

VICTIM/WITNESS/SUSPECT
AFFIDAVIT

ADM.	Agency ORI Number FLO 3 5 0 0 0 0	Agency Name LAKE COUNTY S.O.	1. Offense ☐ 2. Arrest ☐	Juvenile ☐	1. Original ☐ 2. Supplement ☒
	Original Date Reported 09-28-17	Case Reference	Agency Report Number 170137584		
Name: Brian Lucero DOB: [REDACTED] Age: 24 AKA: [REDACTED] Relation to Offender: Contact Information: Address: [REDACTED] Umatilla FL [REDACTED] [REDACTED] Mailing Address: Home Phone: [REDACTED] Alt Phone: [REDACTED] Personal Information----- Race: Sex: Height: Weight: Build: Complexion: Eye Color: Hair Color: Scars/Marks/Tattoos: Clothing/Description: SSN: [REDACTED] License: [REDACTED] State: EXP: CLASS: Birthplace - City: State/Country: Citizen: Comments: Employer Information----- Employer: Address: Work Phone:					
NARRATIVE					
<i>I was working at Mr. Rhodes Honey Farm I seen the plane then I hear a loud noise and seen the plane falling and losing parts so I ran to get my atv and came to see if he or she was OK</i>					
NARRATIVE	INTENT TO PROSECUTE YES ☐ NO ☐ N/A ☒ Signature of person making statement Sworn to and subscribed before me this _____ day of _____ 20____. [REDACTED]				
ADMINISTRATIVE	Report Contains Affidavit				
	Officer(s) Reporting D/S A. Creech				
	Officer Reviewing (If Applicable)				
	ID. Number Routed To Referred To Assigned To By				
Case Status					
Clearance Type 1. Arrest 2. Exceptional 3. Unfounded A-Adult J-Juvenile					
Date Cleared					
Arrest Number					
Number Arrested					
Exception Type 1. Extradition Declined					
2. Arrest on Primary Offense Secondary Offense Without Prosecution					
3. Death of Offender 4. V / W Refused to Cooperate					
5. Prosecution Declined 6. Juvenile / No Custody					
OBTS Number					
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SCANNER

VICTIM/WITNESS/SUSPECT
AFFIDAVIT

ADM.		Agency ORI Number FLO 3 5 0 0 0 0		Agency Name LAKE COUNTY S.O.		Agency Report Number 170137584		1. Offense ☐ 2. Arrest ☐ Juvenile ☐ 1. Original ☐ 2. Supplement ☒	
Original Date Reported 09-28-17		Case Reference							
Name: <u>Michael Nelson</u>		DOB: [REDACTED]		Age:					
AKA:									
Relation to Offender:									
Contact Information									
Address: [REDACTED]									
Mailing Address:									
Home Phone: [REDACTED] Alt Phone: [REDACTED]									
Personal Information									
Race:		Sex:		Height:		Weight:			
Build:		Complexion:		Eye Color:		Hair Color:			
Scars/Marks/Tattoos:									
Clothing/Description:									
SSN: [REDACTED]									
License: [REDACTED]		EXP:		CLASS:					
Birthplace: [REDACTED]		State/Country:		Citizen:					
Comments:									
Employer Information									
Employer:									
Address:									
Work Phone:									
NARRATIVE									
While working at Cook Family residence I heard a pop in the air and looked up to see the small helicopter falling into the neighboring houses yard.									
						INTENT TO PROSECUTE			
						YES ☐ NO ☐ N/A ☒			
						[REDACTED]			
						Signature of person making statement Sworn to and subscribed before me this <u>28</u> day of <u>Sept.</u> 2017.			
						[REDACTED]			
						Law Enforcement Officer or Notary			
Report Contains <u>Affidavit</u>									
Related Report Number(s)									
Officer(s) Reporting <u>D.S.A. Grech</u>									
Officer Reviewing (If Applicable)									
Case Status		Clearance Type 1. Arrest 2. Exceptional		3. Unfounded		A-Adult J-Juvenile		Date Cleared	
Exception Type 1. Extradition Declined		2. Arrest on Primary Offense Secondary Offense Without Prosecution		3. Death of Offender 4. V / W Refused to Cooperate		5. Prosecution Declined 6. Juvenile / No Custody		Arrest Number	
								OBTS Number	
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SCANNED

VICTIM/WITNESS/SUSPECT AFFIDAVIT

Agency ORI Number FLO 3 5 0 0 0 0	Agency Name LAKE COUNTY S.O.	1. Offense ☐ 2. Arrest ☐	Juvenile ☐	1. Original ☐ 2. Supplement ☒	Agency Report Number 170137584
Original Date Reported 09/28/17		Case Reference			

