



BE ON THE LOOKOUT

Attempt to Identify

Daytona Beach Police Department

Case 160025279

Expires [Expires]

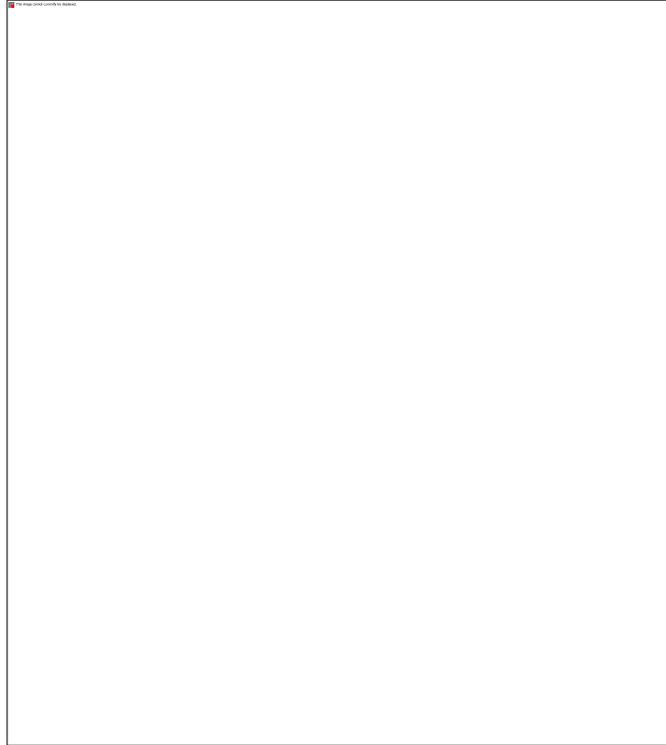
Status Active

Pictures:



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.



Description:

On 12/06/2016, at approximately 2:52hrs, two black male suspects entered the 7-11 at 2150 West International Speedway. The male pictured above with the red shirt was armed with a handgun and demanded the clerk to give him money. The clerk refused and the black male assaulted the store clerk with the weapon. Both suspects had their faces covered with bandannas.

Any information related to this incident please contact Det. Lissette Deschamps at deschamps1@dbpd.us or 386-671-5222. We hope to have the video posted later this afternoon.

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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 160025279		
	Agency ORI Number FL0640100		Zone # DB48	Telephone Handled 1. Yes Call? (T.H.C.) 2. No 2	
	Reported: Day Tuesday	Date 12-06-2016	Time (mil.) 0252	Time Dispatched (mil.) 0253	Time Arrived (mil.) 0254
	Time Completed (mil.) 0500		Nature of Call (Report Type) AROB Armed Robbery (UCR)		
Incident Type: 1. Felony 2. Traffic Felony		3. Misdemeanor 4. Traffic Misdemeanor	5. Ordinance 9. Other	Incident: Day From Tuesday	
Date 12-06-2016		Time (mil.) 0248	TO	Day Tuesday	
Date 12-06-2016		Time (mil.) 0251	Occurred During: D - Day U - Unknown N - Night N		
Offense #1	Type 1	Statute Violation Number 812.13(2)(A)	Description Robbery with Firearm/Deadly Weapon		
Offense #2	Type 1	Statute Violation Number 784.045(1)(A)1	Description Agg Battery Cause Bodily Harm/Disability		
A - Attempted		C - Committed		C	
A - Attempted		C - Committed		C	
Incident Location (Street, Apt. Number) City Zip 2150 West International Speedway Blvd DAYTONA BEACH 32114					
Business Name / Area Identifier 7-11 / Gas station		# Prem. Entered	Drug Related 0. N/A 1. Yes 2. No 0	Alcohol Related 0. N/A 1. Yes 2. No 0	
Forced Entry 1. Yes 3. Attempted 2. No 2		Arson-Inhabited 1. Occupied 3. Abandoned 2. Unoccupied		Arson-Attempted 1. Yes 2. No	
Location Type 06	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 3	
Nature of Call (for Victim, if different from Incident)		Name (Last/Business) (First) (Middle) Ballinger Brittney S			
Address (Street, Apt. Number)		City	State	Zip Residence Phone	
2150 West International Speedway Blvd		DAYTONA BEACH FL	32114	(386) 253-3468	
Business/School/Other Address (Street, Apt. Number)		City	State	Zip Address Type Business/School/Other Phone Phone Type	
2150 West International Speedway Blvd		DAYTONA BEACH FL	32114	B (386) 253-3468 B	
Other Contact Info (Time Available, Interpreter, etc.)		Synopsis of Involvement Victim / Store clerk			
If Victim Type 1, 2, or 3	Race W	Sex F	Date of Birth 10-13-1992	Age 24	
Ethnicity H	Res. Type 2	Res. Status 1	Means of Attack F	Extent of Injury 03	
Domestic Violence 2	Relationship Z				
[Victim/Witness Section 2 - Identical structure to Section 1]					
[Victim/Witness Section 3 - Identical structure to Section 1]					
[Victim/Witness Section 4 - Identical structure to Section 1]					

