

SUPPLIMENT		X	J.C.S.D.	D. ESTEP	97-3300	
Connecting Case Report No. 97-1709, 97-3326, 97-3327 & 97-3328			Victim Name Original Report GARTIN, TAMARA		Date This Report 03/04/97	
Classification X RESTRAINING VIOLATION			Offense Status: Cleared by Arrest X		Recommend Case: Review Closure X	
Reclassification			Exceptionally Cleared			
			X Unfounded			
Item No.	Brand Name	Description	Serial No.	Value Stolen	Value Recovered	Value Damaged

Narrative: On 02/05/97 I met with Deputy Grant Whitus who advised he needed assistance on Violation of Restraining Order case wherein the suspect continues to violate the existing court orders and has outstanding warrants for his arrest.

On 02/21/97 at 1620 hours I received a message from Markus Merritt, the message indicated that he had located the license plate number that was on the vehicle that Steve Gartin had been operating. Mr. Merritt advised that the license number was HJN139. On 02/25/97 I obtained a listing on Co. license plate number HJN139, from the Co. Dept. Of Motor Vehicle. Their records indicate that HJN139 is registered to BINGHAM, JESSE AND DELORES on a 1987 Subaru station wagon. On 02/25/97 I contacted Mr. Merritt who advised that BINGHAM, JESSE is deceased and was Steve Gartin's stepfather, BINGHAM, DELORES is Steve Gartin's mother.

ON 02/25/97 at approximately 1300 hours I received a telephone call from Mr. Merritt, advising Steve Gartin has began calling their residence again. I advised Mr. Merritt to call J.C.S.D. and file another report. I also told Mr. Merritt to *57, (which is an automated call trapping feature that is serviced by your telephone company), the next time they received a call from Mr. Gartin.


On 02/25/97 at approximately 2000 hours Deputy Searle arrived at 5587 So Urban St. to take the Violation of Restraining Order report.

On 02/25/97 at approximately 2010 hours Deputy Searle received a call from Mr. Gartin, while Deputy Searle was taking the report. When the call with Mr. Gartin was concluded Deputy Searle *57 the telephone, Deputy Searle contacted U.S. West Security and was advised that the trapped call came from (303) 271-0609 which is listed to Guy Larsen at 1400 Golden Circle unit #108, Golden, Co. Deputy Searle contacted me and advised me of what had occurred.

On 02/25/97 between 2130 and 2230 hours I conducted surveillance on 1400 Golden Circle which is an apartment complex. I located in the parking lot for that apartment building a 1987 Subaru gray in color, Co. License Number HJN139. Based upon previous information I had received it was known that Lynn Laseter lives at 1400 Golden Cir. #108. I also knew that Lynn Laseter and Mr. Gartin have worked together in the past.

On 02/26/97 at 0630 hours I began surveilling the apartment complex located at 1400 Golden Circle. The vehicle I had previously identified as operated by Mr. Gartin was parked in the same location it was parked in the night before. A vehicle that I had identified as used by Lynn Laseter was also in the same location it was parked in the night before.

On 02/26/97 at 0830 hours I contacted Sergeant Randy West and appraised him of what had occurred since 1800 hours on 02/25/97. I maintained surveillance on the apartment complex until I was relieved by Detective Hendershot of Golden Police Department. I then responded to J.C.S.D. where attended a briefing

Officer Signature 	Unit Y-21	Number 5629	Supervisor Initials and Date RW 030597	Page 1 of 3
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Reclassification				Unfounded				Review		Closure X
Item No.	Brand Name	Description	Serial No.	Value Stolen	Value Recovered	Value Damaged				

of the J.C.S.D. Swat Team who was going to attempt serve the outstanding arrest warrant's on Steve Gartin.

On 02/26/97 at approximately 1130 hours I relieved Detective Hendershot at 1400 Golden Circle. I maintained surveillance on the apartment building until the J.C.S.D. Swat Team arrived which was at approximately 1305 hours.

On 02/26/97 at approximately 1413 hours I took custody of, LASETER, ERNEST LYNN DOB 06/13/55. Mr. Laseter had been in unit #108 with Steve Gartin, he advised that there are no firearms in the apartment. I kept custody of Mr. Laseter until Mr. Gartin was removed from the apartment by the Swat Team.

On 02/26/97 at approximately 1700 hours with the assistance of Investigator Al Simmons of J.C.S.D. we produced an AFFIDAVIT IN SUPPORT OF WARRANTLESS ARREST and two UNIFORM SUMMONS & COMPLAINTS, for Steve Gartin. Upon completion of the documents I took the Affidavit and the Summons to the Jail where I had two counts of VIOLATION OF RESTRAINING ORDER place on Steve Gartin's arrest report. The Affidavit and the Summons were on Case Numbers 97-1709 and 97-3326, 97-3327 and 97-3328.

On 03/04/97 I discovered that Investigator Al Simmons had transposed, the date of violation, on summons number 80221 on case number 97-1709. The date that was entered was 010397 and should have been 013097.

