

Ent: kmorrill 03/28/2024 04:47:22

GREENVILLE COUNTY SHERIFF'S OFFICE

EC5 03/27/2024-09:09:50

Incident Report

Agency I.D.
SC0230000

RTA

90HC,

Case Number

24000049212

Adult/Juv

EVENT	INCIDENT TYPE				OFFENSE COMPLETED	FORCED ENTRY	PREMISE TYPE				UNITS ENTERED	TYPE VICTIM <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Business <input type="checkbox"/> Financial Inst. <input type="checkbox"/> Government <input type="checkbox"/> Religious Org. <input type="checkbox"/> Soc / Public <input type="checkbox"/> Other <input type="checkbox"/> Unknown <input type="checkbox"/> Police Officer																			
	Voyeurism (Child Abuse)				N	N	20 - Residence/Home				0																				
Incident Location (Subdivision, Mill Village, Apartment & Number, Street Name & Number)				Closest Intersection				Zip Code																							
101 Autumn Dr Greenville SC								29611																							
Incident Date		Time		To	Date		Time		Weapon Type		Time Arrived		Time Completed		Patrol District																
03/15/2024		00:01			03/15/2024		23:59				07:00		08:00		09																
Complainants Name (Last, first, Middle)				Resident		Race	Sex	Age	Primary Phone		Business Phone		Mobile Phone																		
Borum, Casey (DSS)				J		W	F	25																							
Address				City		State		Zip Code		Patrol District																					
352 Halton Rd Suite 100				Greenville		SC		29607		CJ11																					
VICTIM	Victim's Name (Last, first, Middle)				Victim Relationship To Subject		Resident	Ethnicity	Race	Sex	Age	Primary Phone		Business Phone		Mobile Phone															
					OF		J	N	W	F	11																				
	Address				City		State		Zip Code		Patrol District																				
											07B																				
Visible Injury (Vict 1) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Explain:																Complaint of any Non-Visible Injuries <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No															
Victim (No.1) Using Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk Drugs <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk Type:																															
Two-Man Veh <input type="checkbox"/> One Man Veh <input type="checkbox"/> Detective/SPLASMT <input type="checkbox"/> Other <input type="checkbox"/> ALONE <input type="checkbox"/> ASSISTED <input type="checkbox"/>																Jurisdiction: -															
SUBJECT	<input checked="" type="checkbox"/> Suspect	Subject's Name (Last, first, Middle)				Ethnicity	Race	Sex	Age	Date of Birth		Height	Weight	Hair	Eyes																
	<input type="checkbox"/> Runaway	Parcell, Lutina H				N	W	F	46	03/05/1978		504	160																		
	<input type="checkbox"/> Wanted	Address				City		State		Zip Code		Patrol District																			
	<input type="checkbox"/> Warrant	101 Autumn Dr				Greenville		SC		29611		07																			
	<input type="checkbox"/> Arrest	Facial Hair, Scars, Tattoos, Glasses, Clothing, Physical, Peculiarities, Etc.				City		State		Zip Code		Patrol District																			
	<input type="checkbox"/> Missing					Greenville		SC		29611		07																			
	Subject (No. 1) Using Alcohol <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk				Arrested Near Offense Scene		Total Arrested		Date/Time of Offense		Date of Arrest																				
	Drugs <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk Type				0																										
	Arrestee Armed <input type="checkbox"/> Yes <input type="checkbox"/> No				Weapon Type				Arrested on Current Offense <input type="checkbox"/>				Cleared By Arrest on Prior Offense <input type="checkbox"/>																		
	Juvenile Disposition <input type="checkbox"/> Handled Released <input type="checkbox"/> Referred To Other Authority				On View Arrest <input type="checkbox"/> Summoned <input type="checkbox"/> Custody																										
Charge				Warrant Number				Ticket Number																							
Arrest Location				Gang Affiliation: NG - Not Gang Related																											
NARRATIVE	This case is in reference to a report received from the Department of Social Services (DSS).																														
Jurisdiction of Theft :				Jurisdiction of Recovery :																											
VEHICLE	<input type="checkbox"/> Towed	Tag Number		State		Year		V.I.N.				Value																			
	<input type="checkbox"/> Stolen	Year		Make		Model		Style				Color																			
	<input type="checkbox"/> Recovered																														
	<input type="checkbox"/> Suspect	Tag Only <input type="checkbox"/>		Additional Vehicle description																											
<input type="checkbox"/> Victim																															
PROPERTY	Status	Property Type		Quantity		Property Make		Color		Description				Serial # / OAN		Value															
ADMIN	Subject Identified		Subject Located		<input checked="" type="checkbox"/> Active <input type="checkbox"/> Admin Closed				<input type="checkbox"/> Arrested Under 18				<input type="checkbox"/> Ex-Cleared Under 18																		
	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Unfounded				<input type="checkbox"/> Arrested 18 and Over				<input type="checkbox"/> Ex-Cleared 18 and Over																		
	Reason For Exceptional Clearance <input type="checkbox"/> Offender Death <input type="checkbox"/> No Prosecution <input type="checkbox"/> Victim Declines Cooperation <input type="checkbox"/> Extradition Denied <input type="checkbox"/> Juvenile No Arrest																														
	Reporting Officer(s)		Date		Unit#/Star#		Approving Officer				Date		Unit#/Star#																		
	Aiken, James		03/26/2024		078 / 01340		ROBERTSON, MICHAEL				03/26/2024		709 / 00290																		
				/		Follow Up Investigation <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				(Officer) SID - Crimes Against				03/26/2024		/ 00000															

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06/07/2024

Agency I.D.

