

DC23-498

ALABAMA JUDICIAL INFORMATION SYSTEM

\* \* \* IN THE DISTRICT COURT OF COLBERT COUNTY \* \* \*

AGENCY NUMBER:

WARRANT NUMBER: WR 2023 000364.00  
OTHER CASE NBR:

C O M P L A I N T

BEFORE ME THE UNDERSIGNED JUDGE/CLERK/MAGISTRATE OF THE DISTRICT COURT OF COLBERT COUNTY, ALABAMA, PERSONALLY APPEARED HUNTER WHITE WHO BEING DULY SWORN DEPOSES AND SAYS THAT HE/SHE HAS PROBABLE CAUSE FOR BELIEVING, AND DOES BELIEVE THAT ADAM CHRISTOPHER NARMORE DEFENDANT, WHOSE NAME IS OTHERWISE UNKNOWN TO THE COMPLAINANT, DID WITHIN THE ABOVE NAMED COUNTY AND

ON OR ABOUT 8-19-2023, COMMIT THE CRIME OF ASSAULT 3RD DEGREE (SECTION 13A-006-022, CODE OF ALABAMA 1975):

XXXX) WITH INTENT TO CAUSE PHYSICAL INJURY TO ANOTHER PERSON, CAUSE PHYSICAL INJURY TO ANOTHER PERSON, TO-WIT: ASHLEY MCCLUNG, BY HITTING HER WITH HIS FISTS AND DRAGGING HER THRU GRAVEL BY HER HAIR; OR,

) RECKLESSLY CAUSE PHYSICAL INJURY TO ANOTHER PERSON, TO-WIT: (MANNER BY WHICH INJURY CAUSED); OR,

( ) WITH CRIMINAL NEGLIGENCE, CAUSE PHYSICAL INJURY TO ANOTHER PERSON, TO-WIT: BY MEANS OF A DEADLY WEAPON OR A DANGEROUS INSTRUMENT, TO-WIT: (TYPE WEAPON USED)

WITH THE VICTIM BEING THE DEFENDANT'S (SPECIFY RELATIONSHIP)

IN VIOLATION OF 13A-006-132 OF THE CODE OF ALABAMA, AGAINST THE PEACE AND DIGNITY OF THE STATE OF ALABAMA.

*[Handwritten Signature]*

COMPLAINANT'S SIGNATURE

SWORN TO AND SUBSCRIBED BEFORE ME THIS THE 21 DAY OF AUGUST, 2023.

*[Handwritten Signature]*  
JUDGE/CLERK/MAGISTRATE OF DISTRICT COURT

CHARGES: DOM VIO 3RD-ASSAULT 13A-006-132 M MISDEMEANOR

WITNESS FOR THE STATE

HUNTER WHITE/CCSD//00000

MICHAEL TERRELL/CCSD//00000

ASHLEY MCCLUNG/92 CHICKASAW DR/CHEROKEE/35616

OPERATOR: CAM DATE: 08/21/2023

# LIST OF OFFENDERS AND SUSPECTS

ORI  AL  L  0  2  0  0  0  0  0  0  8  19  2023 | Date of Report | Time of Report  AM  PM  MIL | Case Number | Suffix

Agency Name  
**Colbert County Sheriff's Office**

Off # <b>S1</b>	Name (Last, First, Middle) <b>NARMORE, ADAM CHRISTOPHER</b>	SFX	Alias	Social Security #	Race <input checked="" type="checkbox"/> W <input type="checkbox"/> B <input type="checkbox"/> A <input type="checkbox"/> I	Sex <input checked="" type="checkbox"/> M <input type="checkbox"/> F	Date of Birth <b>6   23   1983</b>	Age <b>40</b>
Address (Street, City, State, Zip) <b>1765 SPRING VALLEY RD TUSCUMBIA, AL 356747305</b>				HGT <b>6' 1"</b>	WGT <b>200lbs</b>	Ethnicity <input checked="" type="checkbox"/> Other <b>American</b>	Language <input type="checkbox"/> Spanish <input checked="" type="checkbox"/> English <input type="checkbox"/> Other	
Probable Destination			Eye <b>Brown</b>	Hair <b>Brown</b>	Complexion <b>Fair</b>	Armed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <b>Firearm</b>		
Clothing			<input type="checkbox"/> Scars <input type="checkbox"/> Marks <input type="checkbox"/> Tattoos <input type="checkbox"/> Amputations	<input checked="" type="checkbox"/> Arrested <input type="checkbox"/> Wanted				