Officer Signature <i>[Signature]</i>	Unit X-2	Number 5829	Supervisor Initials and Date MER 10 1997	Page <u>2</u> of <u>2</u>
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THIS IS A LEGAL DOCUMENT READ BOTH SIDES

FORM SUMMONS & COMPLAINT OR PENALTY ASSESSMENT										ROAD CODE	MILE POST	CR	NO.		
PEOPLE OF THE STATE OF COLORADO VS. <u>977M 811</u>											<u>A</u>	<u>ACF</u>	<u>97-1709</u>	<u>80221</u>	
Defendant (Last Name)		(First)		(Middle)		Date of Birth Mo. Day Yr.		Age	<input type="checkbox"/> Traffic <input checked="" type="checkbox"/> Penal		Violation No. Day Yr.				
<u>GASTIN</u>		<u>STEVE</u>		<u>DOUGLAS</u>		<u>(30.9.47)</u>		<u>42</u>			<u>010397</u>				
Defendant's Address				City		State		Zip Code		Direction of Travel N S E W		Approx. Time of Violation			
<u>9970 W. JEWELL AVE.</u>				<u>LAUREL</u>		<u>CO.</u>						<u>7:00 PM</u>			
Driver's License Number and Type			State	Race	Sex	Weight	Height	Hair	Eyes	Home Telephone		County	No.		
<u>526 60-1000</u>			<u>CO.</u>	<u>W</u>	<u>M</u>	<u>150</u>	<u>5'7"</u>	<u>BRN.</u>	<u>BLU.</u>	<u>None</u>		<u>JEFFERSON</u>	<u>11</u>		
Employer Name				Employer Address				Occupation		Business Telephone		Traffic Accident		Injuries Involved	
<u>Unknown</u>												<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Vehicle License Number and Type		State	Vehicle Year	Make	Type or Body Style		Approximate Location of Violation, State of Colorado								
							<u>(X) On 5547 S. U.S. 50 ST</u>								
Vehicle Color (Top/Bottom)		VIN													
Registered Owner (Name and Address) () Name as above; or										YOU ARE SUMMONED AND ORDERED TO APPEAR TO ANSWER CHARGES AS STATED BELOW IN:					
<u>JEFFERSON COUNTY JUDICIAL AND ADMINISTRATIVE FACILITY</u>										<u>11:30 PM</u>					
<u>COURT AT: 100 JEFFERSON COUNTY PARKWAY</u>										<u>GOLDEN, CO 80401</u>					
<u>COLORADO—ON</u>										<u>19 97 AT</u>					
CHARGE	SECTION	CRS						COM.CODE	FINE \$	SURCHARGE \$	POINTS				
No. 1	<u>19-6-403</u>	<u>VIOLATION OF A RESTAURANT ORDER</u>													
<u>DEFENDANT DID UNLAWFULLY VIOLATE RESTAURANT CODES.</u>															
CHARGE	SECTION	CRS						COM.CODE	FINE \$	SURCHARGE \$	POINTS				
No. 2															
NRVC ()	CUSTODIAL ARREST ()	FINGER PRINTED ()	CDL ()	CMCL VEH REQ CDL INVOLVED ()	PLACARDED HAZMAT ()	VICTIMS ASSISTANCE SURCHARGE TOTAL \$	TOTAL TO BE PAID BY MAIL \$ (FINE AND SURCHARGE)								
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
SUMMONS TRAFFIC INFRACTION () OFFENSE (X)				PENALTY ASSESSMENT TRAFFIC INFRACTION () OFFENSE ()				MAILED ()							
WITHOUT ADMITTING GUILT, I HEREBY PROMISE TO APPEAR AT THE TIME AND PLACE INDICATED ABOVE.				UPON PAYMENT OF THIS PENALTY ASSESSMENT WITHIN 20 DAYS, I ACKNOWLEDGE GUILT OF ALL CHARGES CONTAINED HEREON AND UNDERSTAND THAT THE POINTS INDICATED ABOVE WILL BE ASSESSED AGAINST MY DRIVER'S LICENSE.											
DEFENDANT <u>JAILED</u>				DEFENDANT <u>DUPLIX</u>											
NOTICE: SEE INSTRUCTIONS ON REVERSE SIDE				NOTICE: SEE INSTRUCTIONS ON REVERSE SIDE											
THE UNDERSIGNED HAS PROBABLE CAUSE TO BELIEVE THAT THE DEFENDANT COMMITTED THE OFFENSE(S) AGAINST THE PEACE AND DIGNITY OF THE PEOPLE OF THE STATE OF COLORADO AND AFFIRMS THAT A COPY OF THIS SUMMONS & COMPLAINT OR PENALTY ASSESSMENT WAS DULY SERVED UPON THE DEFENDANT.															
DISTRICT	TROOP	PATROL	DATED THIS <u>26</u> DAY OF <u>Feb</u> 19 <u>97</u>		OFFICER <u>[Signature]</u>					NO. <u>5029</u>					

JEFFERSON COUNTY
SHERIFF'S DEPARTMENT



ACTIVITY SHEET

JUVE CASE: YES
 NO

CASE NBR: 97-1709

REPORT DATE: 013097 TIME: 2039
OCCUR. DATE: 013097 TIME: 1700 / DATE: 013097 TIME: 2000

BUSINESS NAME: _____ TYPE: _____
LOCATION OF OCCURRENCE:
NEB DIR STREET TYPE UNIT/AMP DISTRICT:
15587 S JORDAN ST REPORT DIST:
CITY: MT CO ZIP CODE: 80227 AREA:
CROSS 1: _____ CROSS 2: _____

