AGENCY I.D.	
SC0260400	

INCIDENT REPORT

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			INCIDEN	IT TYPE			COMPLETED FORCED ENTRY PRE					MISE TYPE UNITS TYPE VICTII INDIVIDUAL INDIVIDUAL				
	1. 90Z - A	ll Other IBR Off	enses					■ YES	□NO	□YES	■ NO		13		☐ Business ☐ Financial ☐ Government	
								□ YES	□ NO	YES	□NO				Relig. Orgn. Soc./Public	
						□ YES		□YES	□NO				☐ Other ☐ Unknown ☐ Police Off			
EVENT		CIDENT LOCATION (SUBDIVISION, APARTMENT AND NUMBER, STREET NAME AND NUMBER ZIP CODE WEAPON TYPE														
E	W HWY					4 HR. CLOCK			DIS	SPATCH DATE	TIME 24 HR		29568		OOATION NO	
	09/09/20		8:04	DATE	2	4 HR. CLOCK	09/09		DISP.		TIME ARR	IVED	DEPART. TI	ME	OCATION NO.	
	COMPLAINANT'S	NAME (LAST, FIRST, I	MIDDLE)		RELA	TIONSHIP TO SU					AGE	ETH.	DAYTIME F	E PHONE EVENING PHONE		
	Same as	Victim No.	1					J S	ου					H B		
	ADDRESS					-	CITY	•			STATE		ZIP CODE	L	OCATION NO.	
	VICTIM'S NAME (L	AST, FIRST, MIDDLE)			RES	IDENT	RACE SEX	AGE	ETH.	DAYTIME F	PHONE E	VENING PHONE				
								J S	Xυ					H B	H B	
1.0	HEIGHT WI	EIGHT HAIR	EYES	FACIAL HAIR, SCARS	, TATOOS, GLASS	SES, CLOTHING,	PHYSICAL PE	CULIARITIE	S, ETC.	•		·		·		
VICTIM NO.	ADDRESS						CITY				STAT	E	ZIP CODE	L	OCATION NO.	
CTII																
>		VICT. 1) YES USING: ALCOHOL	NO EXPLAIN YES NO	UNK II	DRUGS: YES		IK ■ TY	PE:			С	OMPLAINT O	OF ANY NON-VI	SIBLE INJURIES	YES NO	
	VICTIM (NO. 1) TWO-MAN VEH.		N VEH. DETECTIV	-	OTHER	ALONE	ASSIST		J - 1	This Jurisdi	ction	S - State	0 - Ou	t of State U	- Unknown	
	SUSPECT	NAME (LAST, FIRST,				EX AGE			ATE OF BIR		1 1	HAIR EYES				
0.1	RUNAWAY	Spivey, Scott Ryan W M 33 N 69 170 BLN BI FACIAL HAIR, SCARS, TATOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC.														
T N(☐ WANTED ☐ WARRANT															
SUBJECT NO.	ARREST	ADDRESS						CITY			STATE		ZIP CODE	L	OCATION NO.	
SUB	☐ JAIL	SUBJECT (NO. 1) U	SING: ALCOHOL	YES NO UNK	■ ARREST	ED NEAR OFFEN	ISE SCENE	YES	NO 🗆		ATE/TIME OF	OFFENSE		DATE/TIME (OF ARREST	
	SUMMONS	DRUGS: ☐ YES	IO UNK I TYP)			9/9/2	2023 6:	04:00	PM						