Violations  
**13A-6-132**

Off #	Name (Last, First, Middle)	SFX	Alias	Social Security #	Race <input type="checkbox"/> W <input type="checkbox"/> B <input type="checkbox"/> A <input type="checkbox"/> I	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of Birth	Age
Address (Street, City, State, Zip)				HGT	WGT	Ethnicity <input type="checkbox"/> Other <input type="checkbox"/> Hispanic	Language <input type="checkbox"/> Spanish <input type="checkbox"/> English <input type="checkbox"/> Other	
Probable Destination			Eye	Hair	Complexion	Armed <input type="checkbox"/> Yes <input type="checkbox"/> No		
Clothing			<input type="checkbox"/> Scars <input type="checkbox"/> Marks <input type="checkbox"/> Tattoos <input type="checkbox"/> Amputations	<input type="checkbox"/> Arrested <input type="checkbox"/> Wanted				

Violations

Off #	Name (Last, First, Middle)	SFX	Alias	Social Security #	Race <input type="checkbox"/> W <input type="checkbox"/> B <input type="checkbox"/> A <input type="checkbox"/> I	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of Birth	Age
Address (Street, City, State, Zip)				HGT	WGT	Ethnicity <input type="checkbox"/> Other <input type="checkbox"/> Hispanic	Language <input type="checkbox"/> Spanish <input type="checkbox"/> English <input type="checkbox"/> Other	
Probable Destination			Eye	Hair	Complexion	Armed <input type="checkbox"/> Yes <input type="checkbox"/> No		
Clothing			<input type="checkbox"/> Scars <input type="checkbox"/> Marks <input type="checkbox"/> Tattoos <input type="checkbox"/> Amputations	<input type="checkbox"/> Arrested <input type="checkbox"/> Wanted				

Violations

Off #	Name (Last, First, Middle)	SFX	Alias	Social Security #	Race <input type="checkbox"/> W <input type="checkbox"/> B <input type="checkbox"/> A <input type="checkbox"/> I	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of Birth	Age
Address (Street, City, State, Zip)				HGT	WGT	Ethnicity <input type="checkbox"/> Other <input type="checkbox"/> Hispanic	Language <input type="checkbox"/> Spanish <input type="checkbox"/> English <input type="checkbox"/> Other	
Probable Destination			Eye	Hair	Complexion	Armed <input type="checkbox"/> Yes <input type="checkbox"/> No		
Clothing			<input type="checkbox"/> Scars <input type="checkbox"/> Marks <input type="checkbox"/> Tattoos <input type="checkbox"/> Amputations	<input type="checkbox"/> Arrested <input type="checkbox"/> Wanted				

Violations

Off #	Name (Last, First, Middle)	SFX	Alias	Social Security #	Race <input type="checkbox"/> W <input type="checkbox"/> B <input type="checkbox"/> A <input type="checkbox"/> I	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of Birth	Age
Address (Street, City, State, Zip)				HGT	WGT	Ethnicity <input type="checkbox"/> Other <input type="checkbox"/> Hispanic	Language <input type="checkbox"/> Spanish <input type="checkbox"/> English <input type="checkbox"/> Other	
Probable Destination			Eye	Hair	Complexion	Armed <input type="checkbox"/> Yes <input type="checkbox"/> No		
Clothing			<input type="checkbox"/> Scars <input type="checkbox"/> Marks <input type="checkbox"/> Tattoos <input type="checkbox"/> Amputations	<input type="checkbox"/> Arrested <input type="checkbox"/> Wanted				

Violations

Off #	Name (Last, First, Middle)	SFX	Alias	Social Security #	Race <input type="checkbox"/> W <input type="checkbox"/> B <input type="checkbox"/> A <input type="checkbox"/> I	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Date of Birth	Age
Address (Street, City, State, Zip)				HGT	WGT	Ethnicity <input type="checkbox"/> Other <input type="checkbox"/> Hispanic	Language <input type="checkbox"/> Spanish <input type="checkbox"/> English <input type="checkbox"/> Other	
Probable Destination			Eye	Hair	Complexion	Armed <input type="checkbox"/> Yes <input type="checkbox"/> No		
Clothing			<input type="checkbox"/> Scars <input type="checkbox"/> Marks <input type="checkbox"/> Tattoos <input type="checkbox"/> Amputations	<input type="checkbox"/> Arrested <input type="checkbox"/> Wanted				