CASE TYPE: INCIDENT TRAFFIC MISDEMEANOR FELONY

CASE STATUS: ADMINISTRATIVELY CLEARED INCIDENT/EVENT/FIELD CONTACT CLOSED OPEN
 ADMIN. OPEN PENDING CLEARED BY PATROL ARREST UNAPPROVED
 CLEARED BY ARREST INVESTIGATIVE OPEN PENDING UNFOUNDED
 EXCEPTIONALLY CLEARED DATE CLEARED: _____

CURRENT CODE: 18-062 CLASS: RESTRAINING ORDER violation STATUTE: 18-6-503

RPT. OFC. BDG # 0240 NAME: G. H. H. / S.
INVEST. BDG # _____ NAME: _____ DATE: _____
INVESTIGATIVE CLASS: _____ ASSOC. CASE NBR: _____

INDICATORS: GANG DMTN HATE CRIME
 GAME DOMV 8
 ALC SHOPLIFT

OFFENDER(S) USED: ALCOHOL BUYING RECEIVING OPERATING/PROMOTING/ASSISTING
 COMPUTER EQUIP. CULTIV./MANUFACT./PUBLISHING POSSESSING/CONCEALING
 DRUGS DISTRIBUTING/SELLING TRANSPORTING/TRANSMITTING/IMPORTING
 NOT APPLICABLE EXPLOITING CHILDREN USING/CONSUMING

DEPUTY SIGNATURE & # : _____ DATE: 1-30-97 SPVR: _____ COPIES TO: _____ PAGE: 1/1

WHITE RECORDS BLUE INVESTIGATIONS GREEN C.A. / V.S. CANARY: DEPUTY 9/94 JCSD/P 339

MAR 10 1997

VICTIM INFORMATION

CONTINUATION
 SUPPLEMENT

CASE NBR: 97-1107 CLASS: 120 VSP/ATM M F

VICTIM NAME: LAST GARDIN FIRST TAMARA MIDDLE A SFX A DOB 11/23/93 AGE 3
 SEX: F RACE: W HGT: 54 WGT: 20 BLD: T HAIR: B EYE: B GLSES: _____
 SSN: _____ DRIV. LIC. _____ ST. _____ MARITAL STS: _____
 S/M/T: _____ BIRTH PLACE: _____
 OCCUPATION: _____ SCHOOL: _____

VICTIM RESIDENCE: NBR: _____ DIR: _____ STREET: _____ TYPE: _____ BFX: _____ UNIT: _____ PHONE: 948 9844
 CITY: LA STATE: CA ZIP CODE: 90210

EMPLOYER NAME: _____
 EMPLOYER ADDRESS: NBR: _____ DIR: _____ STREET: _____ TYPE: _____ SFX: _____ UNIT: _____ PHONE: 793 6253
 CITY: LA STATE: _____ ZIP CODE: 90111

RELATIONSHIP OF VICTIM TO OFFENDER:
 SPOUSE IN-LAW NEIGHBOR EMPLOYER
 COMMON-LAW SPOUSE STEPPARENT BABYSITTEE (BABY) OTHERWISE UNKNOWN
 PARENT STEPCHILD BOY/GIRL FRIEND STRANGER
 SIBLING STEPSIBLING CHILD OF B/G ABOVE VICTIM WAS OFFENDER
 CHILD OTHER FAMILY HOMOSEXUAL REL. RELATIONSHIP UNKNOWN
 GRANDPARENT ACQUAINTANCE EX-SPOUSE
 GRANDCHILD FRIEND EMPLOYEE

TYPE OF VICTIM: INDIVIDUAL GOVERNMENT BUSINESS FINANCIAL RESIDENT STATUS: RESIDENT
 RELIGIOUS SOCIETY/PUBLIC OTHER UNKNOWN NONRESIDENT
 UNKNOWN

INJURY TYPE:(CHECK UP TO FIVE) ETHNICITY: HISPANIC
 NONE MINOR INJURY MAJOR INJURY BROKEN BONES NONHISPANIC
 POSS. INT. INJURIES LOSS OF TEETH SEVERE LACERATION UNCONSCIOUSNESS UNKNOWN

TYPE OF WEAPON / FORCE INVOLVED:
 FIREARM(type not stated) OTHER FIREARM PERSONAL WEAPONS NARCOTICS/DRUGS NONE
 HANDGUN KNIFE/CUTTING INSTR. POISON ASPHYXIATION
 RIFLE BLUNT OBJECT EXPLOSIVES OTHER
 SHOTGUN MOTOR VEHICLE FIRE/INCENDIARY UNKNOWN

AGGRAVATED ASSAULT / HOMICIDE CIRCUMSTANCES:(CHECK UP TO TWO) OTHER FELONY INVOLVED
 ARGUMENT ASSAULT ON LAW OFFICER DRUG DEALING
 JUVENILE GANG LOVER'S QUARREL MERCY KILLING
 OTHER CIRCUMSTANCES UNKNOWN CIRCUMSTANCES GANGLAND

STATUS OFFENSE: ATTEMPTED COMPLETED NBR. OF PREMISES ENTERED: _____ FORCE NO FORCE

LOCATION OF OFFENSE: (CHECK ONE)
 AIR/BUS/TRAIN TERMINAL DRUG STORE LIQUOR STORE OTHER/UNKNOWN
 BANK/SAVINGS & LOAN FIELD/WOODS PARKING LOT/GARAGE
 BAR/NIGHT CLUB GOVERNMENT/PUBLIC BLDGS. RENTAL/STORAGE FACILITY
 CHURCH/SYNAGOGUE/TEMPLE GROCERY/SUPERMARKET RESIDENCE/HOME
 COMMERCIAL/OFFICE BUILDING HIGHWAY/ROAD/ALLEY RESTAURANT
 CONSTRUCTION SITE HOTEL/MOTELETC. SCHOOL/COLLEGE
 CONVENIENCE STORE JAIL/PRISON SERVICE/GAS STATION
 DEPARTMENT/DISCOUNT STORE LAKE/WATERWAY SPECIALTY STORE (PET,TV,ETC.)