	On Saturday, September 9, 2023 at approx. 1804hrs I PFC Higgs was dispatched to a shots fired with both parties on scene call at the intersection of Camp Swamp Rd. and Highway 9 in the Longs Section of Horry County. Upon my															
	scene call at the intersection of Camp Swamp Rd. and Highway 9 in the Longs Section of Horry County. Upon my arrival I spoke to the driver of the white dodge TRX truck (S2) whom stated the guy in the black truck jumped out and															
	started sl	nooting at u	s and I shot l	oack I think	he's dead	l. S2 stat	ed he ha	ad still	had h	nis pisto	ol on hi	m so I	retrieve	d it		
			eared it, and													
VE	driver's	earm was on the passenger seat. I retrieved that one, saw it was clear, and secured it in my marked police unit. The ver's side front door in the Black Chevy pick-up was open and the driver was hunched over the center console of his														
	truck wit	h his right a	ırm hanging	over the con	isole into											
NARRATI		There was a black hand gun with the slide locked back just under s hand. There were multiple cars driving there the area before I could secure the scene. I taped off as much as I														
_		ould to help stop cars from contaminating the scene. I took pictures of the scene before EMS had arrived to attempt to reserve the scene before CSI had arrived. Photos were uploaded to Evidence.com.														
	preserve	the scene of	ciore CSI na	u amveu. m	notos wei	e upioau	ed to Ev	idence	c.com	•						
										OF THEFT SENT AGENCY	,		JURISI LAW E	DICTION OF RECO NFORCEMENT AG	VERY ENCY	
ST	TYPE (GROUP)											<u>'</u>		тот	AL VALUE	
ΓYΕ	STOLEN DAMAGED															
ER.	BURNED															
TYPE (GROUP) STOLEN DAMAGED BURNED RECOVERED																
	SEIZED SUBJECT ID	ENTIFIED	Q. In	JECTLOCATED	1	ACT!!	- AS-	4 CLOCEC		- ASS	DESTED UND	ED 10	Т	D EVOIS :	LINDED 10	
TIVE	SUBJECT ID	NO	SUE ■YES	NO		■ ACTIVE	_	M. CLOSED		_	RESTED UNDI			EX-CLEAR		
TRA	REASON FOR EX	CEPTIONAL CLEARAN	NCE: 1. OFFEND	DER DEATH. 2. DATE	NO PROSECUT		3.		ENIED ROVING OF		VICTIM DECL	INES COOP	ERATION.	5. UJUVENILE	UNIT	
INIS	Higgs, Kerry			09/09/202	NUMBER			AFFF	OF					SAIL	NUMBER	
ADMINISTRATIVE						FOLLOW-L		□YES	■ NO	OFFIC	CER					