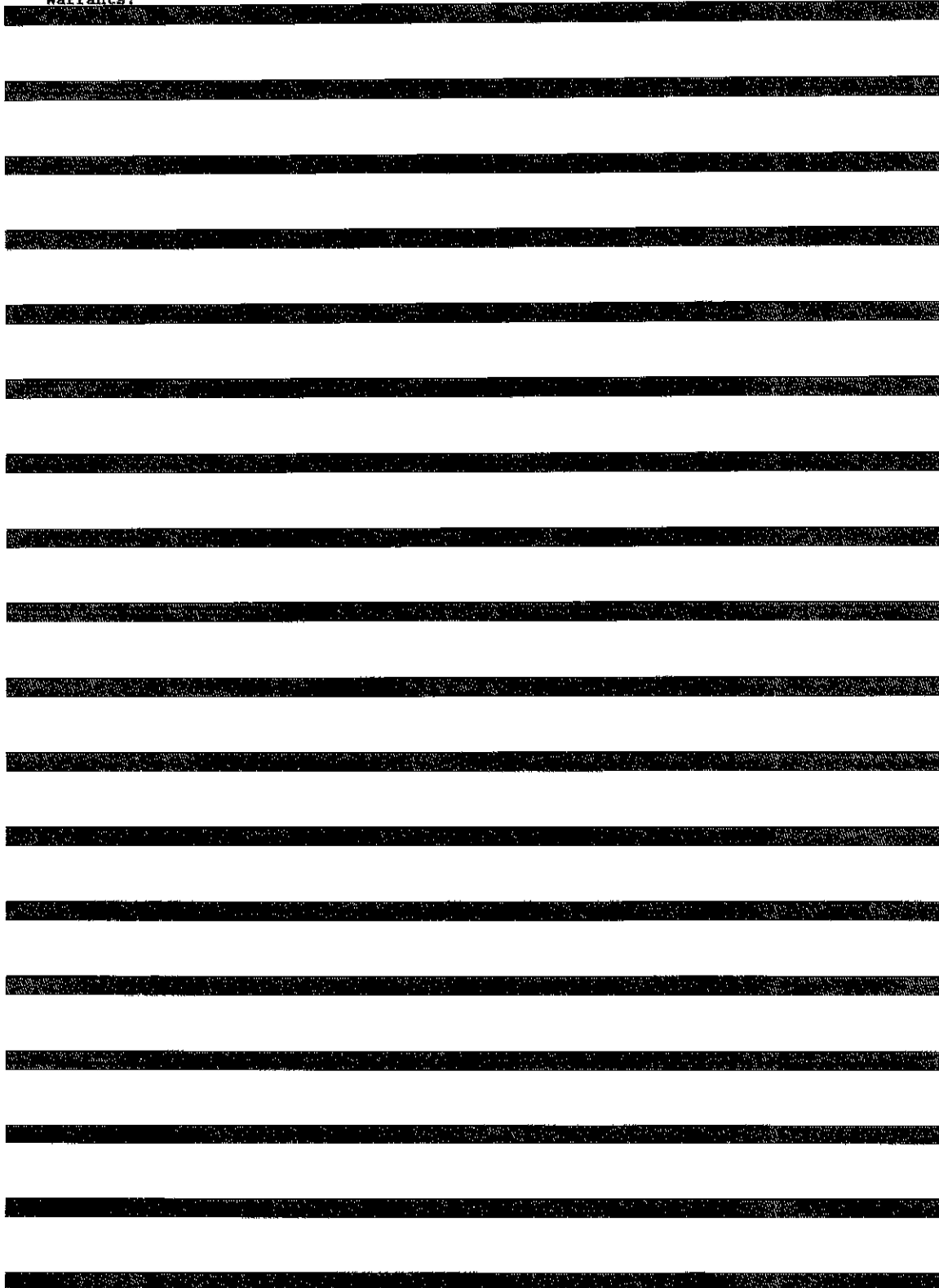
Violations

# LIST OF VIOLATIONS

ORI	Date of Report	Time of Report	<input type="checkbox"/> AM <input checked="" type="checkbox"/> PM <input type="checkbox"/> MIL	Case Number	Suffix
A 0 0 2 0 0 0 0 0 0	8 19 2023	10:46		2 0 2 3 - 0 0 0 1 0 2 5	

Agency Name  
**Colbert County Sheriff's Office**

13A-6-132 - Domestic Violence-3rd Degree  
 Domestic Violence 3rd Degree-Aggravated Assault(UCR Code:9999, NIBRS: 13A)  
**Warrants:**