SC0230000

GREENVILLE COUNTY SHERIFF'S OFFICE

Case Number

EC5 03/27/2024-09:09:50

Supplemental Report

Ent: kmorrill 03/28/2024 04:47:22

24000049212

<input type="checkbox"/> Original Report		<input type="checkbox"/> Status Change		<input type="checkbox"/> Additional Victims		<input type="checkbox"/> Additional Stolen Property		Incident Type <u>Voyeurism (Child Abuse)</u>								
<input checked="" type="checkbox"/> Supplemental Report		<input type="checkbox"/> Other Report		<input type="checkbox"/> Additional Defendants		<input type="checkbox"/> Additional Recovered Property		Patrol District <u>09</u> Page <u>1</u> of <u>1</u> Pages								
I.D. OVERFLOW	<input type="checkbox"/> Complainant		Subject's Name (Last, first, Middle)				Victim Relationship To Subject		Ethnicity	Resident	Race	Sex	Age	Date of Birth		
	<input type="checkbox"/> Victim		Address				City		State	Zip Code	Patrol District	Day Phone		Evening Phone		
	<input type="checkbox"/> Subject		Height		Weight	Hair	Eyes	Facial Hair, Scars, Tattoos, Glasses, Clothing, Physical, Peculiarities, Etc.								
	<input type="checkbox"/> Runaway		<input type="checkbox"/> Victim No. _____		<input type="checkbox"/> Visible Injury <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Complaint of any Non-Visible Injuries <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Victim Using Alcohol <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Unk		<input type="checkbox"/> Two-Man Veh <input type="checkbox"/> One Man Veh <input type="checkbox"/> ALONE <input type="checkbox"/>					
	<input type="checkbox"/> Wanted		Explain:						<input type="checkbox"/> Drugs <input type="checkbox"/> No <input type="checkbox"/> Yes Type:		<input type="checkbox"/> Detective <input type="checkbox"/> Other <input type="checkbox"/> ASSISTED <input type="checkbox"/>					
NARRATIVE	<input type="checkbox"/> Arrest		Subject No. _____		Using Alcohol <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Unk						<input type="checkbox"/> Arrested on Current Offense					
	<input type="checkbox"/> Missing				Using Drugs <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Unk		Type:				<input type="checkbox"/> Cleared By Arrest on Prior Offense					
	<input type="checkbox"/> Jail															
	<input type="checkbox"/> Other															
Arrestee Armed <input type="checkbox"/> Yes <input type="checkbox"/> No		Weapon Type								<input type="checkbox"/> On View Arrest <input type="checkbox"/> Summoned <input type="checkbox"/> Custody						
Juvenile Disposition <input type="checkbox"/> Handled Released <input type="checkbox"/> Referred To Other Authority																
Arrest Location																
<p>Overflow: Show of Force: NO Terrorist Affiliation: Not Terrorist related Hate Group Affiliation: Not Hate Group related</p> <p>----- [REDACTED]:Victim 1</p> <p>DOB: [REDACTED] Victim Form Given: NO</p> <p>----- Parcell, Lutina H:Subject 1 Subject Types: Suspect</p> <p>Mobile: (864)298-1188 , DOB: 03/05/1978</p> <p>Narrative: This case is in reference to a DSS referral submitted to this agency requesting a criminal investigation.</p> <p>DSS Intake ID # 0001221739 indicates 11-year old, [REDACTED], said she was photographed by her aunt, Lutina Parcell, when she was getting out of the shower. The report indicates [REDACTED] saw her aunt taking the picture through a crack in the door during one of her court ordered visits.</p> <p>This case is active and to be investigated by the Crimes against Children Unit.</p> <p>[REDACTED] father: [REDACTED], [REDACTED]</p>																
PROPERTY	Status		Property Type		Quantity		Property Make		Color		Description		Serial # / OAN		Value	
ADMIN	Subject Identified		Subject Located		<input checked="" type="checkbox"/> Active <input type="checkbox"/> Admin Closed		<input type="checkbox"/> Arrested Under 18		<input type="checkbox"/> Ex-Cleared Under 18							
	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Unfounded		<input type="checkbox"/> Arrested 18 and Over		<input type="checkbox"/> Ex-Cleared 18 and Over							
	Reason For Exceptional Clearance		<input type="checkbox"/> Offender Death		<input type="checkbox"/> No Prosecution		<input type="checkbox"/> Victim Declines Cooperation		<input type="checkbox"/> Extradition Denied		<input type="checkbox"/> Juvenile No Arrest					
	Reporting Officer(s)		Date		Unit#/Star#		Approving Officer		Date		Unit#/Star#					
	Aiken, James		03/26/2024		078 / 01340		ROBERTSON, MICHAEL		03/26/2024		709 / 00290					
				/		Follow Up Investigation <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Officer)		SID - Crimes Again		03/26/2024		/ 00000				

