM  9- SYNTHETIC NARCOTIC  U- UNKNOWN

REQUIRED DATA FIELDS FOR CLEARANCE REPORT	<input checked="" type="checkbox"/> ACTIVE	<input checked="" type="checkbox"/> CLEARED BY ARREST	<input type="checkbox"/> EXCEPTIONALLY CLEARED	<input type="checkbox"/> UNFOUNDED	<input type="checkbox"/> OTHER	REPORT DATE
DATE OF CLEARANCE	11/04/2019	<input checked="" type="checkbox"/> ADULT	<input type="checkbox"/> JUVENILE	<input type="checkbox"/> PENDING	<input type="checkbox"/> CLOSED BY INVESTIGATION	06/30/2019

\*\*\* SEE INCIDENT REPORT PAGE 2 FOR NARRATIVE \*\*\*

REPORTING OFFICER	NUMBER	APPROVING OFFICER	NUMBER
GREER, JONATHAN	172		

EVENT  
VICTIM  
OFFENDER  
VEHICLE  
PROPERTY  
ADM.  
DRUG  
CLEAR  
NARR.

This is page #2 of the incident report. It contains supplemental persons records including additional Complainants, Victims, Offenders and Witnesses.

All Offenders, Extra Victims, Extra Complainants:

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Person Name:	[REDACTED]	Pers ID:	FIMA050594	Type:	OTH
Address:	[REDACTED]	Height:	[REDACTED]		
Home Phone:	[REDACTED]	Work Phone:	[REDACTED]	Weight:	[REDACTED]
Cell Phone:	[REDACTED]			Hair:	[REDACTED]
DLNO:	[REDACTED]	SSN:	[REDACTED]	Eyes:	[REDACTED]
DOB:	[REDACTED]	Age:	[REDACTED]		
		Race:	[REDACTED]	Sex:	[REDACTED]

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RPTID: 664  
AGENCY: GA0890100

FAMILY VIOLENCE  
INCIDENT REPORT - NARRATIVE

CASENO: 190627559

HINESVILLE POLICE DEPARTMENT  
Print Date: 11/13/2019 11:04:39 AM

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ON 6-29-2019, I RESPONDED TO [REDACTED] IN REFERENCE TO ASSISTING ANITA  
LOCKETT FROM DFACS WHILE SHE CONDUCTED A WELFARE CHECK ON A 3 YEAR OLD CHILD,  
[REDACTED]. UPON ARRIVAL, I MADE CONTACT WITH MRS. LOCKETT WHO STATED THEIR  
AGENCY HAD RECEIVED A CALL REGARDING THREE CHILDREN THAT LIVED AT THE  
RESIDENCE. SHE STATED DFACS LATER DISCOVERED TWO OF THE CHILDREN WERE  
CURRENTLY IN NORTH CAROLINA BUT THEY NEEDED TO SEE THE OTHER CHILD, [REDACTED] TO  
MAKE SURE SHE WAS OK.

MRS. LOCKETT AND I MADE CONTACT WITH KATIE FITTON AT THE RESIDENCE. MRS. LOCKETT  
ASKED FOR THE FATHER, STEVEN FITTON TO COME TO THE RESIDENCE ALSO SO SHE COULD  
SPEAK TO HIM ALSO. MRS. LOCKETT CHECKED [REDACTED] AND VERIFIED SHE WAS SAFE. MRS.  
LOCKETT DID NOT OBSERVE ANY INJURIES OR ANYTHING THAT WOULD LEAD HER TO BELIEVE  
[REDACTED] WAS NOT SAFE.

MR. FITTON ARRIVED ON SCENE AND MRS. LOCKETT SPOKE WITH HIM AND MRS. FITTON  
REGARDING THE CASE. MR. FITTON EXPLAINED THAT [REDACTED] WAS HIS CHILD WITH MRS. FITTON.  
HE ADVISED HE HAS CUSTODY OF HIS OTHER DAUGHTER; HOWEVER, SHE IS IN NORTH  
CAROLINA WITH HER BIOLOGICAL MOTHER PER THEIR CUSTODY AGREEMENT. HE STATED  
THE ONLY OTHER CHILD WHO HAD RESIDED THERE WAS HIS STEP SON, BUT HE HAD NOT  
LIVED THERE SINCE THE 2017-2018 SCHOOL YEAR. HE STATED HIS STEP SON MOVED BACK TO  
NORTH CAROLINA WITH HIS MOTHER FOR THE 2018-2019 SCHOOL YEAR. MRS. LOCKETT  
ADVISED MR. FITTON THAT IF HE HAD ANY FURTHER QUESTIONS TO CALL HER. MRS. LOCKETT  
DEPARTED THE RESIDENCE.