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 # S 1 3	Subj. Type	Name (Last) (First) (Middle)	Race	Sex	Ethnicity					
	Date of Birth	Age To Age 18 25	Height To Height 5' 09" 5' 11"	Weight To Weight 140 160	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) RED / SHIRT / BLACK / CLOTH /				Scars/Marks/Tattoos (Type/Describe)			Scars/Marks/Tattoos (Type/Describe)					
	Hair Length /Style AFRO / SHOR /		Skin DBR	Build T	Facial Features	Speech/Voice	Deformity	Glasses					
	If Subject:	Demeanor	Mask Bandana	Weapon Type HDGUN	If Arrested:		Subject Was Already in Custody? 1. Yes 2. No		Warrant From: 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 1. Runaway 2. Parents 3. Involuntary 4. Disabled 5. Endangered		6. Disaster Victim 7. Voluntary Adult 8. Unknown		Foul Play Suspected? 1. Yes 2. No 8. Unknown		Missing Before? 1. Yes 2. No 8. Unknown		Fingerprints Available? 1. Yes 2. No		Photo Available? 1. Yes 2. No		Dental Record Available? 1. Yes 2. No	
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.													

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	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) BLACK / HOOD / TAN / CLOTH /				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? 1. Yes 2. No		Warrant From: 1. This Agency 2. Other Agency				
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NARRATIVE

1 On Tuesday 12/6/2016 at approximately 0253 hours, I was dispatched to 2150 West International Speedway Boulevard (7-Eleven) in reference to

2 a burglary in progress.

3

4 Upon arrival, I made contact with (V-1) Brittney Ballinger (store clerk). Ms. Ballinger was walking towards the front door crying while holding the

5 back of her head. Ms. Ballinger stated that she was robbed at gun point by two black males who fled the scene prior to my arrival. Ms. Ballinger

6 began to describe the incident, but was unable to due to her injury. I observed a laceration on the back of her head and advised central dispatch to

7 have medical personnel respond to the scene. Ms. Ballinger was transported to Halifax Hospital for treatment.

8

9 Upon further investigation, I was able to review the CCTV video surveillance from the incident. I observed two black males enter the store at 0251

10 hours and their description is as follows; (S-1) is a black male, 18 to 25 years of age, 5'9 to 5'11, thin build, 140 to 160 lbs, wearing a red t-shirt

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	Date:	By:	
	<input type="checkbox"/> CAC	Spoke With:	<input type="checkbox"/> FCIC / NCIC Cancel					
	Connecting Report Number	Agency	Additional Forms Attached: <input checked="" 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 Lima, Jovanny			Officer Reporting - Signature			ID. Number D97313	Unit 3C48	Date 12-06-2016
Officer Reviewing - Printed (If Applicable)			Officer Reviewing - Signature (If Applicable)			ID. Number	Unit	Date

DAYTONA BEACH POLICE DEPARTMENT

NARRATIVE / SUPPLEMENT

EVNT	Report Date	Report Time	Orig. Reported Date	Nature of Call (for Incident)	Agency Report Number	1.Original 2.Supplement
	12-06-2016	0252	12-06-2016	AROB	160025279	1

11 with a #8 insignia on it, red bandana concealing his face and black pants. (S-2) is a black male, 18-25 years of age, 5'9 to 5'11, thin build, 140 to
 12 160 lbs, wearing a black hoodie concealing his face and tan pants. I also observed S-1 carrying a black handgun and pointing it at Ms. Ballinger
 13 several times throughout the incident.
 14
 15 Ms. Ballinger advised via her sworn statement that S-2 reached in her front pocket and took her "Droid" cell phone that was red and black in color.
 16 Ms. Ballinger stated that S-1 directed her towards the cash register when she observed S-2 run out of the store in an unknown direction. Ms.
 17 Ballinger then stated that S-1 hit her with the aforementioned handgun to the back of her head disorienting her efforts to open the cash register.
 18 Ms. Ballinger then advised that S-1 exited the store in an unknown direction at 0253 hours. The cash register was never opened nor tampered
 19 with.
 20
 21 The Daytona Beach Police Department's Criminal investigations division responded to the scene. C.I.D. made copies of the CCTV video
 22 surveillance and processed the scene. C.I.D. also responded to Halifax Hospital to further investigate and interview the victim.
 23
 24 There is no suspect information at this time.
 25
 26
 27
 28

NARRATIVE / CONTINUATION

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 <input type="checkbox"/> CAC	Date: _____ Time: _____	<input type="checkbox"/> FCIC / NCIC Entry <input type="checkbox"/> FCIC / NCIC Cancel	<input type="checkbox"/> T.T. BOLO	Date: _____ By: _____	
	Connecting Report Number _____ Agency _____	Additional Forms Attached: <input checked="" 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 Lima, Jovanny	Officer Reporting - Signature	ID. Number D97313	Unit 3C48	Date 12-06-2016	
Officer Reviewing - Printed (If Applicable)	Officer Reviewing - Signature (If Applicable)	ID. Number	Unit	Date		