



ATTEMPT TO IDENTIFY **Information**

Daytona Beach Police Department

Case **1600010502**

Expires When located

Status Active



On 05/17/2016, the above unidentified subject entered Lenscrafter's located in the Volusia Mall carrying a paper shopping bag, and proceeded to select three Versace and eight Tiffany eyeglass frames valued at \$300.00 each (Total \$3,300.00) and conceal them in his bag. The male subject then left without paying. Anyone with information as to the identity of the suspect is asked to contact Detective Wayne Dorman, 386-671-5232 or email dormanw@dbpd.us.

DAYTONA BEACH POLICE DEPARTMENT
Michael J Chitwood, Chief of Police
129 Valor Blvd, Daytona Beach, Florida 32114
(386) 671-5100

Persons with information may text "CRIMES" (274637) with a cell phone or log on to www.dbpd.us and click on Anonymous Web Tips. When using a cell phone, all messages should begin with "DBTIPS." Tipsters remain anonymous.

DAYTONA BEACH POLICE DEPARTMENT

INCIDENT REPORT

EVENT DATA	<input type="checkbox"/> Juvenile <input type="checkbox"/> Hate Crime <input type="checkbox"/> Gang <input type="checkbox"/> Elderly Abuse / Exploitation <input type="checkbox"/> Domestic Violence VOR _____ <input type="checkbox"/> Endangered / Other _____		Agency Report Number 160010502		
	Agency ORI Number FL0640100		Zone # DB46	Telephone Handled 1. Yes 2. No 2	
	Reported: Day Tuesday	Date 05-17-2016	Time (mil.) 1348	Nature of Call (Report Type) SHOP Shoplifting (UCR)	
	Incident Type: 1. Felony 2. Traffic Felony	3. Misdemeanor 4. Traffic Misdemeanor	5. Ordinance 9. Other	Incident: Day From Friday	Date 05-13-2016
Time (mil.) 2015		TO	Day	Date	
Time Dispatched (mil.)		Time Arrived (mil.)	Time Completed (mil.)	Occurred During: D - Day U - Unknown N - Night N	
Offense #1	Type 1	Statute Violation Number 812.015(8)	Description Retail Theft \$300 or More		
Offense #2	Type	Statute Violation Number	Description		
Incident Location (Street, Apt. Number) 1700 W SPEEDWAY BLVD		City DAYTONA BEACH	Zip 32114		
Business Name / Area Identifier LENSCRAFTERS		# Prem. Entered 0	Drug Related 0. N/A 1. Yes 2. No 2	Alcohol Related 0. N/A 1. Yes 2. No 2	Forced Entry 1. Yes 3. Attempted 2. No
Location Type 11		Arson-Inhabited 1. Occupied 3. Abandoned 2. Unoccupied			Arson-Attempted 1. Yes 2. No
Location Type Codes		01. Residence-Single 05. Convenience Store 09. Supermarket 13. Bank/Financial Inst. 17. Gov't/Public Bldg. 21. Airport 25. Parking Lot/Garage 29. Motor Vehicle			
02. Apartment/Condo 06. Gas Station 10. Dept/Discount Store 14. Commercial/Office Bldg. 18. School/University 22. Bus/Rail Terminal 26. Highway/Roadway 30. Other Mobile		03. Residence/Other 07. Liquor Sales 11. Specialty Store 15. Industrial/Mfg. 19. Jail/Prison 23. Construction Site 27. Park/Woodlands/Field 88. Unknown			
04. Hotel/Motel 08. Bar/Nightclub 12. Drug Store/Hospital 16. Storage 20. Religious Bldg. 24. Other Structure 28. Lake/Waterway 99. Other					
V/W Code V-Victim N-Next of Kin W-Witness O-Other R-Reporting Person		Victim/Subject Type 0. N/A 1. Juvenile 5. Government 2. L.E. Officer 6. Church 3. Adult 9. Other		Address/Phone Type B. Business/Work M. Message P. Pager C. Cell N. Next of Kin S. School H. Home O. Other V. Vacation	