Officer Name: GREER, JONATHAN

Badge: 172

Date Added: 06/30/2019

AGENCY ID: GA0890100 TIME: 0259

- ARREST / BOOKING REPORT - HINESVILLE POLICE DEPARTMENT

CASE NUMBER: 190627559

DEFENDANT NAME (LAST, FIRST, MIDDLE): FITTON, STEVEN PERSON ID: FIST031584 RACE: W SEX: M DATE OF BIRTH: 03/15/1984 PLACE OF BIRTH: AGE: 35 HEIGHT: 502 WEIGHT: 140 HAIR: BRO EYES: BRN SOCIAL SECURITY NUMBER: VISIBLE SCARS AND MARKS: GCIC/CK: DOCKET NUMBER:

ADDRESS - NUMBER AND STREET: CITY, STATE AND ZIP CODE: HINESVILLE, GA 31313 PHONE NUMBER: ALIAS: DRIVERS LICENSE NUMBER: STATE:

EMPLOYER OR OCCUPATION: ARRESTING AGENCY: HINESVILLE POLICE... ARRESTING OFFICER: MITCHNER, TONY NUMBER: 192

BOOKING OFFICER NAME: NUMBER: 0 FINGERPRINTED / PHOTOGRAPHED BY: NUMBER: 0 CURRENT DATE: 06/30/2019

DATE OF ARREST: 11/04/2019 TIME: 0930 LOC CODE: LOCATION: OFFENSE DATE: 06/29/2019 TIME: 2056 OBTS NUMBER: FBI NUMBER:

PHOTO #1 PHOTO #2 PHOTO #3

PERSONAL DATA

CHARGE

LOC.

BOND

DISPOSITION

MEDICAL

DRUG

Table with columns: CHARGE ID, COUNTS, A, B, C. Rows: CHARGE (AGGRAVATED ASSAULT WITH OTHER..., CRUELTY TO CHILDREN 2ND DEGREE), STATUTE (16-5-21A3, 16-5-70C).

Table with columns: NEAR SCENE, OFFENSE, ARREST. Includes checkboxes for YES/NO and location options (CITY, COUNTY, STATE, OUT OF STATE, UNK).

Table with columns: BOND AMT., BOND TYPE, RET. DATE, BOND CO. Values: 0.00, //.

Table with columns: DAYS, AMOUNT. Rows: SENTENCE, TIME SERVED, GOOD TIME, BALANCE, PAID, RECPT. NO., RETURNED, RECPT. NO.

CELL NUMBER TRANSFER REASON


ANY KNOWN ALLERGIES? ANY HISTORY OF HEART DISEASE? IS SUBJECT NOW UNDER DOCTOR'S CARE AND/OR TAKING ANY MEDICATIONS?


ANY SIGNS / HISTORY OF DRUG USE? 1- AMPHETAMINE 2- BARBITURATE 3- COCAINE 4- HALLUCINOGEN 5- HEROIN 6- MARIJUANA 7- METHAMPHETAMINE 8- OPIUM 9- SYNTHETIC NARCOTIC U- UNKOWN O- OTHER

RELEASE DATE: 11/04/2019 TIME: 1200 RELEASING OFFICER - LAST NAME: MITCHNER, TONY NUMBER: 192 AGENCY RELEASED TO: LCJ

SIGNATURE OF RECEIVING OFFICIAL: X \_\_\_\_\_

- INCIDENT REPORT -  
Property & Evidence Summary  
HINESVILLE POLICE DEPARTMENT

Case #	190627559	 * 1 9 0 6 2 7 5 5 9 * Incident 06/29/2019      Report 06/30/2019
Inc Type	16-5-21A3 AGGRAVATED ASSAULT WITH OTHER DEVICE	
Location		
Rpt Officer	GREER, JONATHAN      172	