DOMESTIC VIOLENCE  
DUAL ARREST

# ALABAMA UNIFORM ARREST REPORT

Fingerprinted  Yes  No  
R84 Completed  Yes  No

OFFICER'S WORK PRODUCT MAY NOT BE PUBLIC INFORMATION

<b>IDENTIFICATION</b>	1 ORI # <b>A L 0 2 0 0 0 0 0</b>		2 Agency Name <b>Colbert County Sheriff's Office</b>				3 Case # <b>2 0 2 3 - 0 0 0 1 0 2 5</b>			4 SFX			
	5 Last, First, Middle Name <b>NARMORE, ADAM CHRISTOPHER</b>						6 Alias AKA						
	7 Sex <input checked="" type="checkbox"/> M <input type="checkbox"/> F		8 Race <input checked="" type="checkbox"/> W <input type="checkbox"/> B <input type="checkbox"/> A <input type="checkbox"/> O		9 Ethnicity <input checked="" type="checkbox"/> Hispanic <input type="checkbox"/> Other		10 Hgt <b>6' 1"</b>	11 Wgt <b>200</b>	12 Eye <b>Brown</b>	13 Hair <b>Brown</b>	14 Skin <b>Fair</b>	15 Scars <input type="checkbox"/> Marks <input type="checkbox"/> Tattoos <input type="checkbox"/> Amputations <input type="checkbox"/>	
	16 Place of Birth (City, County State)				17 SSN		18 Date of Birth <b>8 6 23 1983</b>		19 Age <b>40</b>	20 Miscellaneous ID #			
	21 SID #		22 Fingerprint Class Key Major Primary SCDV Sub-Secondary Final Henry Class						23 DL# <b>7170524</b>		24 St <b>AL</b>		
	25 FBI #		26 Identification Comments						27 <input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident		28 Home Address (Street, City, State, Zip) <b>1765 SPRING VALLEY RD, TUSCUMBIA, AL, 351</b>		
	29 Residence Phone		30 Occupation (Be Specific)						31 Employer (Name of Company/School)		32 Business Address (Street, City, State, Zip)		
	33 Business Phone		34 Location of Arrest (Street, City, State, Zip) <b>3166 Mulberry Lane, Cherokee, AL, 35616</b>						35 Sector # <b>West</b>		36 Arrested for Your Jurisdiction? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	37 Condition of Arrestee: <input type="checkbox"/> Drunk <input type="checkbox"/> Sober <input checked="" type="checkbox"/> Drinking <input type="checkbox"/> Drugs		38 Resist Arrest? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		39 Injuries? <input type="checkbox"/> Officer <input checked="" type="checkbox"/> None <input type="checkbox"/> Arrestee		40 Armed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		41 Description of Weapon <input type="checkbox"/> Handgun <input checked="" type="checkbox"/> Other Firearm <input type="checkbox"/> Rifle <input type="checkbox"/> Other Weapon <input type="checkbox"/> Shotgun				
	42 Date of Arrest <b>8 19 2023</b>		43 Time of Arrest <b>10 : 46</b>		44 Day of Arrest <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> T <input type="checkbox"/> F <input type="checkbox"/> S <input type="checkbox"/> S		45 Type of Arrest? <input checked="" type="checkbox"/> On View <input type="checkbox"/> Warrant <input type="checkbox"/> Call		46 Arrested Before? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown		47 Charge - 1 <input type="checkbox"/> Felony <input checked="" type="checkbox"/> Misdemeanor <input type="checkbox"/> Attempted <input checked="" type="checkbox"/> Completed <b>Domestic Violence 3rd Degree-Aggravat</b>		

<b>ARREST</b>	48 Charge - 2		49 Charge - 3		50 Charge - 4		51 State Code/Local Ordinance <b>13A-6-132</b>		52 Warrant #		53 Date Issued		54 State Code/Local Ordinance		55 Warrant #		56 Date Issued									
	57 Charge - 3		58 Charge - 4		59 Charge - 5		60 Charge - 6		61 State Code/Local Ordinance		62 Warrant #		63 Date Issued		64 State Code/Local Ordinance		65 Warrant #		66 Date Issued							
	67 Arrest Disposition <input checked="" type="checkbox"/> Held <input type="checkbox"/> Tot - LE <input type="checkbox"/> Bail <input type="checkbox"/> Other <input type="checkbox"/> Released		68 If Out On Bail, What Type/Amount?		69 Arrested with (1) Accomplice (Full Name) <b>ASHLEY MCCLUNG</b>		70 Arrested with (2) Accomplice (Full Name)		71 VYR		72 VMA		73 VMO		74 VST		75 VCO Top Bottom		76 Tag #		77 LIS		78 LIY			
	79 VIN		80 Impounded? <input type="checkbox"/> Yes <input type="checkbox"/> No		81 Storage Location/Impound #		82 Other Evidence Seized/Property Seized <b>Photographs</b>		83 Juvenile Disposition: <input type="checkbox"/> Handled and Released <input type="checkbox"/> Ref. to Welfare Agency <input type="checkbox"/> Ref. to Adult Court <input type="checkbox"/> Ref. to Juvenile Court <input type="checkbox"/> Ref. to Other Police Agency		84 Released To		85 Parent or Guardian (Last, First, Middle Name)		86 Address (Street, City, State, Zip)		87 Phone		88 Parents Employer		89 Occupation		90 Address (Street, City, State, Zip)		91 Phone	
	92 Date and Time of Release		93 Releasing Officer Name		94 Agency/Division		95 ID #		96 Released To		97 Agency/Division		98 Agency Address		99 Personal Property Released to Arrestee <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Partial		100 Property Not Released/Held At:		101 Property #		102 Remarks (Note Any Injuries at Time of Release)		103 Signature of Receiving Officer		104 Signature of Releasing Officer	