Race W-White O-Oriental/Asian B-Black U-Unknown I-American Indian		Sex M-Male F-Female U-Unknown		Residence Type 0. NA 3. Florida 1. City 4. Out-of-State 2. County	
Residence Status 0. N/A 1. Full Year 2. Par. Year 3. Non-Resident		Means of Attack F-Firearm O-Other Dangerous K-Knife/Cutting Inst. H-Hands, Fists, Feet, Etc.		Extent of Injury 00. N/A 03. Laceration 06. Poss. Internal Injury 09. Abrasions/Bruises 01. Gunshot 04. Unconscious 07. Loss of Teeth 10. No Visible Injury 02. Stabbed 05. Poss. Broken Bones 08. Burns 99. Other Serious Injury	
Domestic Violence 1. Yes 2. No		Victim Relationship to Offender S-Spouse B-Sibling Z-Other P-Parent O-Other Family C-Child H-Co-Habitant			
Offense Indicator 1. #1 3. Both 2. #2		V/W Code 1	# 1	V. Type 4	Nature of Call (for Victim, if different from Incident) LENSCRAFTERS
Name (Last/Business) LENSCRAFTERS		(First)		(Middle)	
Address (Street, Apt. Number) 1700 W SPEEDWAY BLVD		City DAYTONA BEACH FL	State	Zip 32114	Residence Phone (386) 255-1800
Business/School/Other Address (Street, Apt. Number)		City	State	Zip	Address Type Business/School/Other Phone Phone Type
Other Contact Info (Time Available, Interpreter, etc.)		Synopsis of Involvement VICTIM			
If Victim Type 1, 2, or 3	Race	Sex	Date of Birth	Age	Ethnicity
Offense Indicator 1. #1 3. Both 2. #2		V/W Code 1	# 1	V. Type 3	Nature of Call (for Victim, if different from Incident) FOSTER
Name (Last/Business) FOSTER		(First) ANDREA		(Middle)	
Address (Street, Apt. Number) 1700 W SPEEDWAY BLVD		City DAYTONA BEACH FL	State	Zip 32114	Residence Phone (386) 255-1800
Business/School/Other Address (Street, Apt. Number)		City	State	Zip	Address Type Business/School/Other Phone Phone Type
Other Contact Info (Time Available, Interpreter, etc.)		Synopsis of Involvement RP			
If Victim Type 1, 2, or 3	Race	Sex	Date of Birth	Age	Ethnicity
	W	F	05-05-1981	35	N
Offense Indicator 1. #1 3. Both 2. #2		V/W Code	#	V. Type	Nature of Call (for Victim, if different from Incident)
Name (Last/Business)		(First)		(Middle)	
Address (Street, Apt. Number)		City	State	Zip	Residence Phone
Business/School/Other Address (Street, Apt. Number)		City	State	Zip	Address Type Business/School/Other Phone Phone Type
Other Contact Info (Time Available, Interpreter, etc.)		Synopsis of Involvement			
If Victim Type 1, 2, or 3	Race	Sex	Date of Birth	Age	Ethnicity
Offense Indicator 1. #1 3. Both 2. #2		V/W Code	#	V. Type	Nature of Call (for Victim, if different from Incident)
Name (Last/Business)		(First)		(Middle)	
Address (Street, Apt. Number)		City	State	Zip	Residence Phone
Business/School/Other Address (Street, Apt. Number)		City	State	Zip	Address Type Business/School/Other Phone Phone Type
Other Contact Info (Time Available, Interpreter, etc.)		Synopsis of Involvement			
If Victim Type 1, 2, or 3	Race	Sex	Date of Birth	Age	Ethnicity
Offense Indicator 1. #1 3. Both 2. #2		V/W Code	#	V. Type	Nature of Call (for Victim, if different from Incident)
Name (Last/Business)		(First)		(Middle)	
Address (Street, Apt. Number)		City	State	Zip	Residence Phone
Business/School/Other Address (Street, Apt. Number)		City	State	Zip	Address Type Business/School/Other Phone Phone Type
Other Contact Info (Time Available, Interpreter, etc.)		Synopsis of Involvement			
If Victim Type 1, 2, or 3	Race	Sex	Date of Birth	Age	Ethnicity

INCIDENT REPORT (CONT.)