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06/07/2024

Agency I.D.
SC0230000

EC5 04/01/2024-15:23:27

GREENVILLE COUNTY SHERIFF'S OFFICE

Supplemental Report Ent: tbuss 04/11/2024 23:01:20

Case Number

24000049212

<input type="checkbox"/> Original Report	<input type="checkbox"/> Status Change	<input type="checkbox"/> Additional Victims	<input type="checkbox"/> Additional Stolen Property	Incident Type <u>Voyeurism (Child Abuse)</u>																																																
<input checked="" type="checkbox"/> Supplemental Report	<input type="checkbox"/> Other Report	<input type="checkbox"/> Additional Defendants	<input type="checkbox"/> Additional Recovered Property	Patrol District <u>09</u>	Page <u>1</u> of <u>2</u> Pages																																															
I. D. OVERFLOW	<input type="checkbox"/> Complainant			Subject's Name (Last, first, Middle)		Victim Relationship To Subject	Ethnicity	Resident	Race	Sex	Age	Date of Birth																																								
	<input checked="" type="checkbox"/> Victim # 1			[REDACTED]		OF	N	J	W	F	11	[REDACTED]																																								
	<input type="checkbox"/> Subject			Address		City	State	Zip Code	Patrol District	Day Phone	Evening Phone																																									
	<input type="checkbox"/> Runaway			[REDACTED]		[REDACTED]	[REDACTED]	[REDACTED]	07B																																											
	<input type="checkbox"/> Wanted			Height		Weight	Hair	Eyes	Facial Hair, Scars, Tattoos, Glasses, Clothing, Physical, Peculiarities, Etc.																																											
	<input type="checkbox"/> Arrest			<input checked="" type="checkbox"/> Victim No. <u>1</u>		Visible Injury <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Complaint of any Non-Visible Injuries <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Victim Using Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk		Two-Man Veh <input type="checkbox"/> One Man Veh <input type="checkbox"/> ALONE <input type="checkbox"/>																																								
	<input type="checkbox"/> Missing			Explain:				Drugs <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Type:		Detective <input type="checkbox"/> Other <input type="checkbox"/> ASSISTED <input type="checkbox"/>																																										
	<input type="checkbox"/> Jail			Subject No. <u> </u>		Using Alcohol <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Unk				<input type="checkbox"/> Arrested on Current Offense																																										
	<input type="checkbox"/> Other					Using Drugs <input type="checkbox"/> No <input type="checkbox"/> Yes Type:				<input type="checkbox"/> Unk <input type="checkbox"/> Cleared By Arrest on Prior Offense																																										
	Arrestee Armed <input type="checkbox"/> Yes <input type="checkbox"/> No				Weapon Type				<input type="checkbox"/> On View Arrest <input type="checkbox"/> Summoned <input type="checkbox"/> Custody																																											
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NARRATIVE	Overflow: Show of Force: NO Terrorist Affiliation: Not Terrorist related Hate Group Affiliation: Not Hate Group related																																																			
	----- [REDACTED]:Victim 1																																																			
	Victim Form Given: NO																																																			
	----- Borum, Casey (DSS):Complainant 1																																																			
	RACE: white, SEX: Female, RESIDENT: Primary Jurisdiction, Mobile: [REDACTED] Primary: [REDACTED] 352 Halton Rd Greenville 29607 suite 100 CJ11 (Greenville City)																																																			
	----- Parcell, Lutina H:Subject 1 Subject Types: Suspect ADDRESS: 101 Autimn Dr Greenville SC 29611 07, ETHNICITY: N, RESIDENT: J, RACE: W, SEX: F, AGE: 46, DOB: 03/05/1978,																																																			
	Mobile: (864)298-1188 , Physical Description HEIGHT:504, WEIGHT:160, VISIBLE INJURY: No, NON-VISIBLE INJURY: No, USING ALCOHOL: Unknown, USING DRUGS: Unknown																																																			
	Narrative: *****Supplemental Report*****																																																			
	This case is regarding allegations that [REDACTED] was sexually exploited by her maternal aunt.																																																			
	I began my investigation into the allegations on 03/27/24. I contacted DSS for background information. They will be emailing me their reports. [REDACTED] did inform Ms. Borem that she just																																																			
PROPERTY	<table border="1"><thead><tr><th>Status</th><th>Property Type</th><th>Quantity</th><th>Property Make</th><th>Color</th><th>Description</th><th>Serial # / OAN</th><th>Value</th></tr></thead><tbody><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></tbody></table>												Status	Property Type	Quantity	Property Make	Color	Description	Serial # / OAN	Value																																
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ADMIN	Subject Identified		Subject Located		<input checked="" type="checkbox"/> Active <input type="checkbox"/> Admin Closed <input type="checkbox"/> Unfounded		<input type="checkbox"/> Arrested Under 18 <input type="checkbox"/> Arrested 18 and Over		<input type="checkbox"/> Ex-Cleared Under 18 <input type="checkbox"/> Ex-Cleared 18 and Over																																											
	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																																																	
	Reason For Exceptional Clearance <input type="checkbox"/> Offender Death <input type="checkbox"/> No Prosecution <input type="checkbox"/> Victim Declines Cooperation <input type="checkbox"/> Extradition Denied <input type="checkbox"/> Juvenile No Arrest																																																			
	Reporting Officer(s)		Date	Unit#/Star#	Approving Officer		Date	Unit#/Star#																																												
MILLER, ALEXANDRA		03/27/2024	777 / 01651	ROBERTSON, MICHAEL		04/01/2024	709 / 00290																																													
			/	Follow Up Investigation <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Officer) Miller, Alexandra		03/27/2024	777 / 01651																																													

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06/07/2024

Agency I.D.
SC0230000

EC5 04/01/2024-15:23:27

GREENVILLE COUNTY SHERIFF'S OFFICE

Supplemental Report Ent: tbuss 04/11/2024 23:01:20

Case Number

24000049212

<input type="checkbox"/> Original Report		<input type="checkbox"/> Status Change		<input type="checkbox"/> Additional Victims		<input type="checkbox"/> Additional Stolen Property		Incident Type <u>Voyeurism (Child Abuse)</u>								
<input checked="" type="checkbox"/> Supplemental Report		<input type="checkbox"/> Other Report		<input type="checkbox"/> Additional Defendants		<input type="checkbox"/> Additional Recovered Property		Patrol District <u>09</u> Page <u>2</u> of <u>2</u> Pages								
I.D. OVERFLOW	<input type="checkbox"/> Complainant		Subject's Name (Last, first, Middle)				Victim Relationship To Subject		Ethnicity	Resident	Race	Sex	Age	Date of Birth		
	<input type="checkbox"/> Victim		Address				City		State	Zip Code		Patrol District		Day Phone		Evening Phone
	<input type="checkbox"/> Subject		Height		Weight	Hair	Eyes	Facial Hair, Scars, Tattoos, Glasses, Clothing, Physical, Peculiarities, Etc.								
	<input type="checkbox"/> Runaway		<input type="checkbox"/> Victim No. _____		<input type="checkbox"/> Visible Injury <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Complaint of any Non-Visible Injuries <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Victim Using Alcohol <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk		<input type="checkbox"/> Two-Man Veh <input type="checkbox"/> Detective		<input type="checkbox"/> One Man Veh <input type="checkbox"/> Other		<input type="checkbox"/> ALONE <input type="checkbox"/> ASSISTED	
	<input type="checkbox"/> Wanted		Explain:		Subject No. _____		Using Alcohol <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Unk		Using Drugs <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Unk		<input type="checkbox"/> Arrested on Current Offense		<input type="checkbox"/> Unk		<input type="checkbox"/> Cleared By Arrest on Prior Offense	
	<input type="checkbox"/> Arrest		<input type="checkbox"/> Missing		<input type="checkbox"/> Jail		<input type="checkbox"/> Other									
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<input type="checkbox"/> Arrest		<input type="checkbox"/> Missing		<input type="checkbox"/> Jail		<input type="checkbox"/> Other										
<input type="checkbox"/> Arrest																

