

# HUNTINGTON POLICE DEPARTMENT INCIDENT/OFFENSE REPORT

Initial  Follow-Up  Arrest  Insurance Report  Juvenile Arrest

ORI: WV0060200

CR# <b>07</b> <b>12097</b>	Type of Offense(s): 1. <u>Missing Person</u> 2. _____ 3. _____	Code or Statute _____ _____ _____	Reporting Officer <u>R.G. Lusk 413</u> # Asst. Officer _____ # Transport. Offr. _____ #
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Reported: Date <u>12/16/07</u> Time <u>1648</u>	Occurred From: Date <u>12/14/07</u> Time <u>1700</u>	Occurred To: Date <u>  /  /  </u> Time <u>  </u>
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EXACT LOCATION OF CRIME: 403 8th Ave Tabulation (Office Use Only)  
Area: 110

LOCATION CODE				
1-Air/Bus/Train	7-Convenience Store	13-Highway/Road/Alley	19-Rental/Storage Facility	25-Other/Unknown
2-Bank/Savings & Loan	8-Department/Discount Store	14-Hotel/Motel	20-Residence/Home	
3-Bar/Night Club	9-Drug Store/Dr. Office	15-Jail/Prison	21-Restaurant	
4-Church/Synagogue	10-Field/Woods	16-Lake/Waterway	22-School	
5-Commercial/Office Building	11-Government/Public Building	17-Liquor Store	23-Service Station/Gas Station	
6-Construction Site	12-Grocery/Supermarket	18-Parking Lot/Garage	24-Specialty Store	ENTER #: <u>20</u>

Case Disposition: 1-Arrested 2-Exception 3-Unfounded 4-Pending ENTER NUMBER 4

Cleared Exceptionally: 1-Death of Offender 5-Juvenile/No Custody 2-Prosecution Declined 6-Not Applicable 3-Extradition Denied 4-Victim Refused to Cooperate Enter # _____ Clearance Date <u>  /  /  </u>	Offense: 1-Attempted 2-Completed Enter Number <u>2</u>	Entry: F-Forcible N-Non-forcible Enter Letter <u>  </u>	Suspect Using: C-Computer Used A-Alcohol Related D-Drug Related Enter Letter <u>  </u>
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Weather: 1-Clear 2-Cloudy 3-Raining 4-Fog/Smog 5-Snow/Sleet 6-Hailing 7-Unknown ENTER # 7

VICTIM'S NAME Hickman, Leah N PHONE#: Home (    )  
Work (    )

ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_  
STATE: \_\_\_\_\_ ZIP 25701  
403 8th Ave Apt 3 HT6N WV 25701

Victim's Occupation: \_\_\_\_\_ Victim's Business Address: \_\_\_\_\_

DOB: <u>11-22-86</u>	AGE: <u>21</u>	SEX: <u>F</u>	HT: <u>5-4</u>	WT: <u>125</u>	HAIR: <u>BRN</u>	EYES: <u>BLU</u>
OLN# _____	STATE: _____	SSN: <span style="background-color: black; color: black;">XXXXXXXXXX</span>				

RACE 1-White 4-Asian/Pacific Islander 2-Black 5-Unknown 3-American Indian/Alaskan Native ENTER # <u>1</u>	ETHNICITY: 1-Hispanic 2-Non Hispanic Origin 3-Unknown ENTER # <u>2</u>	RESIDENT STATUS R-Resident N-Non-resident U-Unknown ENTER LETTER <u>R</u>
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**VICTIM INFORMATION - TYPE OF VICTIM**

1-Adult 2-Juvenile 3-Business 4-Financial Institution 5-Government 6-Religious Organization  
7-Society or Public 8-Other 9-Unknown 10-Law Enforcement Officer ENTER NUMBER 1

IF VICTIM WAS INJURED IN ANY OF THE FOLLOWING OFFENSES, PLEASE ENTER TYPE OF INJURY - CHOOSE UP TO FIVE

Kidnapping Forcible Rape Forcible Sodomy Sexual Assault with Object Robbery	Forcible Fondling Aggravated Assault Simple Assault Extortion/Blackmail	1 None 2-Apparent broken bones 3-Possible Internal Injury 4-Severe Lacerations 5-Loss of teeth	6 Unconscious 7-Minor Injury 8-Other Major Injury 9-Other ENTER NUMBER _____
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**STATUS CODE:** 1-Stolen 2 Recovered 3-Stolen/Recovered 4-Lost 5-Burned 6-Counterfeit/Forged  
7-Damaged/Destroyed/Vandalized 8-Evidence 9-Found or Inventory

**DESCRIPTION CODE**

01-Aircraft	08-Consumable Goods	17-Jewelry/Precious Metals	26-Radio/TV/VCR	35-Structures - Other
02-Alcohol	09-Credit/Debit Cards	18-Livestock	27-Recording Audio Visual	36-Tools/Power/Hand
03-Automobile	10-Drugs/Narcotics	19-Merchandise	28-Recreational Vehicles	37-Trucks
04-Bicycle	11-Drug/Narc Equipment	20-Money	29-Structures - Single Occupancy	38-Vehicle Parts/Accessories
05-Buses	12-Farm Equipment	21-Negotiable Instruments	30-Structures - Other Dwellings	39-Watercraft
06-Clothes/Furs	13-Firearms	22-Non-Negotiable Instruments	31-Structures/Commercial/Business	77-Other
07-Computer	14-Gambling Equipment	23-Office Type Equipment	32-Structures/Industrial	88-Pending Inventory
	15-Heavy Equipment	24-Other Motor Vehicle	33-Structures/Public/Community	99-Special Category
	16-Household Goods	25-Purses/Handbags/Wallets	34-Structures - Storage	

PRPS	Desc. #	QTY	Serial #	Brand/Name	Model/Name	Size, Kind, Etc.	Color	Value

NCIC ENTRY - YES  NO  NCIC#: \_\_\_\_\_ DATE OF ENTRY 12/16/07

FET AT SCENE

EVIDENCE TURNED IN BY

TAG NUMBERS

**NARRATIVE/ACTION TAKEN**

On 12-16-07 at 1648 hrs the complainant stated her daughter the victim has been missing since 12-14-07 at 1700 hrs. The complainant stated she has been to the victim residence and her car/s at her residence, and her purse, coat, and keys are all still in her apartment. The complainant stated she contacted all of the victims friends and neighbor and noones has seen or heard from her.

ADDITIONAL FIELD NOTES: YES  NO

NO. OF ATTACHMENTS 0

Reporting Officer: R. [Signature] Badge # 413

Supervisor: [Signature] Badge # 227

Date 12-16-07

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