SUBJECT / MISSING SECTION	Offense Indicator 1. #1 3. Both 2. #2	Subject Code S-Suspect V-Victim D-Defendant (Missing Person)	Code #	Subj. Type	Name (Last)	(First)	(Middle)	Race	Sex	Ethnicity	
	1	S	1	3	UNKNOWN			B	M	N	
	Date of Birth	Age	To Age	Height	To Height	Weight	To Weight	Eye Color	Hair Color	Maiden Name	
						180			BLK		
	Nickname / Street Name			Place of Birth - City		County	State	Employer/Other/School		Occupation	
	Last Known Address (Street, Apt. Number)					City	State	Zip	Address Type	Phone	Phone Type
	Other Address (Street, Apt. Number)					City	State	Zip	Address Type	Phone	Phone Type
	Driver's License State/Number			Social Security Number			Other ID Number			ID Type	
	Clothing (Describe)					Scars/Marks/Tattoos (Type/Describe)			Scars/Marks/Tattoos (Type/Describe)		
	WHITE / TANKT / / / / /										
Hair Length /Style		Skin	Build	Facial Features		Speech/Voice	Deformity		Glasses		
/ / /		/	/	/ / /		/	/ / /				
If Subject:	Demeanor	Mask	Weapon Type			If Arrested:	Subject Was Already in Custody?		Warrant From:		
/	/	/	/ / /			/	1. Yes 2. No		1. This Agency 2. Other Agency		
Date of Last Contact		Date of Emancipation		Caution	Caution Reason		Personal Habits (Drugs / Alcohol)				
May Be With:		Physical Condition:		Mental Condition:		Doctor Name:		Dentist Name:			
Incident Type		6. Disaster		Foul Play Suspected?		Missing Before?		Fingerprints Available?		Photo Available?	
1. Runaway		Victim		1. Yes		1. Yes		1. Yes		1. Yes	
2. Parents		7. Voluntary		2. No		2. No		2. No		2. No	
3. Involuntary		Adult		8. Unknown		8. Unknown		8. Unknown		8. Unknown	
4. Disabled		8. Unknown									
5. Endangered											
I, _____ (Printed) _____ (Signature) certify that I have reported the above person as a missing person; and this agency has my permission to enter this person in a statewide alert.											

SUBJECT / MISSING SECTION	Offense Indicator 1. #1 3. Both 2. #2	Subject Code S-Suspect V-Victim D-Defendant (Missing Person)	Code #	Subj. Type	Name (Last)	(First)	(Middle)	Race	Sex	Ethnicity	
	Date of Birth	Age	To Age	Height	To Height	Weight	To Weight	Eye Color	Hair Color	Maiden Name	
	Nickname / Street Name			Place of Birth - City		County	State	Employer/Other/School		Occupation	
	Last Known Address (Street, Apt. Number)					City	State	Zip	Address Type	Phone	Phone Type
	Other Address (Street, Apt. Number)					City	State	Zip	Address Type	Phone	Phone Type
	Driver's License State/Number			Social Security Number			Other ID Number			ID Type	
	Clothing (Describe)					Scars/Marks/Tattoos (Type/Describe)			Scars/Marks/Tattoos (Type/Describe)		
	/ / / / /										
Hair Length /Style		Skin	Build	Facial Features		Speech/Voice	Deformity		Glasses		
/ / /		/	/	/ / /		/	/ / /				
If Subject:	Demeanor	Mask	Weapon Type			If Arrested:	Subject Was Already in Custody?		Warrant From:		
/	/	/	/ / /			/	1. Yes 2. No		1. This Agency 2. Other Agency		
Date of Last Contact		Date of Emancipation		Caution	Caution Reason		Personal Habits (Drugs / Alcohol)				
May Be With:		Physical Condition:		Mental Condition:		Doctor Name:		Dentist Name:			
Incident Type		6. Disaster		Foul Play Suspected?		Missing Before?		Fingerprints Available?		Photo Available?	
1. Runaway		Victim		1. Yes		1. Yes		1. Yes		1. Yes	
2. Parents		7. Voluntary		2. No		2. No		2. No		2. No	
3. Involuntary		Adult		8. Unknown		8. Unknown		8. Unknown		8. Unknown	
4. Disabled		8. Unknown									
5. Endangered											
I, _____ (Printed) _____ (Signature) certify that I have reported the above person as a missing person; and this agency has my permission to enter this person in a statewide alert.											