DEPUTY SIGNATURE: _____ DATE: 3/10/97 SPVR: _____ PAGE: 2/0

WHITE RECORDS CANARY INVESTIGATIONS PAX: VICTIM ADVOCATE GOLDEN ROD: DEPUTY JCSD/P330

MAR 10 1997

VICTIM INFORMATION

CONTINUATION
 SUPPLEMENT

CASE NBR: 97-1109 CLASS: PD VIOLATION EM OF

VICTIM NAME:
 LAST FRIZZI FIRST TONY MIDDLE JOHN SFX B DOB 1-16-63 AGE 34
 SEX: M RACE: B HGT: 60 WGT: 255 BLD: M HAIR: BRN EYES: BRN GLSES: _____
 SSN: _____ DRIV. LIC. _____ ST. _____ MARITAL STS: _____
 S/M/T/I: _____ BIRTH PLACE: _____
 OCCUPATION: _____ SCHOOL: _____
VICTIM RESIDENCE:
 NBR: 5587 DIR: S STREET: W. 22ND TYPE: _____ SFX: _____ UNIT: _____ PHONE: 948-9844
 CITY: FT STATE: GA ZIP CODE: 30227
EMPLOYER NAME: _____
EMPLOYER ADDRESS:
 NBR: _____ DIR: _____ STREET: _____ TYPE: _____ SFX: _____ UNIT: _____ PHONE: _____
 CITY: _____ STATE: _____ ZIP CODE: _____

RELATIONSHIP OF VICTIM TO OFFENDER:

<input type="checkbox"/> SPOUSE	<input type="checkbox"/> IN-LAW	<input type="checkbox"/> NEIGHBOR	<input type="checkbox"/> EMPLOYER
<input type="checkbox"/> COMMON-LAW SPOUSE	<input type="checkbox"/> STEPPARENT	<input type="checkbox"/> BABYSITTEE (BABY)	<input type="checkbox"/> OTHERWISE UNKNOWN
<input type="checkbox"/> PARENT	<input type="checkbox"/> STEPCCHILD	<input type="checkbox"/> BOY/GIRL FRIEND	<input type="checkbox"/> STRANGER
<input type="checkbox"/> SIBLING	<input type="checkbox"/> STEPSIBLING	<input type="checkbox"/> CHILD OF B/G ABOVE	<input type="checkbox"/> VICTIM WAS OFFENDER
<input type="checkbox"/> CHILD	<input type="checkbox"/> OTHER FAMILY	<input type="checkbox"/> HOMOSEXUAL REL.	<input type="checkbox"/> RELATIONSHIP UNKNOWN
<input type="checkbox"/> GRANDPARENT	<input checked="" type="checkbox"/> ACQUAINTANCE	<input type="checkbox"/> EX-SPOUSE	
<input type="checkbox"/> GRANDCHILD	<input type="checkbox"/> FRIEND	<input type="checkbox"/> EMPLOYEE	

TYPE OF VICTIM: INDIVIDUAL GOVERNMENT BUSINESS FINANCIAL RESIDENT STATUS: RESIDENT
 RELIGIOUS SOCIETY/PUBLIC OTHER UNKNOWN NONRESIDENT
 UNKNOWN

INJURY TYPE:(CHECK UP TO FIVE) NONE MINOR INJURY MAJOR INJURY BROKEN BONES **ETHNICITY:** HISPANIC
 POSS. INT. INJURIES LOSS OF TEETH SEVERE LACERATION UNCONSCIOUSNESS NONHISPANIC
 UNKNOWN

TYPE OF WEAPON / FORCE INVOLVED:
 FIREARM(type not stated) OTHER FIREARM PERSONAL WEAPONS NARCOTICS/DRUGS NONE
 HANDGUN KNIFE/CUTTING INSTR. POISON ASPHYXIATION
 RIFLE BLUNT OBJECT EXPLOSIVES OTHER
 SHOTGUN MOTOR VEHICLE FIRE/INCENDIARY UNKNOWN

AGGRAVATED ASSAULT / HOMICIDE CIRCUMSTANCES:(CHECK UP TO TWO)
 ARGUMENT ASSAULT ON LAW OFFICER DRUG DEALING OTHER FELONY INVOLVED
 JUVENILE GANG LOVER'S QUARREL MERCY KILLING
 OTHER CIRCUMSTANCES UNKNOWN CIRCUMSTANCES GANGLAND

STATUS OFFENSE: ATTEMPTED COMPLETED **NBR. OF PREMISES ENTERED:** _____ FORCE NO FORCE

LOCATION OF OFFENSE: (CHECK ONE)
 AIR/BUS/TRAIN TERMINAL DRUG STORE LIQUOR STORE OTHER/UNKNOWN
 BANK/SAVINGS & LOAN FIELD/WOODS PARKING LOT/GARAGE
 BAR/NIGHT CLUB GOVERNMENT/PUBLIC BLDGS. RENTAL/STORAGE FACILITY
 CHURCH/SYNAGOGUE/TEMPLE GROCERY/SUPERMARKET RESIDENCE/HOME
 COMMERCIAL/OFFICE BUILDING HIGHWAY/ROAD/ALLEY RESTAURANT
 CONSTRUCTION SITE HOTEL/MOTEL/ETC. SCHOOL/COLLEGE
 CONVENIENCE STORE JAIL/PRISON SERVICE/GAS STATION
 DEPARTMENT/DISCOUNT STORE LAKE/WATERWAY SPECIALTY STORE (PET,TV,ETC.)