Agency I.D.
SC0230000

EC5 04/19/2024-00:39:28

GREENVILLE COUNTY SHERIFF'S OFFICE

Supplemental Report Ent: dsaunders 04/23/2024
06:55:41

Case Number

24000049212

<input type="checkbox"/> Original Report	<input checked="" type="checkbox"/> Status Change	<input type="checkbox"/> Additional Victims	<input type="checkbox"/> Additional Stolen Property	Incident Type <u>Voyeurism (Child Abuse)</u>				
<input checked="" type="checkbox"/> Supplemental Report	<input type="checkbox"/> Other Report	<input type="checkbox"/> Additional Defendants	<input type="checkbox"/> Additional Recovered Property	Patrol District <u>09</u>	Page <u>1</u> of <u>6</u> Pages			
I. D. OVERFLOW	<input type="checkbox"/> Complainant		Subject's Name (Last, first, Middle)		Victim Relationship To Subject			
	<input checked="" type="checkbox"/> Victim # 1				OF			
	<input type="checkbox"/> Subject		Address		Ethnicity			
	<input type="checkbox"/> Runaway		City		N			
	<input type="checkbox"/> Wanted		State		J			
	<input type="checkbox"/> Arrest		Zip Code		W			
	<input type="checkbox"/> Missing		Patrol District		F			
	<input type="checkbox"/> Jail		Day Phone		11			
	<input type="checkbox"/> Other		Evening Phone					
	<input type="checkbox"/> Arrest		Height		Age			
<input checked="" type="checkbox"/> Victim No. <u>1</u>		Weight		Date of Birth				
Explain:		Hair						
<input type="checkbox"/> Visible Injury <input checked="" type="checkbox"/> No		Eyes						
<input type="checkbox"/> Complaint of any Non-Visible Injuries <input checked="" type="checkbox"/> No		Facial Hair, Scars, Tattoos, Glasses, Clothing, Physical, Peculiarities, Etc.						
<input type="checkbox"/> Victim Using Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk		Two-Man Veh <input type="checkbox"/> One Man Veh <input type="checkbox"/> ALONE <input type="checkbox"/>						
Drugs <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Type:		Detective <input type="checkbox"/> Other <input type="checkbox"/> ASSISTED <input type="checkbox"/>						
Subject No. <u> </u>		Using Alcohol <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Unk		<input type="checkbox"/> Arrested on Current Offense				
Using Drugs <input type="checkbox"/> No <input type="checkbox"/> Yes Type:		<input type="checkbox"/> Unk		<input type="checkbox"/> Cleared By Arrest on Prior Offense				
Arrestee Armed <input type="checkbox"/> Yes <input type="checkbox"/> No		Weapon Type		<input type="checkbox"/> On View Arrest <input type="checkbox"/> Summoned <input type="checkbox"/> Custody				
Juvenile Disposition <input type="checkbox"/> Handled Released <input type="checkbox"/> Referred To Other Authority								
Arrest Location		Gang Affiliation: NG - Not Gang Related						
NARRATIVE	Overflow: Show of Force: NO Terrorist Affiliation: Not Terrorist related Hate Group Affiliation: Not Hate Group related INCIDENT TYPE: M576 - Unlawful Communications, OFFENSE COMPLETE: Y, FORCED ENTRY: N, PREMISE TYPE: 58 - Cyberspace, UNITS ENTERED: 0 ----- [REDACTED]:Victim 1 Victim Form Given: NO ----- Borum, Casey (DSS):Complainant 1 RACE: White, SEX: Female, RESIDENT: Primary Jurisdiction, Mobile:[REDACTED] Primary: 352 Halton Rd Greenville 29607 suite 100 CJ11 (Greenville City) ----- Parcell, Lutina H:Subject 1 Subject Types: Suspect ADDRESS: 101 Autimn Dr Greenville SC 29611 07, ETHNICITY: N, RESIDENT: J, RACE: W, SEX: F, AGE: 46, DOB: 03/05/1978, Mobile: (864)298-1188 , Physical Description HEIGHT:504, WEIGHT:160, VISIBLE INJURY: No, NON-VISIBLE INJURY: No, USING ALCOHOL: Unknown, USING DRUGS: Unknown Narrative: *****Supplemental Report***** This case is regarding allegations that [REDACTED] was sexually exploited by her maternal aunt.							
PROPERTY	Status	Property Type	Quantity	Property Make	Color	Description	Serial # / OAN	Value
ADMIN	Subject Identified		Subject Located		<input type="checkbox"/> Active <input type="checkbox"/> Admin Closed		<input type="checkbox"/> Arrested Under 18	
	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Unfounded		<input type="checkbox"/> Ex-Cleared Under 18	
	Reason For Exceptional Clearance		<input type="checkbox"/> Offender Death <input checked="" type="checkbox"/> No Prosecution		<input type="checkbox"/> Victim Declines Cooperation		<input type="checkbox"/> Ex-Cleared 18 and Over	
	Reporting Officer(s)		Date	Unit#/Star#	Approving Officer		Date	Unit#/Star#
	MILLER, ALEXANDRA		04/17/2024	777 / 01651	ROBERTSON, MICHAEL		04/18/2024	709 / 00290
			/	Follow Up Investigation <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Officer)			/	