												N	ICIC							
	SENCY I.E 30260400).			II	NCIDENT	ΓRE	POR	Т			,	2 0	2 3	3 1	1 1 0	0 9		INQ.	ENTD
				INCII	DENT	TYPE					СОМ	PLETED	FORG	CED EN	TRY I	PREMISE TY	PE U	INITS	TYP	E VICTIM
														ES 🗆	NO		EIN	IEKED	ED Individual Business Financial	
															110				<u>⊟</u> Go	vernment lig. Orgn.
														ES 🗆	NO				Sc	c./Public
_														ES □	NO				Unkno	
EVENT	INCIDENT LO	CATION (S	UBDIVISION, APA	RTMENT	AND NU	MBER, STREET N	NAME AN	D NUMBE	ER							ZIP COI	WEA	APON		
回																				
	INCIDENT DA	INCIDENT DATE 24 HR. CLOCK TO DATE							HR. CLOCK	DISP.	DISPATCH DATE/TIME 2- DATE DISP. TIME TIME				E 24 HR. CI IME ARRIV			LOCATION NO.		
	COMPLAINANT'S	NAME (LA	ST, FIRST, MIDDLE))				RELAT	IONSHIP TO SUB	JECT			RACE :	SEX AC	GE /	ETH. DA	YTIME PHONE	н	EVENING	PHONE F
	ADDD500									OUT (J	SOU				710.4	CODE	В	LOCATIO	E
	ADDRESS									CITY					STATE	ZIP	ODE		LOCATIO	ON NO.
	VICTIM'S NAME (LAST, FIRS	T, MIDDLE)					RELATI	ONSHIP TO SUB.	ECT	RE	SIDENT	RACE	SEX AC	GE /	ETH. DA	YTIME PHONE	1	EVENING	PHONE
											J :	s o u						H B		F
	HEIGHT WEIGHT HAIR EYES FACIAL HAIR, SCARS, TATOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC.																			
8																_				
Σ	ADDRESS														STATE	ZIP (CODE	LOCATION NO.		
VICTIM	VISIBLE IN ILIPY	ISIBLE INJURY (VICT.) YES NO EXPLAIN COMPLAINT OF ANY NON-VISIBLE INJURES																s no □		
_	VICTIM (NO.)		ALCOHOL Y			UNK 🗌	DRUGS:	☐ YES	NO UNK	П ТҮ	PE:					IFEAINT OF AINT	NON-VISIBLE III	JONES		2 NO []
	TWO-MAN VEH.		ONE-MAN VEH.				OTHER		ALONE	ASSIST	ED 🗆	J - '	This Ju	risdictio	n S	- State	O - Out of St	ate l	J - Unk	nown
	■ SUSPECT	NAME (LA	AST, FIRST, MIDDLE	<u> </u>							RACE :	SEX AGE	_/	ETH.	DAT	E OF BIRTH	HEIGHT	WEIGHT	HAIR	EYES
7	RUNAWAY																			
9	☐ WANTED	FACIAL H	AIR, SCARS, TATO	OS, GLASS	SES, CLC	THING, PHYSICAL	PECULIA	RITIES, E	TC.											
SUBJECT	☐ WARRANT	ADDRESS CITY STATE ZIP CODE												LOCATIO	ON NO.					
BJE	☐ ARREST																			
SU	☐ JAIL	SUBJECT	(NO. 2) USING: A	LCOHOL	☐ YE	s no 🗆 unk	= 4	ARRESTE	D NEAR OFFENS	E SCENE	☐ YES	S NO 🗆			TIME OF O		D	ATE/TIME	OF ARR	EST
	SUMMONS	DRUGS:	☐ YES NO ☐	UNK 	TYPE:		1	OTAL # A	ARRESTED 0				9/	/9/202	23 6:0	4:00 PM				
	EMS arrived and stated he was deceased.																			
	There were several witnesses and another victim all gave written statements.																			
	A crime	A crime scene log was started and the case was turned over to HCPD CSI																		
		Chine scene log was started and the case was turned over to HCFD CSI																		
NE																				
NARRATIVE																				
ARF																				
Z																				
												IRISDICTION	I OE THE	ET		T	JURISDICTION	I OE BEC)VERV	
		JURISDICTION OF THEFT LAW ENFORCEMENT AGENCY													LAW ENFORC	EMENT A	SENCY			
EST.	TYPE (GROUP)																	то	TAL VAL	JE
	STOLEN																			
PROPERTY	DAMAGED																			
JPE	BURNED RECOVERED																			
PR	SEIZED																			
1	SCIZED	1		1								1								