<b>JUVENILE</b>	105 Case #		106 SFX		107 Case #		108 SFX		109 Case #		110 SFX		111 MULTI CASES CLOSED NARRATIVE <input type="checkbox"/> Yes <input type="checkbox"/> No	
	112 Arresting Officer (Last, First, M.) <b>White, Hunter, L.</b>		113 ID # <b>CO29</b>		114 Assisting Officer (Last, First, M.)		115 ID #		116 Supervisor <b>Weeks, Jessica</b> ID# <b>CO2</b>		117 Watch Cmdr. <b>Harkins, Jc</b> ID# <b>CO3</b>		118	

105 Case #		106 SFX		107 Case #		108 SFX		109 Case #		110 SFX		111 MULTI CASES CLOSED NARRATIVE <input type="checkbox"/> Yes <input type="checkbox"/> No	
112 Arresting Officer (Last, First, M.) <b>White, Hunter, L.</b>		113 ID # <b>CO29</b>		114 Assisting Officer (Last, First, M.)		115 ID #		116 Supervisor <b>Weeks, Jessica</b> ID# <b>CO2</b>		117 Watch Cmdr. <b>Harkins, Jc</b> ID# <b>CO3</b>		118	

**ADDITIONAL INCIDENT/OFFENSE  
NARRATIVE CONTINUED**

79 Date and Time of Report  
8 | 19 | 2023

10 : 46

AM  
 PM  
 ML

80 Case #

2 | 0 | 2 | 3 | - | 0 | 0 | 0 | 1 | 0 | 2 | 5

81 SFX

82 Type Report:  Continuation  Follow-up

NARRATIVE

Narmore as he proceeded in threatening her by stating that if she sent anyone to the residence that he was going to shoot her. At this time Sheriff Eric Balentine arrived on scene standing by on scene with Mcclung. Myself and Sergeant Terrell relocated to the location of the occurrence in an attempt to make contact with Narmore.

Observed standing outside of the residence was Narmore, I then began speaking with Narmore who was observed with waterish eyes and slurred speech. Narmore states that no altercation had occurred on this date. When Narmore was asked about the injuries that Mcclung had obtained Narmore stated "I don't know how that happened". With Narmore stating he was oblivious to what had occurred and with no follow up statement, with enough probole cause I placed Narmore into handcuffs to the rear checking them for proper tightness and double locking them. Narmore caused no incident at this time and complied as he was secured into the rear of my patrol vehicle. Sergeant Terrell relocated to Mcclung's location with Sherriff Balentine collection photographs of Mcclung's injuries obtained which are attached in this report. I then transported Narmore to the Colbert County Jail for Booking and processing without incident. Narmore was booked on Domestic Violence Assault third degree. No further incident has occurred at the time of this report.