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Records Copy

06/07/2024

Agency I.D.
SC0230000

GREENVILLE COUNTY SHERIFF'S OFFICE
EC5 04/19/2024-00:39:28

Supplemental Report Ent: dsaunder 04/23/2024
06:55:41

Case Number
24000049212

<input type="checkbox"/> Original Report	<input checked="" type="checkbox"/> Status Change	<input type="checkbox"/> Additional Victims	<input type="checkbox"/> Additional Stolen Property	Incident Type <u>Voyeurism (Child Abuse)</u>							
<input checked="" type="checkbox"/> Supplemental Report	<input type="checkbox"/> Other Report	<input type="checkbox"/> Additional Defendants	<input type="checkbox"/> Additional Recovered Property	Patrol District <u>09</u>	Page <u>2</u> of <u>6</u> Pages						
I.D. OVERFLOW	<input type="checkbox"/> Complainant	Subject's Name (Last, first, Middle)		Victim Relationship To Subject		Ethnicity	Resident	Race	Sex	Age	Date of Birth
	<input type="checkbox"/> Victim	Address		City	State	Zip Code	Patrol District	Day Phone	Evening Phone		
	<input type="checkbox"/> Subject	Height	Weight	Hair	Eyes	Facial Hair, Scars, Tattoos, Glasses, Clothing, Physical, Peculiarities, Etc.					
	<input type="checkbox"/> Runaway	<input type="checkbox"/> Victim No. <u> </u>	<input type="checkbox"/> Visible Injury <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Complaint of any Non-Visible Injuries <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Victim Using Alcohol <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk	<input type="checkbox"/> Two-Man Veh <input type="checkbox"/> One Man Veh <input type="checkbox"/> ALONE <input type="checkbox"/>					
	<input type="checkbox"/> Wanted	Explain:		<input type="checkbox"/> Drugs <input type="checkbox"/> No <input type="checkbox"/> Yes Type:	<input type="checkbox"/> Detective <input type="checkbox"/> Other <input type="checkbox"/> ASSISTED <input type="checkbox"/>						
<input type="checkbox"/> Arrest	Subject No. <u> </u>		Using Alcohol <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Unk	<input type="checkbox"/> Arrested on Current Offense							
<input type="checkbox"/> Missing			Using Drugs <input type="checkbox"/> No <input type="checkbox"/> Yes Type:	<input type="checkbox"/> Unk	<input type="checkbox"/> Cleared By Arrest on Prior Offense						
<input type="checkbox"/> Jail	Arrestee Armed <input type="checkbox"/> Yes <input type="checkbox"/> No		Weapon Type		<input type="checkbox"/> On View Arrest <input type="checkbox"/> Summoned <input type="checkbox"/> Custody						
<input type="checkbox"/> Other	Juvenile Disposition <input type="checkbox"/> Handled Released <input type="checkbox"/> Referred To Other Authority										
Arrest Location				Gang Affiliation: NG - Not Gang Related							
NARRATIVE	As of 04/12/24. I have met with all parties and the case will be closed as none of the allegations have the probable cause to obtain warrants.										
	I was able to meet with [REDACTED] and [REDACTED] on 04/08/24. Before I met with them, [REDACTED] was served paperwork by the solicitor's office. At the time, I was unaware of what the paperwork was regarding but had been advised that it would be transpiring. [REDACTED] was not happy about the interaction and advised me of such. Prior to this meeting, I have also received numerous emails from [REDACTED]. He recently emailed me regarding harassment and unlawful communication by Ms. Parcell. All emails are in the file.										
	I did request to speak with [REDACTED] by herself but [REDACTED]. Before getting into the original allegations and after the subpoena service was discussed, [REDACTED] talked with me about the emails he had been sending regarding the communication with Mrs. Parcell. [REDACTED] stated that he did not get us involved, we contacted him about everything and he is only doing what is best for his daughter. He stated that [REDACTED] does not want to speak with the aunt but he does facilitate the calls, he does not deny them. There is a family court order regarding visits and communication which the parties have to agree on. [REDACTED] is upset that Mrs. Parcell is not agreeing to cease communication. He stated that this is causing [REDACTED] significant stress and anxiety. All this was said with [REDACTED] sitting next to him. [REDACTED] said several times that it was not him making the complaint but [REDACTED] and that he did not reach out to LE, that LE reached out to him. He stated he was not making any complaints, just [REDACTED]. I informed [REDACTED] that there was a court order in place and it would need to go back to court to be revised unless they agree to other terms, which they are not agreeing to amongst themselves. [REDACTED] stated that it was clear in the court order that Ms. Parcell is violating and his criminal lawyer told him that laws are being violated. I did ask for him to send a copy of said order.										
	I switched topics from the communication to the original allegations. [REDACTED]										
PROPERTY	[REDACTED]										
	[REDACTED]										
	[REDACTED]										
	[REDACTED]										
ADMIN	Status		Property Type	Quantity	Property Make	Color	Description	Serial # / OAN	Value		
ADMIN	Subject Identified		Subject Located		<input type="checkbox"/> Active <input type="checkbox"/> Admin Closed		<input type="checkbox"/> Arrested Under 18		<input type="checkbox"/> Ex-Cleared Under 18		
	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Unfounded		<input type="checkbox"/> Arrested 18 and Over		<input checked="" type="checkbox"/> Ex-Cleared 18 and Over		
	Reason For Exceptional Clearance		<input type="checkbox"/> Offender Death <input checked="" type="checkbox"/> No Prosecution		<input type="checkbox"/> Victim Declines Cooperation		<input type="checkbox"/> Extradition Denied		<input type="checkbox"/> Juvenile No Arrest		
	Reporting Officer(s)		Date	Unit#/Star#	Approving Officer		Date	Unit#/Star#			
	MILLER, ALEXANDRA		04/17/2024	777 / 01651	ROBERTSON, MICHAEL		04/18/2024	709 / 00290			
				Follow Up Investigation <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Officer)							

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Records Copy

06/07/2024

<input type="checkbox"/>	Original Report	<input checked="" type="checkbox"/>	Status Change	<input type="checkbox"/>	Additional Victims	<input type="checkbox"/>	Additional Stolen Property	Incident Type <u>Voyeurism (Child Abuse)</u>			
<input checked="" type="checkbox"/>	Supplemental Report	<input type="checkbox"/>	Other Report	<input type="checkbox"/>	Additional Defendants	<input type="checkbox"/>	Additional Recovered Property	Patrol District <u>09</u> Page <u>3</u> of <u>6</u> Pages			

I. D. OVERFLOW	<input type="checkbox"/> Complainant	Subject's Name (Last, first, Middle)			Victim Relationship To Subject		Ethnicity	Resident	Race	Sex	Age	Date of Birth	
	<input type="checkbox"/> Victim	Address			City	State	Zip Code	Patrol District	Day Phone	Evening Phone			
	<input type="checkbox"/> Subject	Height	Weight	Hair	Eyes	Facial Hair, Scars, Tattoos, Glasses, Clothing, Physical, Peculiarities, Etc.							
	<input type="checkbox"/> Runaway	<input type="checkbox"/> Victim No. _____		<input type="checkbox"/> Visible Injury Yes <input type="checkbox"/> No		<input type="checkbox"/> Complaint of any Non-Visible Injuries Yes <input type="checkbox"/> No		<input type="checkbox"/> Victim Using Alcohol Yes <input type="checkbox"/> No <input type="checkbox"/> Unk		<input type="checkbox"/> Two-Man Veh <input type="checkbox"/> One Man Veh <input type="checkbox"/> ALONE <input type="checkbox"/>		<input type="checkbox"/> Detective <input type="checkbox"/> Other <input type="checkbox"/> ASSISTED <input type="checkbox"/>	
	<input type="checkbox"/> Wanted	Explain:			<input type="checkbox"/> Subject No. _____		Using Alcohol <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Unk		<input type="checkbox"/> Arrested on Current Offense				