DEPUTY SIGNATURE: _____ **DATE:** 1-31-97 **SPVR:** _____ **PAGE:** 318

ADDITIONAL INDIVIDUALS

CONTINUATION
 SUPPLEMENT

CASE NBR: 97-1709

CLASS: 20 V-CORPORATE EM OF

INVL LAST NAME FIRST MIDDLE SFX DOB AGE
 W X GARDIN APRIL
 SEX: _____ RACE: _____ HGT: _____ WGT: _____ BLD: _____ HAIR: _____ EYE: _____ GLSES: _____
 SSN: _____ DRIVER'S LICENSE: _____ ST: _____ MART.STS: _____
 SMT: _____ BIRTH PLACE: _____ JCID# _____
 OCCUPATION: _____ SCHOOL: _____
 RESIDENCE:
 NBR: 5587 DIR: S. JEFFERSON STREET: TYPE: SFX: UNIT: PHONE: 948-9844
 CITY: Pitt STATE: OH ZIP CODE: 45207
 EMPLOYER NAME / ADDRESS:
 NBR: _____ DIR: _____ STREET: _____ TYPE: SFX: UNIT: PHONE: _____
 CITY: _____ STATE: _____ ZIP CODE: _____

INVL LAST NAME FIRST MIDDLE SFX DOB AGE
 W X GARDIN ELIGATH
 SEX: _____ RACE: _____ HGT: _____ WGT: _____ BLD: _____ HAIR: _____ EYE: _____ GLSES: _____
 SSN: _____ DRIVER'S LICENSE: _____ ST: _____ MART.STS: _____
 SMT: _____ BIRTH PLACE: _____ JCID# _____
 OCCUPATION: _____ SCHOOL: _____
 RESIDENCE:
 NBR: 5587 DIR: S. JEFFERSON STREET: TYPE: SFX: UNIT: PHONE: 948-9844
 CITY: Pitt STATE: OH ZIP CODE: 45207
 EMPLOYER NAME / ADDRESS:
 NBR: _____ DIR: _____ STREET: _____ TYPE: SFX: UNIT: PHONE: _____
 CITY: _____ STATE: _____ ZIP CODE: _____

INVL LAST NAME FIRST MIDDLE SFX DOB AGE

 SEX: _____ RACE: _____ HGT: _____ WGT: _____ BLD: _____ HAIR: _____ EYE: _____ GLSES: _____
 SSN: _____ DRIVER'S LICENSE: _____ ST: _____ MART.STS: _____
 SMT: _____ BIRTH PLACE: _____ JCID# _____
 OCCUPATION: _____ SCHOOL: _____
 RESIDENCE:
 NBR: _____ DIR: _____ STREET: _____ TYPE: SFX: UNIT: PHONE: _____
 CITY: _____ STATE: _____ ZIP CODE: _____
 EMPLOYER NAME / ADDRESS:
 NBR: _____ DIR: _____ STREET: _____ TYPE: SFX: UNIT: PHONE: _____
 CITY: _____ STATE: _____ ZIP CODE: _____

DEPUTY SIGNATURE & #:

[Signature]

DATE:

1-30-97

SPVR:

PAGE:

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WHITE: RECORDS BLUE: INVESTIGATIONS GREEN: C.A. / V.S. CANARY: DEPUTY

97-1709

SUSPECT / ARRESTEE

CONTINUATION
 SUPPLEMENT

CASE NO.: 97 109 CLASS: POS. VIOLATION GM OF

BIAS MOTIVATION:

RACIAL:

- ANTI - WHITE
- ANTI - BLACK
- ANTI - AMERICAN INDIAN / ALASKAN NATIVE
- ANTI - ASIAN / PACIFIC ISLANDER
- ANTI - MULTI - RACIAL

RELIGIOUS:

- ANTI - JEWISH
- ANTI - CATHOLIC
- ANTI - PROTESTANT
- ANTI - ISLAMIC (MOSLEM)
- ANTI - OTHER RELIGION
- ANTI - MULTI - RELIGIOUS
- ANTI - ATHEISM / AGNOSTICISM

ETHNICITY / NATIONAL ORIGIN:

- ANTI - ARAB
- ANTI - HISPANIC
- ANTI - OTHER ETHNICITY / NATIONAL ORIGIN

SEXUAL:

- ANTI - MALE HOMOSEXUAL (GAY)
- ANTI - FEMALE HOMOSEXUAL (LESBIAN)
- ANTI - HOMOSEXUAL (GAYS & LESBIANS)
- ANTI - HETEROSEXUAL
- ANTI - BISEXUAL

SUSPECT:

LAST NAME FIRST MIDDLE SFX DOB AGE

7 GARRID STEVEN 150 4/15 02049 47

SEX: M RACE: W HGT: 59 WGT: 150 BLD: T HAIR: BRN EYE: BRN GLSES:

S / M / T: DRIVER'S LICENSE: K-413610 ST: MART.STS:

SSN: 52680 1000 BIRTH PLACE: JCID#

OCCUPATION: SCHOOL:

CLOTHING:

RESIDENCE:

NBR: DIR: STREET: TYPE: SFX: UNIT: PHONE:

2488 N Hwy 67 SADDLE CITY: STATE: 9710 W. FELLOE ZIP CODE:

SADDLE

EMPLOYER NAME / ADDRESS:

NBR: DIR: STREET: TYPE: SFX: UNIT: PHONE:

CITY: STATE: ZIP CODE:

ETHNICITY:

- HISPANIC
- NON HISPANIC
- UNKNOWN

NUMBER OF OFFENDERS:

1

NUMBER OF ARRESTEES:

MULTIPLE CLEARANCE INDICATOR:

- MULTIPLE
- COUNT ARRESTEE
- NOT APPLICABLE

RESIDENT STATUS:

- RESIDENT
- NON RESIDENT
- UNKNOWN

TYPE OF ARREST:

- ON VIEW
- SUMMONED/CITED
- TAKEN INTO CUSTODY

DISPOSITION OF ARRESTEE UNDER 18:

- HANDLED WITHIN DEPARTMENT
- REFERRED TO OTHER AUTHORITY

ARRESTEE WAS ARMED WITH:

- UNARMED
- FIREARM
- HANDGUN
- RIFLE
- SHOTGUN
- OTHER FIREARM
- LETHAL CUTTING INSTRUMENT
- CLUB/BLACKJACK/ETC.

ARREST DATE:

UCR ARREST OFFENSE CODE:

DEPUTY SIGNATURE

DATE:

SPVR:

PAGE:

WHITE RECORDS
1/24 INTERM

CANARY INVESTIGATIONS

PINK VICTIM ADVOCATE

GOLDEN ROD DEPUTY

JCSO/P338-3

9/21/97

CONTINUATION

SUPPLEMENT

Reporting Agency		Reporting Officer		Case Report No. 97-709
Connecting Case Report No.		Victim Name Original Report GARY MERRITT		Date This Report
Classification <input type="checkbox"/>	Offense Status: Open <input type="checkbox"/>	Exceptionally Cleared <input type="checkbox"/>		Recommend Case: Review <input type="checkbox"/>
Reclassification <input type="checkbox"/>	Cleared by Arrest <input type="checkbox"/>	Unfounded <input type="checkbox"/>		Closure <input type="checkbox"/>
Item No.	Quantity	Brand Name	Description	Serial No.
				Value Stolen
				Value Recovered
				Value Damaged

Investigation

ON 013097, AT 2039 HRS I WAS DISPATCHED TO 5587 S JERMAN ST, REFERENCE A RESTRAINING ORDER VIOLATION.

UPON ARRIVAL, AT 2044 HRS, I CONTACTED (V) MARTIN AND HER BOY-FRIEND, (U) MERRITT.

(V) MARTIN TOLD ME HER EX-HUSBAND AND FATHER OF HER TWO CHILDREN, (S) GARTIN, CALLED THEIR RESIDENCE, THREE TIMES, TODAY BETWEEN 1700 HRS AND 2000 HRS.

(V) MARTIN SHOWED ME A NO CONTACT RESTRAINING ORDER, CR 96 C 7388, SIGNED ON 010296.

SHE ALSO SHOWED ME CIVIL PAPERS ISSUED AT A LATER DATE, CR 95 D 2718 STATING THAT (S) GARTIN COULD CALL THE RESIDENCE BETWEEN 1900 HRS, AND 1915 HRS TO TALK TO HIS CHILDREN.

(U) MERRITT ALSO SHOWED ME A RESTRAINING ORDER, CR 96 C 07386 BY A JUDGE HOPKIN, STATING (S) GARTIN TO HAVE NO CONTACT WITH (U) MERRITT, ALSO SIGNED 070296.

(U) MERRITT PLAYED THE PHONE RECORDED TAPE. THE FIRST CALL (S) GARTIN STATED "I LOVE YOU KIDS, PICK UP THE PHONE" "WE SHOULD PRAY", "I LOVE YOU KIDS."

THE SECOND CALL (S) GARTIN SAID "THIS IS STEVEN GARTIN, MARKUS MERRITT, I KNOW YOU, I KNOW WHAT YOU ARE AND WHAT YOU DO. WE'LL HAVE PLENTY OF FUN"

THE THIRD CALL HE CALL FOR HIS CHILDREN.

AT 2135 HRS, (S) GARTIN CALLED. I ASKED HIM HIS LOCATION AND PHONE

Officer Signature 	Unit 2640	Number 40	Supervisor Initials and Date	Assigned To	Page of 1
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97-709
MERRITT

CONTINUATION

SUPPLEMENT

Reporting Agency

Reporting Officer

Case Report No.

97-089

Connecting Case Report No.