NARRATIVE

NARRATIVE

Continued on Additional Supplement

BACK

THIS SIDE OF FORM IS CONFIDENTIAL UNLESS RELEASED AT THE DISCRETION OF THE CHIEF LAW ENFORCEMENT OFFICER

<b>Incident/Offense Report - Continued</b>		83 Date of Report (MM/DD/YY) <b>8 19 2023</b>			84 Time of Report <b>10 : 46</b>		85 Agency Case Number <b>2 0 2 3 - 0 0 0 1 0 2 5</b>		86 Suffix		87 <input checked="" type="checkbox"/> Offender <input type="checkbox"/> Check if Multiple <input type="checkbox"/> Suspect <input type="checkbox"/> Subject <input type="checkbox"/> Missing Person																		
88 Reported By (Last, First, Middle Name) <input type="checkbox"/> Victim Or <b>MCCLUNG, ASHLEY LYNN</b>										89 Suffix		90 <input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident		91 Home Phone		92 Work Phone													
94 Victim # <b>1</b> 95 Victim (Last, First, Middle Name) <b>MCCLUNG, ASHLEY LYNN</b>										96 Suffix		97 Address (Street, City, State, Zip) <b>92 CHICKASAW DR CHEROKEE, AL 356164430</b>				98 Home Phone		99 Work Phone		93 Other Phone		100 Other Phone							
101 Employer/School				102 Occupation				103 Address (Street, City, State, Zip)				104 Work Phone				105 Other Phone													
106 Sex <input checked="" type="checkbox"/> M <input type="checkbox"/> F		107 Race <input checked="" type="checkbox"/> W <input type="checkbox"/> B <input type="checkbox"/> A <input type="checkbox"/> I		108 Language <input checked="" type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Other		109 HGT <b>5' 5"</b>		110 WGT <b>140</b>		111 Date of Birth <b>4 30 1985</b>		112 Age <b>38</b>		113 Victim SSN <b>420276629</b>		114 Offender SSN <b>420276629</b>		115 Multiple Victims <input type="checkbox"/> LE Officer <input type="checkbox"/>		116 Ethnicity <input checked="" type="checkbox"/> Other <b>American</b> <input type="checkbox"/> Hispanic		117 Injury <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		118 Offender known to victim? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		119 Victim was? (Explain Relationship.) <b>Boyfriend/Girlfriend</b>		120 Offender's Race <b>White/Cauc</b>	
121 Weapons Used <input type="checkbox"/> Firearm <input type="checkbox"/> Hands, Fist, Feet, Voice, etc. <input type="checkbox"/> Knife <input type="checkbox"/> Other Dangerous				122 Description of Weapons/Firearms/Tools Used in Offense Describe: _____												<input type="checkbox"/> Handgun <input type="checkbox"/> Rifle <input type="checkbox"/> Shotgun <input type="checkbox"/> Unknown													
123 Place of Occurrence (Enter exact street address here.) <b>3166 Mulberry Lane Cherokee, AL 35616</b>										124 Type Injury <input type="checkbox"/> None <input type="checkbox"/> Broken Bones <input type="checkbox"/> Internal Injury <input type="checkbox"/> Severe Laceration		<input checked="" type="checkbox"/> Minor Injury <input type="checkbox"/> Other Major Injury		<input type="checkbox"/> Loss of Teeth <input type="checkbox"/> Unconscious		125 Sector													
126 Occurrence - Domestic Violence <input checked="" type="checkbox"/> Sexual Assault <input type="checkbox"/> Other <input type="checkbox"/>				128 Assault <input type="checkbox"/> Simple <input checked="" type="checkbox"/> Aggravated		129 Treatment for Assault? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		130 Verify for Rape Exam? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		131 Treatment for Rape? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																			
132 Off # <b>(A)0</b>		133 Name (Last, First, Middle) <b>NARMORE, ADAM CHRISTOPHER</b>				134 SFX		135 Alias		136 Social Security #		137 Race <input checked="" type="checkbox"/> W <input type="checkbox"/> B <input type="checkbox"/> A <input type="checkbox"/> I		138 Sex <input checked="" type="checkbox"/> M <input type="checkbox"/> F		139 Date of Birth <b>6 23 1983</b>		140 Age <b>40</b>											
141 Address (Street, City, State, Zip) <b>1765 SPRING VALLEY RD TUSCUMBIA, AL 356747305</b>										142 HGT <b>6' 1"</b>		143 WGT <b>200</b>		144 Ethnicity <input type="checkbox"/> Hispanic <input type="checkbox"/> Other		145 Language <input checked="" type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Other													
146 Probable Destination				147 Eye <b>Brown</b>		148 Hair <b>Brown</b>		149 Complexion <b>Fair</b>		150 Armed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <b>Firearm</b>																			
151 Clothing				152 <input type="checkbox"/> Scars <input type="checkbox"/> Marks <input type="checkbox"/> Tattoos <input type="checkbox"/> Amputations				153 <input checked="" type="checkbox"/> Arrested <input type="checkbox"/> Dual Arrest (Domestic Violence) <input type="checkbox"/> Wanted																					
154 Off #		155 Name (Last, First, Middle)				156 SFX		157 Alias		158 Social Security #		159 Race <input type="checkbox"/> W <input type="checkbox"/> B <input type="checkbox"/> A <input type="checkbox"/> I		160 Sex <input type="checkbox"/> M <input type="checkbox"/> F		161 Date of Birth		162 Age											
163 Address (Street, City, State, Zip)										164 HGT		165 WGT		166 Ethnicity <input type="checkbox"/> Hispanic <input type="checkbox"/> Other		167 Language <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Other													
168 Probable Destination				169 Eye		170 Hair		171 Complexion		172 Armed <input type="checkbox"/> Yes <input type="checkbox"/> No																			
173 Clothing				174 <input type="checkbox"/> Scars <input type="checkbox"/> Marks <input type="checkbox"/> Tattoos <input type="checkbox"/> Amputations				175 <input type="checkbox"/> Arrested <input type="checkbox"/> Dual Arrest (Domestic Violence) <input type="checkbox"/> Wanted																					
Name (Last, First, Middle)		Sex	Race	Date of Birth		Address				Contact Telephone Numbers																			
176		177 <input type="checkbox"/> M <input type="checkbox"/> F	178 <input type="checkbox"/> W <input type="checkbox"/> B <input type="checkbox"/> A <input type="checkbox"/> I	179		180				181 Home		182 Work		183 Other															
184		185 <input type="checkbox"/> M <input type="checkbox"/> F	186 <input type="checkbox"/> W <input type="checkbox"/> B <input type="checkbox"/> A <input type="checkbox"/> I	187		188				189 Home		190 Work		191 Other															
192		193 <input type="checkbox"/> M <input type="checkbox"/> F	194 <input type="checkbox"/> W <input type="checkbox"/> B <input type="checkbox"/> A <input type="checkbox"/> I	195		196				197 Home		198 Work		199 Other															
200 Witness # 1 SSN				201 Witness # 2 SSN				202 Witness # 3 SSN																					
<b>NARRATIVE</b>	203 On August 19, 2023 I Deputy Hunter White was dispatched to 3250 Mulberry Lane for a female subject wishing to make a report for Domestic Violence. Upon myself and Deputy Sergeant Michael Terrell's arrival Deputies made contact with Ashley Mcclung (victim) whom was observed with multiple injuries to her body. Mcclung declined medical attention when asked. Mcclung stated she was with her "boyfriend" Adam Narmore (arrestee) on this date. Mcclung states that Narmore had consumed lots of alcohol on this date. Mcclung says this there has been history of Domestic situations between parties.  Mcclung says that on this date herself and Narmore, were together and had gotten into an altercation because she wished to go and pick up her son. Mcclung states that parties had arrived to the campground at 3166 Mulberry Lane, when Narmore proceeded in striking her bluntly in the face, as he then began slapping her later garbing her by her hair and pulling her out of the car onto the ground forcefully. Mcclung later states she broke free of																												
	204 Continued on Supplement <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																												
205 Assisting Agency ORI				206 Assisting Agency Case Number				207 SFX		208 Warrant Signed <input type="checkbox"/> Yes <input type="checkbox"/> No		Warrant #		209 Add. Cases Closed Narrative <input checked="" type="checkbox"/> Y <input type="checkbox"/> N															
I hereby affirm that I have read this report and that all the information given by me is correct to the best of my knowledge. I will assume full responsibility for notifying the agency if any stolen property or missing person herein reported is returned.												210 Signature _____																	