Name: Jesus Luevano		DOB: [REDACTED]	Age: 22
AKA:			
Relation to Offender:			
Contact Information:			
Address: [REDACTED] Umatilla F.L. [REDACTED]		Mailing Address:	
Home Phone:		Alt Phone: [REDACTED]	
Personal Information:			
Race:	Sex:	Height:	Weight:
Build:	Complexion:	Eye Color:	Hair Color:
Scars/Marks/Tattoos:			
Clothing/Description:			
SSN:			
License:	State:	EXP:	CLASS:
Birthplace - City:	State/Country:		Citizen:
Comments:			
Employer Information:			
Employer:			
Address:			
Work Phone:			

NARRATIVE

We where at work we noticed the air plane lose a wing. Then we notice it come down while we was at work.

NARRATIVE

INTENT TO PROSECUTE

YES ☐ NO ☐ N/A ☒

Signature of person making statement
Sworn to and subscribed before me
this **28** day of **Sept.** 20**17**

Law Enforcement Officer or Notary

Report Contains AFFIDAVIT		Related Report Number(s)	
Officer(s) Reporting D.S. A. Steech		Unit C	Date 9-28-17
Officer Reviewing (If Applicable)	ID. Number	Routed To	Referred To
Case Status	Clearance Type 1. Arrest 2. Exceptional 3. Unfounded	A-Adult J-Juvenile	Date Cleared
Exception Type 1. Extradition Declined	2. Arrest on Primary Offense Secondary Offense Without Prosecution	3. Death of Offender 4. V / W Refused to Cooperate	5. Prosecution Declined 6. Juvenile / No Custody
Arrest Number		Number Arrested	
OBTS Number		Page 1 of 1	

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VICTIM/WITNESS/SUSPECT AFFIDAVIT

ADM.	Agency ORI Number FLO 3 5 0 0 0 0	Agency Name LAKE COUNTY S.O.	Agency Report Number 170137584	1. Offense 2. Arrest	Juvenile	1. Original 2. Supplement
	Original Date Reported 092817	Case Reference				

Name: BRIAN BENNETT DOB: [REDACTED] Age: [REDACTED]
 AKA: [REDACTED]
 Relation to Offender: [REDACTED]

Contact Information

Address: [REDACTED] Winter Garden, FL [REDACTED]
 Mailing Address: [REDACTED]
 Home Phone: [REDACTED] Alt Phone: [REDACTED]

Personal Information

Race: [REDACTED] Sex: [REDACTED] Height: [REDACTED] Weight: [REDACTED]
 Build: [REDACTED] Complexion: [REDACTED] Eye Color: [REDACTED] Hair Color: [REDACTED]
 Scars/Marks/Tattoos: [REDACTED]
 Clothing: [REDACTED]
 SSN: [REDACTED]
 License: [REDACTED] CLASS: [REDACTED]
 Birthplace - City: [REDACTED] State/Country: [REDACTED] Citizen: [REDACTED]
 Comments: [REDACTED]

Employer Information

Employer: [REDACTED]
 Address: [REDACTED]
 Work Phone: [REDACTED]

NARRATIVE

While working at cooks resident next door to crash site.
 Heard a loud pop and saw the helicopter fall straight down.
 It ~~was~~ looked to be bent in half and missing the back
 prop as it ~~begin~~ went down.

INTENT TO PROSECUTE

YES ☐ NO ☐ N/A ☒

Signature of person making statement
 Sworn to and subscribed before me
 this 28 day of Sept. 2017.

[REDACTED]
 Law Enforcement Officer or Notary

NARRATIVE

ADMINISTRATIVE

Report Contains <u>Affidavit</u>				Related Report Number(s)			
Officer(s) Reporting <u>DS A. Oreech</u>				ID Number(s) [REDACTED]		Unit <u>C</u>	
Officer Reviewing (If Applicable)		ID Number	Routed To	Referred To	Assigned To	By	Date <u>9-28-17</u>
Case Status	Clearance Type 1. Arrest 2. Exceptional	3. Unfounded	A-Adult J-Juvenile	Date Cleared	Arrest Number	Number Arrested	
Exception Type 1. Extradition Declined	2. Arrest on Primary Offense Secondary Offense Without Prosecution	3. Death of Offender 4. V/W Refused to Cooperate	5. Prosecution Declined 6. Juvenile / No Custody	OBTS Number	Page <u>1</u> of <u>1</u>		

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