Victim Name Original Report

Date This Report

Classification
Reclassification

Offense Status: Open
Cleared by Arrest


Exceptionally Cleared
Unfounded

Recommend Case: Review
Closure

Item No.	Quantity	Brand Name	Description	Serial No.	Value Stolen	Value Recovered	Value Damaged
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NUMBER, HE HUNG UP ON ME.
 (1) GARDIN TOLD ME SHE HAS
 A RESTRICTION ~~ON~~ ORDER CASE, NOW
 BEING INVESTIGATED, BY THE GREEN
 WOOD WILKINSON PD, DUE TO SIGARTELL
 SENDING HER FAX LETTERS.
 I TOOK THE PHONE TAPE
 AND BOOKED IT INTO LOSS
 EVIDENCE AT THE END OF MY SHIFT

~~DISP~~
 OPEN PENDING CONTACT WITH
 LETTER COUNSEL, BECAUSE OF CONFLICTING
 EVIDENCE

Officer Signature 	Unit 3050	Number	Supervisor Initials and Date	Assigned To	Page of 1 of 1
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**JEFFERSON COUNTY SHERIFF'S DEPARTMENT
EVIDENCE/PROPERTY INVENTORY AND SUBMISSION REPORT**

CASE REPORT NUMBER

27-1709

OFFENSE(S) RO VIOLATION FELONY MISD OTHER

Date 1/30/17

Location of Incident:

5587 S URBAN ST

Submitting Deputy:

White

SUBMISSION CODES: C-Crime Scene V-Victim DISPOSITION CODES: H-Hold (30-60-90) F-Found Item RTN-Return To
W-Warrant S-Suspect A-Autopsy O-Other E-Evidence D-Destroy O-Other

Int.	Item	Quan.	Sub Code	Description:	Serial No.	Location of Recovery	Dispo Code	Lab Exam Req.
	1	1	S	<u>PHONE TAPE</u>		<u>STAIR</u>	<u>E</u>	
	2			Description:		Location of Recovery		
	3			Description:		Location of Recovery		
	4			Description:		Location of Recovery		
	5			Description:		Location of Recovery		
	6			Description:		Location of Recovery		
	7			Description:		Location of Recovery		
	8			Description:		Location of Recovery		
	9			Description:		Location of Recovery		
	0			Description:		Location of Recovery		

VICTIM: GARDIN T. Phone: (H) 948-9814 (W)
 ADDRESS: 5587 S URBAN ST City: Pitt State: GA Zip: 30202
 SUSPECT: GARDIN S. Phone: (H) (W)
 ADDRESS: UTK City: State: Zip:

Item	Location	CHAIN OF CUSTODY																	
		Int.	Date																
1	UTK																		

REMARKS, Explanations, Inventory:

SEND LAB RESULTS TO: _____ Date: _____ Signature/Submitting Deputy Emp. # [Signature] 40

ADDITIONAL INDIVIDUALS

CONTINUATION
 SUPPLEMENT

CASE NBR: 97-17097

CLASS: RES. INFORMATION M F

INVL	LAST NAME	FIRST	MIDDLE	SFX	DOB	AGE
<u>IN</u>	<u>DEPT</u>	<u>D.A.</u>	<u>L.</u>	<u>HIRSCH</u>		
SEX: _____	RACE: _____	HGT: _____	WGT: _____	BLD: _____	HAIR: _____	EYE: _____ GLSES: _____
SSN: _____	DRIVER'S LICENSE: _____			ST: _____	MART.STS: _____	
S/MT: _____	BIRTH PLACE: _____			JCID# _____		
OCCUPATION: _____				SCHOOL: _____		
RESIDENCE:						
NBR: _____	DIR: _____	STREET: _____	TYPE: _____	SFX: _____	UNIT: _____	PHONE: _____
CITY: _____		STATE: _____		ZIP CODE: _____		
EMPLOYER NAME / ADDRESS: <u>LEFFCO D.A. OFFICE</u>						
NBR: _____	DIR: _____	STREET: _____	TYPE: _____	SFX: _____	UNIT: _____	PHONE: _____
CITY: <u>100 LEFFCO PKWY</u>		STATE: <u>golden CO</u>		ZIP CODE: <u>80401</u>		<u>271-6550</u>

INVL	LAST NAME	FIRST	MIDDLE	SFX	DOB	AGE
SEX: _____	RACE: _____	HGT: _____	WGT: _____	BLD: _____	HAIR: _____	EYE: _____ GLSES: _____
SSN: _____	DRIVER'S LICENSE: _____			ST: _____	MART.STS: _____	
S/MT: _____	BIRTH PLACE: _____			JCID# _____		
OCCUPATION: _____				SCHOOL: _____		
RESIDENCE:						
NBR: _____	DIR: _____	STREET: _____	TYPE: _____	SFX: _____	UNIT: _____	PHONE: _____
CITY: _____		STATE: _____		ZIP CODE: _____		
EMPLOYER NAME / ADDRESS: _____						
NBR: _____	DIR: _____	STREET: _____	TYPE: _____	SFX: _____	UNIT: _____	PHONE: _____
CITY: _____		STATE: _____		ZIP CODE: _____		

INVL	LAST NAME	FIRST	MIDDLE	SFX	DOB	AGE
SEX: _____	RACE: _____	HGT: _____	WGT: _____	BLD: _____	HAIR: _____	EYE: _____ GLSES: _____
SSN: _____	DRIVER'S LICENSE: _____			ST: _____	MART.STS: _____	
S/MT: _____	BIRTH PLACE: _____			JCID# _____		
OCCUPATION: _____				SCHOOL: _____		
RESIDENCE:						
NBR: _____	DIR: _____	STREET: _____	TYPE: _____	SFX: _____	UNIT: _____	PHONE: _____
CITY: _____		STATE: _____		ZIP CODE: _____		
EMPLOYER NAME / ADDRESS: _____						
NBR: _____	DIR: _____	STREET: _____	TYPE: _____	SFX: _____	UNIT: _____	PHONE: _____
CITY: _____		STATE: _____		ZIP CODE: _____		