<input type="checkbox"/> Arrest	<input type="checkbox"/> Missing	<input type="checkbox"/> Jail	<input type="checkbox"/> Other	Using Drugs <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Type:		<input type="checkbox"/> Unk	Cleared By Arrest on Prior Offense	
<input type="checkbox"/> Arrestee Armed <input type="checkbox"/> Yes <input type="checkbox"/> No				Weapon Type		<input type="checkbox"/> On View Arrest <input type="checkbox"/> Summoned <input type="checkbox"/> Custody		
Juvenile Disposition <input type="checkbox"/> Handled Released <input type="checkbox"/> Referred To Other Authority								
Arrest Location						Gang Affiliation: NG - Not Gang Related		

NARRATIVE

the following day. [REDACTED]. They both stated that they do not know how she got the screenshot. [REDACTED] only sent the screenshot to his attorney and a couple of close friends. [REDACTED] then started talking about emails he got for the discovery of an upcoming trial and how Ms. Parcell is working with [REDACTED] but the DOJ has all that information. [REDACTED] is concerned that Ms. Parcell has access to his personal messages and is adamant that is the only way she got it and it would not be from someone forwarding his messages out. He did not contact LE after receiving the text from his daughter because of the court order and not wanting to put [REDACTED] through that. [REDACTED] did not allow [REDACTED] to talk much. He dominated the conversation and [REDACTED] did not want to speak with me alone.

I eventually asked [REDACTED] to leave the room as at this point it was primarily a conversation between myself and [REDACTED]. DSS had already advised me on their initial contact with [REDACTED] and [REDACTED] and per their IC, it was a slightly different take from what I was being told. [REDACTED] mentioned nothing about contacting SLED about the text, as DSS was told. I was not informed that [REDACTED] called [REDACTED] asking if she wanted to be picked up but she wanted to stay so they could do the trampoline park the following day. All can be read in the IC dictation that the CW provided and was put into the file. DSS also reported that [REDACTED] told them she assumed the aunt was taking pictures because she had seen the phone through a crack in an open door. I explained to [REDACTED] I could not do anything with her assuming and that I do not have any probable cause to access the aunts' phone. [REDACTED]

[REDACTED]

We spoke a bit about the background. [REDACTED] started to discuss the DSS cover-up and the corruption in GCSO along with how he felt the previous investigators mismanaged the cases. I informed him that I would look into their concerns for unlawful communication but I needed the court orders. They also stated that they would send me recordings of the calls. I did discuss him returning to Family Court because that was the only way to amend their court order. He informed me that was in the works. [REDACTED] also expressed concerns on how our department has dropped the ball on his daughter numerous times and he just wants to protect her.

I received a copy of the court order. Information pertaining to the case:
Page 2 of 5

PROPERTY	Status	Property Type	Quantity	Property Make	Color	Description	Serial # / OAN	Value

ADMIN	Subject Identified		Subject Located		<input type="checkbox"/> Active <input type="checkbox"/> Admin Closed <input type="checkbox"/> Unfounded		<input type="checkbox"/> Arrested Under 18 <input type="checkbox"/> Arrested 18 and Over		<input type="checkbox"/> Ex-Cleared Under 18 <input checked="" type="checkbox"/> Ex-Cleared 18 and Over	
	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
	Reason For Exceptional Clearance <input type="checkbox"/> Offender Death <input checked="" type="checkbox"/> No Prosecution <input type="checkbox"/> Victim Declines Cooperation <input type="checkbox"/> Extradition Denied <input type="checkbox"/> Juvenile No Arrest									
	Reporting Officer(s)		Date	Unit#/Star#	Approving Officer		Date	Unit#/Star#		
	MILLER, ALEXANDRA		04/17/2024	777 / 01651	ROBERTSON, MICHAEL		04/18/2024	709 / 00290		

Follow Up Investigation <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Officer)	
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Agency I.D.
SC0230000