1 I arrived at the listed business in response to a retail theft that had occurred on 05/13/16 around 2015 hours. The RP advised that they didn't
 2 realize that the theft had occurred until they watched their surveillance video. They saw a black male with a white tank top and a "buzz" cut enter
 3 the store and take 11 frames from the display and exit the store without making any type of attempt to pay for the items. The frames, 3 Versace
 4 and 8 Tiffany, were valued at \$3300. The RP completed a sworn statement and advised that the store would press charges. The surveillance DVD
 5 was obtained and submitted as evidence.

ADMINISTRATIVE	Final Case Status:	Final Case Status Codes: 1.Arrest/Adult 2.Arrest/Juv. 3.Exceptional/Adult 4.Exceptional/Juv. 5.Closed 6.Unfounded	<input type="checkbox"/> Victim Advocate	<input type="checkbox"/> Triad	<input type="checkbox"/> SA Referral	
	<input type="checkbox"/> DCF Hotline	Date:	Time:	<input type="checkbox"/> FCIC / NCIC Entry	<input type="checkbox"/> T.T. BOLO	
	<input type="checkbox"/> CAC	Spoke With:		<input type="checkbox"/> FCIC / NCIC Cancel	Date:	By:
	Connecting Report Number	Agency	Additional Forms Attached: <input type="checkbox"/> Narrative <input type="checkbox"/> SA 707 <input type="checkbox"/> Persons <input checked="" type="checkbox"/> Property <input type="checkbox"/> Veh./Tow Sheet <input type="checkbox"/> Other Describe: _____			
Officer Reporting - Printed		Officer Reporting - Signature		ID. Number	Unit	Date
Jessmer, Steven				D44223	3B66	05-17-2016
Officer Reviewing - Printed (If Applicable)		Officer Reviewing - Signature (If Applicable)		ID. Number	Unit	Date