ADM. CLOSED

3.

EXTRADITION DENIED

YES

APPROVING OFFICER

□ №

ACTIVE

UNFOUNDED

FOLLOW-UP INVESTIGATION

ADMINISTRATIVE

SUBJECT IDENTIFIED

REPORTING OFFICER(S)

NO 🗌

REASON FOR EXCEPTIONAL CLEARANCE:

SUBJECTLOCATED

NO 🗌

DATE

2. NO PROSECUTION.

UNIT NUMBER

YES

1. OFFENDER DEATH.

☐ ARRESTED UNDER 18
☐ ARRESTED 18 AND OVER

OFFICER

4. UICTIM DECLINES COOPERATION.

EX-CLEAR UNDER 18
EX-CLEAR 18 AND OVER

5.

JUVENILE - NO CUSTODY

UNIT NUMBER

DATE

AGENCY I.D.
SC0260400

INCIDENT REPORT

CASE NUMBER	NCIC			
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2 0 2 3 1 1 1 0 0 9				

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EVENT	INCIDENT LOCATION (SUBDIVISION, APARTMENT AND NUMBER, STREET NAME AND NUMBER												□YES □NO □YES □									Soc./Public Other Unknown Police Off. WEAPON TYPE		
	INCIDENT DAT	E	24 HR. CLOO	CK .	го	DATE		24 H	HR. CLOCK	DISP.	DATE		DISP. 1	PATCH TIME	DATE/T	ME 24 HR. CLOCK TIME ARRIVED DEPART. T				RT. TIME		LOCA	TION NO.	
	COMPLAINANT'S	NAME (LAS	ST, FIRST, MIDDI	LE)			R	RELATIO	ONSHIP TO SUB.	ECT		RESIDE		ACE	SEX	AGE		тн.		IME PHO	NE H B			H B
	ADDRESS VICTIM'S NAME (L	AST FIRS	T MIDDLE)				RELATIONSHIP TO SUBJEC				T F	RESIDE	NT F	RACE	SEX	STAT		ETH.	ZIP CO	ODE LOCATION NO. TIME PHONE EVENING PHONE				
	·	GHT INC	HAIR	EYES	FACIAL I	IAIR, SCARS			S, CLOTHING, PI		J	J S O	U	IVIOL	OLX				DATI	IIIIE I TIOI	H B	LVLIN	H	В
VICTIM NO.	ADDRESS									CITY						STA	TE		ZIP CO	DE		LOCA	TION NO.	_
VICT	VISIBLE INJURY (VEO			(DE					(COMPLA	AINT O	F ANY NO	ON-VISIBL	E INJURIE	s 🗆	YES NO 🗌	
	VICTIM (NO.) TWO-MAN VEH.	USING: A		YES NO			ORUGS: OTHER		NO UNK	ASSIST	PE:		J.T	hie .lu	risdict	ion	S - S	tate	0	- Out of	State	11 - 11-	ıknown	_
3	SUSPECT	NAME (LA	ST, FIRST, MIDE	DLE)							RACE		AGE		ETI		DATE O			HEIGHT				
SUBJECT NO.	□ WARTED □ WARRANT □ ARREST □ WARRANT □ ARREST																							
SUBJECT (NO.3) USING: ALCOHOL										TE/TIME 0			РΜ		DATE/T	ME OF AF	RREST	_						
NARRATIVE																								
											LA	JURISE W ENF	DICTION ORCEMB	OF THE ENT AG	EFT ENCY				J L	URISDICT AW ENFO	ION OF R RCEMEN	ECOVERY FAGENCY	,	
ST.	TYPE (GROUP)																					TOTAL V	ALUE	
PROPERTY EST.	STOLEN																							_
FR	DAMAGED															\rightarrow				\rightarrow				\dashv
JPE	BURNED RECOVERED																							\dashv
PR						-										-								\dashv
	SEIZED SUBJECT IDI	NTIFIED	1	Q.	UBJECTLOC.	ATED			D ACTIVE	☐ ADN	M CLOS	SED			ARPE	STED UND	FR 10				7 EV ^'	EADING	ER 19	\dashv
ADMINISTRATIVE	□YES	NO 🗆		_YE:		NO 🗆			□ ACTIVE □ UNFOUNDED		*1. OLUS)ED				STED UNL		ER_		- 1	EX-CL		ND OVER	
R	REASON FOR EX	CEPTIONA	L CLEARANCE:	1. OFFE	NDER DEATI	H. 2.	NO PROSE	CUTIO	N.	3. EXTI	RADITIO	ON DEN	IED	4	. 🗆 VI	CTIM DEC	LINES C	COOPE	RATION.	5.	☐ JUVE	NILE - NO	CUSTODY	
ST	REPORTING OFF	CER(S)				DATE	UN NUM	IIT IBER			A	PPROV	ING OFF	ICER							DATE		UNIT NUMBER	
N N																								
0			·	·					FOLLOW-UP	ON .	Πve	· e	Пио		OFFICE	R								