EC5 04/19/2024-00:39:28

GREENVILLE COUNTY SHERIFF'S OFFICE

Supplemental Report Ent: dsaunder 04/23/2024

06:55:41

Case Number

24000049212

<input type="checkbox"/> Original Report	<input checked="" type="checkbox"/> Status Change	<input type="checkbox"/> Additional Victims	<input type="checkbox"/> Additional Stolen Property	Incident Type <u>Voyeurism (Child Abuse)</u>							
<input checked="" type="checkbox"/> Supplemental Report	<input type="checkbox"/> Other Report	<input type="checkbox"/> Additional Defendants	<input type="checkbox"/> Additional Recovered Property	Patrol District <u>09</u>	Page <u>4</u> of <u>6</u> Pages						
I.D. OVERFLOW	<input type="checkbox"/> Complainant	Subject's Name (Last, first, Middle)		Victim Relationship To Subject		Ethnicity	Resident	Race	Sex	Age	Date of Birth
	<input type="checkbox"/> Victim	Address		City	State	Zip Code	Patrol District	Day Phone	Evening Phone		
	<input type="checkbox"/> Subject	Height	Weight	Hair	Eyes	Facial Hair, Scars, Tattoos, Glasses, Clothing, Physical, Peculiarities, Etc.					
	<input type="checkbox"/> Runaway	<input type="checkbox"/> Victim No. <u> </u>		<input type="checkbox"/> Visible Injury <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Complaint of any Non-Visible Injuries <input type="checkbox"/> Yes <input type="checkbox"/> No		Victim Using Alcohol <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk		Two-Man Veh <input type="checkbox"/> One Man Veh <input type="checkbox"/> ALONE <input type="checkbox"/>	
	<input type="checkbox"/> Wanted	Explain:				Drugs <input type="checkbox"/> No <input type="checkbox"/> Yes Type:		Detective <input type="checkbox"/> Other <input type="checkbox"/> ASSISTED <input type="checkbox"/>			
	<input type="checkbox"/> Arrest	Subject No. <u> </u>		Using Alcohol <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Unk				<input type="checkbox"/> Arrested on Current Offense			
<input type="checkbox"/> Missing			Using Drugs <input type="checkbox"/> No <input type="checkbox"/> Yes Type:				<input type="checkbox"/> Unk <input type="checkbox"/> Cleared By Arrest on Prior Offense				
<input type="checkbox"/> Jail	Arrestee Armed <input type="checkbox"/> Yes <input type="checkbox"/> No				Weapon Type		<input type="checkbox"/> On View Arrest <input type="checkbox"/> Summoned <input type="checkbox"/> Custody				
<input type="checkbox"/> Other	Juvenile Disposition <input type="checkbox"/> Handled Released <input type="checkbox"/> Referred To Other Authority										
Arrest Location				Gang Affiliation: NG - Not Gang Related							
NARRATIVE	i. "Aunt shall have unsupervised visitation on the 2nd weekend of each month for three (3) hours at any location.										
	ii. Aunt shall have unsupervised visitation on the 3rd weekend of each month from Friday at 5:00 PM until Sunday at 1:00 PM. Aunt agrees to stay in South Carolina during her periods of visitation. If Aunt travels more than two (2) hours outside of the Greenville area she will provide a basic itinerary to Father.										
	1. For August weekend the parties agree that the Aunt shall have the 4th weekend (the weekend of August 25,2023-August 27-2025.										
	iii. The parties shall exchange the minor child at the Aunt's home unless they agree otherwise in advance in writing.										
PROPERTY	iv. Aunt may also have reasonable phone contact including her current schedule and on Wednesdays.										
	v. Aunt shall be allowed to attend school and extra-curricular events. Father shall keep Aunt informed of these events in a timely manner such that she may attend if able.										
	vi. Maternal Grandmother may be present for periods of visitation while the Aunt is present until 8PM. Maternal Grandfather shall be supervised by Liz Young, or a delegate from her business, or another agreed upon person.										
	vii. Other than the Grnadparents as noted herein there shall be no other 3rd parties present or contact during periods of visitation other than family members.										
	viii. The parties may agree to additional visitation in writing. They may also alter or amend the times for visitation to allow for flexibility as necessary."										
	I did make contact with Ms. Parcell via the phone and scheduled for her to come speak with me on 04/12. She denied the picture, [REDACTED] did not even shower that evening, and she also sent me an email of the court order which matched what [REDACTED] had previously sent. Ms. Parcell did CC the solicitors in the email and brought up concerns of witness intimidation due to her being a witness in a trial against [REDACTED] that was starting on 04/15.										
	I read over the court orders. As seen in section iv and viii, she is scheduled for contact unless otherwise agreed up. Ms. Parcell not agreeing to [REDACTED] request to stop contact does not reach the level of harassment or unlawful.										
	I meet with Ms. Parcell on 04/12. She was read her Miranda Rights before talking and she signed waiver of Rights. Ms. Parcell advised me that the Family Court case in currently										
ADMIN	Status		Property Type	Quantity	Property Make	Color	Description	Serial # / OAN	Value		
ADMIN	Subject Identified		Subject Located		<input type="checkbox"/> Active <input type="checkbox"/> Admin Closed		<input type="checkbox"/> Arrested Under 18		<input type="checkbox"/> Ex-Cleared Under 18		
	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Unfounded		<input type="checkbox"/> Arrested 18 and Over		<input checked="" type="checkbox"/> Ex-Cleared 18 and Over		
	Reason For Exceptional Clearance		<input type="checkbox"/> Offender Death <input checked="" type="checkbox"/> No Prosecution		<input type="checkbox"/> Victim Declines Cooperation		<input type="checkbox"/> Extradition Denied		<input type="checkbox"/> Juvenile No Arrest		
	Reporting Officer(s)		Date	Unit#/Star#	Approving Officer		Date	Unit#/Star#			
	MILLER, ALEXANDRA		04/17/2024	777 / 01651	ROBERTSON, MICHAEL		04/18/2024	709 / 00290			
				Follow Up Investigation <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Officer)							

MB MB

Records Copy

06/07/2024

Agency I.D.
SC0230000

EC5 04/19/2024-00:39:28

GREENVILLE COUNTY SHERIFF'S OFFICE

Supplemental Report Ent: dsaunder 04/23/2024
06:55:41

Case Number

24000049212

<input type="checkbox"/> Original Report	<input checked="" type="checkbox"/> Status Change	<input type="checkbox"/> Additional Victims	<input type="checkbox"/> Additional Stolen Property	Incident Type <u>Voyeurism (Child Abuse)</u>																																														
<input checked="" type="checkbox"/> Supplemental Report	<input type="checkbox"/> Other Report	<input type="checkbox"/> Additional Defendants	<input type="checkbox"/> Additional Recovered Property	Patrol District <u>09</u>	Page <u>5</u> of <u>6</u> Pages																																													
I.D. OVERFLOW	<input type="checkbox"/> Complainant	Subject's Name (Last, first, Middle)		Victim Relationship To Subject	Ethnicity	Resident	Race	Sex	Age	Date of Birth																																								
	<input type="checkbox"/> Victim	Address		City	State	Zip Code	Patrol District	Day Phone	Evening Phone																																									
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Arrest Location				Gang Affiliation: NG - Not Gang Related																																														
NARRATIVE	being appealed by the GAL, Vanessa Kormylo.																																																	
	Ms. Parcell does have cameras throughout her house but they are not in the bathroom or <u> </u> room. The cameras were down until Saturday, 3/16, morning. Ms. Parcell stated that she did not shower that weekend and there is audio on a camera with <u> </u> saying that. Due to concerns for safety and past actions, Ms. Parcell has cameras throughout the house, a body-worn camera, a camera in her car, a second phone, she has moved multiple times, and always communicates with him before calling to make sure she can call. Ms. Parcell sent me all of the text messages between her and <u> </u> from August 15, 2023 to April 10, 2024. Ms. Parcell has texted before making every call to verify what time works for them for her to make the call. <u> </u> provides a time and then the call occurs. Though the text message I have looked over, Ms. Parcell usually keeps to only texting about what time to make the call. While there are other texts regarding visits and illnesses, the majority are regarding setting a time for call.																																																	
	Ms. Parcell advised that she and her lawyers had spoken, and with the order in place, they would continue with visits and calls as normal. <u> </u> has not taken them back to Family Court to revise and Ms. Parcell stated she is used to false allegations. Ms. Parcell also expressed concerns that the moment she gives in, stops the calls, or visits, she believes that <u> </u> will use that against her in court and have her time with <u> </u> taken away. Ms. Parcell spoke a bit about the history and trauma she continues to endure due to the situation. She did show me her phones and videos from Saturday, the day after the incident, where <u> </u> and she were in the living room playing with the cameras and the cat. <u> </u> was smiling, laughing, and interacting; she did not appear upset or avoidant.																																																	
	Before leaving, Ms. Parcell brought up concerns for her safety. She was concerned that <u> </u> may try something or have someone else try to do something to her because he trial starts the following week and the last person who stood up to him was her sister who was murdered. By the end of the day, I set up for extra patrol around her home for the week. I also received an email from <u> </u> , <u> </u> therapist. It stated the following: <u> </u> <u> </u>																																																	
PROPERTY	<table border="1"><thead><tr><th>Status</th><th>Property Type</th><th>Quantity</th><th>Property Make</th><th>Color</th><th>Description</th><th>Serial # / OAN</th><th>Value</th></tr></thead><tbody><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></tbody></table>										Status	Property Type	Quantity	Property Make	Color	Description	Serial # / OAN	Value																																
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MILLER, ALEXANDRA		04/17/2024	777 / 01651	ROBERTSON, MICHAEL		04/18/2024	709 / 00290																																											
			/	Follow Up Investigation <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Officer)																																														