Item#	1	Est. Value \$	0.00	Status	IN PROPERTY ROOM		
Loss Type	EVIDENCE (NOT REPORTABLE FOR NIBRS)			Pouch	0 of 0		
Category	FIREARMS			Temp Locker			
Owner	FITTON, STEVEN			ER Locker / Bin	/ SLPISTOL-PC-22		
Address							
Quantity	1.000	Color	BLACK	Caliber	380	Drgtype	
Make	GLOCK			Model	42		
Serial #	ACXU319			Own Mark			
Date Rec	11/04/2019	Rec By	HOWARD, TRACEY		105		
Item	PISTOL			Item Tracking Number  * 1 6 8 2 *			
Rec. Loc.	HPD						
Disposition							
Disp. Date	/ /						
Release Date	/ /						

Monetary	<u>Total Amt.</u>	<u>Bills</u>	<u>Ones</u>	<u>Twos</u>	<u>Fives</u>	<u>Tens</u>	<u>Twenties</u>	<u>Fifties</u>	<u>Hundreds</u>
Information	\$ 0.00		0	0	0	0	0	0	0
		<u>Coins</u>	<u>Pennies</u>	<u>Nickels</u>	<u>Dimes</u>	<u>Quarters</u>	<u>Half Dollars</u>	<u>Dollars</u>	
			0	0	0	0	0	0	

Rec. Remark

Property & Evidence Testing - Testing Required:     YES     NO

Case # 190627559  
 Inc Type 16-5-21A3 AGGRAVATED ASSAULT WITH OTHER DEVICE  
 Location  
 Rpt Officer GREER, JONATHAN 172



Incident 06/29/2019 Report 06/30/2019

Item# 2 Est. Value \$ 0.00 Status IN PROPERTY ROOM  
 Loss Type NONE Pouch 0 of 0  
 Category FIREARM ACCESSORIES Temp Locker  
 Owner FITTON, STEVEN ER Locker / Bin / SLOC-A22

Address  
 Quantity 1.000 Color Caliber Drgtype  
 Make GLOCK Model  
 Serial # Own Mark  
 Date Rec 11/04/2019 Rec By HOWARD, TRACEY 105

Item Tracking Number

Item MAGAZINE  
 Rec. Loc. HPD  
 Disposition  
 Disp. Date / /  
 Release Date / /

Monetary	Total Amt.	Bills	Ones	Twos	Fives	Tens	Twenties	Fifties	Hundreds
Information	\$ 0.00	0	0	0	0	0	0	0	0
		Coins	Pennies	Nickels	Dimes	Quarters	Half Dollars	Dollars	
		0	0	0	0	0	0	0	

Rec. Remark

Property & Evidence Testing - Testing Required:  YES  NO

Case # 190627559  
 Inc Type 16-5-21A3 AGGRAVATED ASSAULT WITH OTHER DEVICE  
 Location  
 Rpt Officer GREER, JONATHAN 172




\* 1 9 0 6 2 7 5 5 9 \*

Incident 06/29/2019 Report 06/30/2019

Item# 3 Est. Value \$ 0.00 Status IN PROPERTY ROOM  
 Loss Type NONE Pouch 0 of 0  
 Category FIREARM ACCESSORIES Temp Locker  
 Owner FITTON, STEVEN ER Locker / Bin / SLOC-A22  
 Address  
 Quantity 7.000 Color Caliber 380 Drgtype  
 Make Model  
 Serial # Own Mark  
 Date Rec 11/04/2019 Rec By HOWARD, TRACEY 105  
 Item BULLETS  
 Rec. Loc. HPD  
 Disposition  
 Disp. Date / /  
 Release Date / /

Item Tracking Number



\* 1 6 8 4 \*

Monetary Information	Total Amt.	Bills	Ones	Twos	Fives	Tens	Twenties	Fifties	Hundreds
	\$ 0.00		0	0	0	0	0	0	0
		Coins	Pennies	Nickels	Dimes	Quarters	Half Dollars	Dollars	
			0	0	0	0	0	0	

Rec. Remark

Property & Evidence Testing - Testing Required:  YES  NO