DEPUTY SIGNATURE & #: [Signature] DATE: 1-31-97 SPVR: RHW 1-31-97 PAGE: 2

MAR 10 1997

CONTINUATION

SUPPLEMENT

Reporting Agency _____ Reporting Officer _____ Case Report No. 97-1709

Connecting Case Report No. _____ Victim Name Original Report GASTIN Date This Report _____

Classification Offense Status: Open Exceptionally Cleared Recommend Case: Review
Reclassification Cleared by Arrest Unfounded Closure

Item No. Quantity Brand Name Description Serial No. Value Stolen Value Recovered Value Damaged

INVESTIGATION
ON 013197, AT 16-15 HRS,
I CONTACTED DEPUTY D.A. L. HICKMAN,
REFERENCE THIS CASE.
DEPUTY L. HICKMAN REVIEWED THE
CASE AND ADVISED ME THE AD.A.S
OFFICE REFUSES TO ACCEPT THE
CASE.
I CONTACTED (N) GASTIN AND
ADVISED HER OF THE CASE REFUSAL.

DISPO
EXCEPTIONALLY CLEARED, DAS
OFFICE REFUSED CASE

Officer Signature: [Signature] Unit: 40 Number: 40 Supervisor Initials and Date: _____ Assigned To: _____ Page of: 1

RECOVERED
MAR 10 1997

THIS IS A LEGAL DOCUMENT READ BOTH SIDES

UNIFORM SUMMONS & COMPLAINT OR PENALTY ASSESSMENT

THE PEOPLE OF THE STATE OF COLORADO VS: 71012 ROAD CODE MILE POST A ACF CR No. 80222

Defendant (Last Name) KARTIN, ALICE (First) (Middle) Date of Birth Mo. Day Yr. 13 10 49 Age 47 () Traffic (X) Penal Violation Mo. Day Yr. 02 25 97

Defendant's Address 4470 W. Jewell Ave City LAKESIDE State CO Zip Code 81050 Direction of Travel N S E W Approx. Time of Violation 8:00 PM

Driver's License Number and Type State CO Race W Sex M Weight 150 Height 59 Hair BRN Eyes BLU Home Telephone County JEFFERSON No. 11

Employer Name Employer Address Occupation Business Telephone Traffic Accident Injuries Involved () Yes () No () Yes () No

Vehicle License Number and Type State Vehicle Year Make Type or Body Style Approximate Location of Violation, State of Colorado

Vehicle Color (Top/Bottom) VIN () On 5567 S. URBAN () At Intersection With: -MILES FROM

Registered Owner (Name and Address) () Same as above; or YOU ARE SUMMONED AND ORDERED TO APPEAR TO ANSWER CHARGES AS STATED BELOW IN:

JEFFERSON COUNTY JUDICIAL AND ADMINISTRATIVE FACILITY GOLDEN, CO COURT AT: 100 JEFFERSON COUNTY PARKWAY IN: 80401 COLORADO-ON 4-5 19 97 AT 1:15 PM

CHARGE SECTION No. 1 16-6 803 CRS Violation of Restraining Order COM.CODE FINE SURCHARGE POINTS

Defendant Downloaded by Victim Restraint Agency

CHARGE SECTION No. 2 COM.CODE FINE SURCHARGE POINTS

NRVC () CUSTODIAL ARREST () FINGER PRINTED () CDL () CMCL VEH REQ CDL INVOLVED () PLACARDED HAZ MAT () VICTIMS ASSISTANCE SURCHARGE TOTAL \$ TOTAL TO BE PAID BY MAIL \$ (FINE AND SURCHARGE)

SUMMONS - TRAFFIC INFRACTION () OFFENSE () PENALTY ASSESSMENT TRAFFIC INFRACTION () OFFENSE () MAILED () WITHOUT ADMITTING GUILT, I HEREBY PROMISE TO APPEAR AT THE TIME AND PLACE INDICATED ABOVE. UPON PAYMENT OF THIS PENALTY ASSESSMENT WITHIN 20 DAYS, I ACKNOWLEDGE GUILTY OF ALL CHARGES CONTAINED HEREON AND UNDERSTAND THAT THE FINES INDICATED ABOVE WILL BE ASSESSED AGAINST MY DRIVER'S LICENSE.

DEFENDANT JA LOP DEFENDANT NOTICE: SEE INSTRUCTIONS ON REVERSE SIDE

THE UNDERSIGNED HAS PROBABLE CAUSE TO BELIEVE THAT THE DEFENDANT COMMITTED THE OFFENSE(S) AGAINST THE PEACE AND DIGNITY OF THE PEOPLE OF THE STATE OF COLORADO AND AFFIRMS THAT A COPY OF THIS SUMMONS & COMPLAINT OR PENALTY ASSESSMENT WAS DULY SERVED UPON THE DEFENDANT. OFFICER-PRINT LAST NAME STEPHEN

DISTRICT TROOP PATROL DATED THIS 11 DAY OF APR 19 97 OFFICER [Signature] NO. 5025