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06/07/2024

Agency I.D.
SC0230000

EC5 04/19/2024-00:39:28

GREENVILLE COUNTY SHERIFF'S OFFICE

Supplemental Report Ent: dsaunder 04/23/2024
06:55:41

Case Number

24000049212

<input type="checkbox"/> Original Report	<input checked="" type="checkbox"/> Status Change	<input type="checkbox"/> Additional Victims	<input type="checkbox"/> Additional Stolen Property	Incident Type <u>Voyeurism (Child Abuse)</u>
<input checked="" type="checkbox"/> Supplemental Report	<input type="checkbox"/> Other Report	<input type="checkbox"/> Additional Defendants	<input type="checkbox"/> Additional Recovered Property	Patrol District <u>09</u> Page <u>6</u> of <u>6</u> Pages

I.D. OVERFLOW	<input type="checkbox"/> Complainant	Subject's Name (Last, first, Middle)		Victim Relationship To Subject		Ethnicity	Resident	Race	Sex	Age	Date of Birth	
	<input type="checkbox"/> Victim	Address		City	State	Zip Code	Patrol District	Day Phone		Evening Phone		
	<input type="checkbox"/> Subject	Height	Weight	Hair	Eyes	Facial Hair, Scars, Tattoos, Glasses, Clothing, Physical, Peculiarities, Etc.						
	<input type="checkbox"/> Runaway	<input type="checkbox"/> Victim No. _____	<input type="checkbox"/> Visible Injury <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Complaint of any Non-Visible Injuries <input type="checkbox"/> Yes <input type="checkbox"/> No		Victim Using Alcohol <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk		Two-Man Veh <input type="checkbox"/> One Man Veh <input type="checkbox"/> ALONE <input type="checkbox"/>		<input type="checkbox"/>	
	<input type="checkbox"/> Wanted	Explain:		<input type="checkbox"/> Yes <input type="checkbox"/> No		Drugs <input type="checkbox"/> No <input type="checkbox"/> Yes Type:		Detective <input type="checkbox"/> Other <input type="checkbox"/> ASSISTED <input type="checkbox"/>				
<input type="checkbox"/> Arrest	Subject No. _____		Using Alcohol <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Unk				<input type="checkbox"/> Arrested on Current Offense					
<input type="checkbox"/> Missing			Using Drugs <input type="checkbox"/> No <input type="checkbox"/> Yes Type:				<input type="checkbox"/> Unk <input type="checkbox"/> Cleared By Arrest on Prior Offense					
<input type="checkbox"/> Jail												
<input type="checkbox"/> Other												
Arrestee Armed <input type="checkbox"/> Yes <input type="checkbox"/> No		Weapon Type				<input type="checkbox"/> On View Arrest <input type="checkbox"/> Summoned <input type="checkbox"/> Custody						
Juvenile Disposition <input type="checkbox"/> Handled Released <input type="checkbox"/> Referred To Other Authority												
Arrest Location		Gang Affiliation: NG - Not Gang Related										

NARRATIVE	<div>[REDACTED]</div>
	<p>This email was sent to DSS CW, multiple attorneys, [REDACTED], Ms. Parcell, and myself on Friday, 04/12 around 1:54 PM. Additional emails followed by [REDACTED] and Ms. Parcell.</p> <p>I received an email from [REDACTED] on 04/15 at 6:28 PM with news reporters and other lawyers attached in the email, insisting that charges are filed. Due to the repeated emails and [REDACTED] verbalizing multiple times his contempt for GCSO and other investigators he has worked with, I provided my supervisors with the correspondence and they advised [REDACTED] of the status of the case.</p> <p>I contacted DSS and I was advised that they Unfounded their case with the family. I also spoke with Judge Horne refer this case and it was confirmed this is a family court issue, not criminal.</p> <p>This case is ex-cleared with no prosecution.</p>

Status	Property Type	Quantity	Property Make	Color	Description	Serial # / OAN	Value

ADMIN	Subject Identified		Subject Located		<input type="checkbox"/> Active <input type="checkbox"/> Admin Closed		<input type="checkbox"/> Arrested Under 18		<input type="checkbox"/> Ex-Cleared Under 18	
	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Unfounded		<input type="checkbox"/> Arrested 18 and Over		<input checked="" type="checkbox"/> Ex-Cleared 18 and Over	
	Reason For Exceptional Clearance		<input type="checkbox"/> Offender Death <input checked="" type="checkbox"/> No Prosecution		<input type="checkbox"/> Victim Declines Cooperation		<input type="checkbox"/> Extradition Denied		<input type="checkbox"/> Juvenile No Arrest	
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	MILLER, ALEXANDRA		04/17/2024	777 / 01651	ROBERTSON, MICHAEL		04/18/2024	709 / 00290		
			/	Follow Up Investigation <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Officer)					/	

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