DAYTONA BEACH POLICE DEPARTMENT

PROPERTY REPORT

EVTN	Report Date 05-17-2016	Report Time 1348	Original Incident Date 05-13-2016	Nature of Call (for Incident) SHOP	Agency Report Number 160010502	1.Original 2.Supplement 1						
THEFT	Type Theft 03	Type Theft Codes 00. N/A 02. Robbery 04. Pocket Picking 06. Embezzlement 08. From Public 09. From Vehicle 11. By Computer 13. Bicycle 99. Other 01. Burglary 03. Shoplifting 05. Purse Snatching 07. From Coin Oper. Machine Access Bldg. 10. Extortion 12. Fraud 14. Motor Vehicle Parts										
CODES	Person Code V-Victim N-Next of Kin S-Suspect O-Other D-Defendant R-Reporting Party W-Witness		Person Involvement Code 1. Finder 2. Owner 3. Suspect 4. Other		Status Code: 1. Evidence 5. Lost 8. Found 12. Stolen And Recovered 16. Vehicle Inventory Prop. 20. Safekeeping 2. Damaged Prop. 6. Recovered 9. Found/Contraband 13. Disposal 17. Baker Act 21. Digital Evidence 3. Arson/Burned 7. Recovered (Outside Agency Recovered) 10. Prisoner's Pers. Prop. 14. Prop. Of Deceased 18. Seized/Confiscated 4. Photo & Release							
	Category Code B. Bicycle C. Camera/Photo Equipment D. Data Processing Equipment		E-Equipment/Measuring Devices/Tools F-Furniture and Furnishings G-Games and Gambling Apparatus H-Household Appliance/Housewares		I-Items of Identification J-Special Docs/Food Stamps/Tickets K-Keepsakes and Collectibles L. Livestock		M. Musical Instrument O. Office Equipment P. Personal Accessories					
	R-Radio/TV/Sound Devices S-Sports/Camping/Rec.Equip. T-Toxic Chemicals		V.Viewing Equip (Binoculars) W.Well-drilling Equipment Y-All Other Items and Equipment (GUNS,DRUGS,JWLRY, Etc.)									
DRUG CODES	Activity P. Possess D. Deliver Z. Other S. Sell E. Use B. Buy K. Dispense/Distribute T. Traffic M. Manufacture/Produce/ R. Smuggle Cultivate		Type A. Amphetamine M. Marijuana U. Unknown B. Barbiturates O. Opium/Derivative Z. Other C. Cocaine P. Paraphernalia/ E. Heroin Equipment H. Hallucinogen S. Synthetic		Unit 1. Gram 6. Ton 2. Milligram 7. Liter 3. Kilogram 8. Milliliter 4. Ounce 9. Dose Unit/Term 5. Pound 99. Other							
PROPERTY	Leave Blank:	Person Code #	Pers. Invl.	Item #	Status	Category	Article	Description				
		V	1	2	1	11	Y	OTHER	8 TIFFANY & 3 VERSACE FRAMES			
	Serial Number	Owner Applied Number		Value Recovered:		Date Recovered:		Forfeiture Y / N:	F.W.T.C. (Y/N)	Value		
				\$						\$3300		
PROPERTY	If Article	Qty.	Brand	Model	Jewelry Type	If Drug	Activity	Type	Quantity	Unit	Estimated Street Value	
											\$	
	If Gun	Make	Model	Caliber	Type/Cat	Action	Finish	Barrel Length	Barrel Type			
PROPERTY	Leave Blank:	Person Code #	Pers. Invl.	Item #	Status	Category	Article	Description				
		V	1	2	1	Y	OTHER	SURVEILLANCE DVD				
	Serial Number	Owner Applied Number		Value Recovered:		Date Recovered:		Forfeiture Y / N:	F.W.T.C. (Y/N)	Value		
				\$						\$		
PROPERTY	If Article	Qty.	Brand	Model	Jewelry Type	If Drug	Activity	Type	Quantity	Unit	Estimated Street Value	
											\$	
	If Gun	Make	Model	Caliber	Type/Cat	Action	Finish	Barrel Length	Barrel Type			
PROPERTY	Leave Blank:	Person Code #	Pers. Invl.	Item #	Status	Category	Article	Description				
	Serial Number	Owner Applied Number		Value Recovered:		Date Recovered:		Forfeiture Y / N:	F.W.T.C. (Y/N)	Value		
				\$						\$		
PROPERTY	If Article	Qty.	Brand	Model	Jewelry Type	If Drug	Activity	Type	Quantity	Unit	Estimated Street Value	
											\$	
	If Gun	Make	Model	Caliber	Type/Cat	Action	Finish	Barrel Length	Barrel Type			
CHAIN OF CUSTODY	Item #	Date:	Time:	Released by (Printed):		Released by (Signature):		Received by (Printed):		Received by (Signature):		
	Leave Blank:			Reason for Change:								
	Item #	Date:	Time:	Released by (Printed):		Released by (Signature):		Received by (Printed):		Received by (Signature):		
	Leave Blank:			Reason for Change:								
	Item #	Date:	Time:	Released by (Printed):		Released by (Signature):		Received by (Printed):		Received by (Signature):		
	Leave Blank:			Reason for Change:								
	Item #	Date:	Time:	Released by (Printed):		Released by (Signature):		Received by (Printed):		Received by (Signature):		
	Leave Blank:			Reason for Change:								
	Item #	Date:	Time:	Released by (Printed):		Released by (Signature):		Received by (Printed):		Received by (Signature):		
	Leave Blank:			Reason for Change:								
ADMIN.	Officer Reporting - Printed Jessmer, Steven			Officer Reporting - Signature			ID. Number D44223	Unit 3B66	Date 05-17-2016			
	Officer Reviewing - Printed (If Applicable)			Officer Reviewing - Signature (If Applicable)			ID. Number	Unit	Date			