FRONT

ALABAMA UNIFORM INCIDENT/OFFENSE REPORT

1 ORI # AL02000000 2 Date of Report 8 19 2023 3 Time of Report 10 : 46 4 Incident Type Report Incident Offense Supplement 5 Supplement Date 6 Agency Case Number 2023-0001025 7 Suffix

8 Agency Name Colbert County Sheriff's Office 9 Sector

10 Type of Incident or Offense Domestic Violence-3rd Degree 11 Degree 3rd 12 UCR Code 9999 13 State Code/Local Ordinance 13A-6-132

14 Type of Incident or Offense 15 Degree 16 UCR Code 17 State Code/Local Ordinance

18 Place of Occurrence 3166 Mulberry Lane Cherokee, AL 35616 19 Sex 20 Race 21 Ethnicity American 22 Multiple Victims 23 Age 38

24 First Offender Suspected of Using 25 Juvenile Gang 26 Hate Bias 27 Bias Code

29 Point of Entry 30 Method of Entry 31 Local Use 32 Lighting 33 Weather 34 Location Type

35 Occurred from MM/DD/YY 36 Time of Event 37 Day of Week 38 Occurred to MM/DD/YY 39 Time of Event 40 Day of Week 41 # Premises Entered

42 Type Criminal Activity 43 Victim Type

44 Loss Code 45 Property Code 46 Qty 47 Property Description 48 Dollar Value 49 Recovered

Table with 4 columns: Loss Code, Property Code, Qty, Property Description. Includes a list of property codes and descriptions.

50 Stolen Vehicle Only 51 Ownership verified by 52 Veh. Categories 53 Vehicle Year 54 Vehicle Make 55 Vehicle Model 56 Number Veh Stolen 57 Vehicle Description

58 Vehicle Style 59 Vehicle Color 60 License 61 LST 62 LIY 63 Tag Color

64 Vehicle VIN Number 65 Warrant Signed 66 Stolen in your jurisdiction? 67 Recovered in your jurisdiction?

68 Case # 69 SFX 70 Case # 71 SFX 72 Case # 73 SFX

74 Case Status 75 Multiple Cases Closed Listed Above 76 Entered NCIC/ACJIC 77 Case Disposition 78 Exceptional Clearance (Check One) 79 Reporting Officer 80 Assisting Officer 81 Supervisor Approval 82 Watch Commander

Domestic Violence Supplemental Report Form - Page 2

Case Number: 2023-0001025

Agency: AL0200000

Location: 3250 Mulberry Lane

Date/Time: 08/21/23

Were witnesses present during domestic violence?  Yes  No

Were witness statements taken?  Yes  No

Is witness information listed?  Yes  No

Were children present during domestic violence?  Yes  No

Names, ages, and DOB of ALL children present:

Restraining Orders?  Yes  No  Unknown Protective Orders?  Yes  No  Unknown

Type:  Emergency  Temporary  Permanent Type:  Emergency  Temporary  Permanent

Issuing Court: \_\_\_\_\_ Issuing Court: \_\_\_\_\_

Order or Docket #: \_\_\_\_\_ Order or Docket #: \_\_\_\_\_

Did victim receive printed information about local DV resources?  Yes  No

Witness: \_\_\_\_\_

- Apologetic
- Afraid
- Angry
- Calm
- Calmed Down
- Tearful/Crying
- Hysterical
- Irrational
- Nervous
- Upset
- Threatening
- Other (Explain)

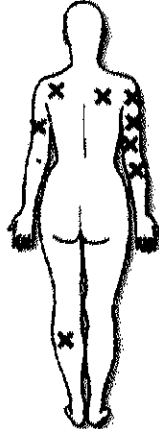
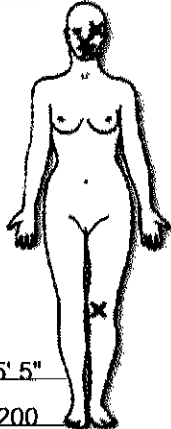
Witness: \_\_\_\_\_

- Apologetic
- Afraid
- Angry
- Calm
- Calmed Down
- Tearful/Crying
- Hysterical
- Irrational
- Nervous
- Upset
- Threatening
- Other (Explain)

Witness: \_\_\_\_\_

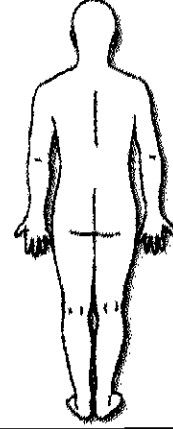
- Apologetic
- Afraid
- Angry
- Calm
- Calmed Down
- Tearful/Crying
- Hysterical
- Irrational
- Nervous
- Upset
- Threatening
- Other (Explain)

Victim  
 Suspect



Height: 5' 5"  
Weight: 200

Victim  
 Suspect



Height: 6' 1"  
Weight: 200

I hereby grant release of my medical records concerning this or other domestic violence cases to law enforcement agencies/personnel investigating this incident. I also understand that a photographic copy of this authorization shall be valid as the original.  
Y por medio de la presente doy permiso para que mi historia medica, concerniente a este caso y otros casos de violencia domestica, sean entregadas a las autoridades de policia y a cualquier otra entidad interesada en investigar este caso. Tambien entiendo que una copia fotografica de este autorizacion sea valido como el original.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I hereby refuse to allow law enforcement personnel to transport me to another location.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Was victim transported elsewhere?  Yes  No If yes, where? \_\_\_\_\_



Agency: AL0200000

Location: 3250 Mulberry Lane

Date/Time: 08/21/23

**Condition of Victim**

<input type="checkbox"/> Angry	<input type="checkbox"/> Pain Indicated
<input type="checkbox"/> Calm	<input checked="" type="checkbox"/> Abrasions
<input type="checkbox"/> Apologetic	<input type="checkbox"/> Bruises
<input checked="" type="checkbox"/> Crying	<input type="checkbox"/> Bites
<input type="checkbox"/> Confused	<input type="checkbox"/> Fractures
<input checked="" type="checkbox"/> Fearful	<input type="checkbox"/> Concussions
<input type="checkbox"/> Nervous	<input type="checkbox"/> Deep Cuts
<input type="checkbox"/> Hysterical	<input type="checkbox"/> Sexual Assault
<input type="checkbox"/> Threatening	<input type="checkbox"/> Gunshots
<input type="checkbox"/> Red Marks on Throat/Neck	<input checked="" type="checkbox"/> Minor Cuts
	<input type="checkbox"/> Other

**Person who called for Emergency**

Victim  Neighbor  Family Member  Other

**Describe All Conditions Observed**

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**Condition of Offender**

<input type="checkbox"/> Angry	<input type="checkbox"/> Pain Indicated
<input type="checkbox"/> Calm	<input type="checkbox"/> Abrasions
<input type="checkbox"/> Apologetic	<input type="checkbox"/> Bruises
<input type="checkbox"/> Crying	<input type="checkbox"/> Bites
<input checked="" type="checkbox"/> Confused	<input type="checkbox"/> Fractures
<input type="checkbox"/> Fearful	<input type="checkbox"/> Concussions
<input type="checkbox"/> Nervous	<input type="checkbox"/> Deep Cuts
<input type="checkbox"/> Hysterical	<input type="checkbox"/> Sexual Assault
<input type="checkbox"/> Threatening	<input type="checkbox"/> Gunshots
<input type="checkbox"/> Red Marks on Throat/Neck	<input type="checkbox"/> Minor Cuts
	<input type="checkbox"/> Other

**Prior History of Domestic Violence**

Prior history of domestic violence?  Yes  No  Unknown

Prior history of violence documented?  Yes  No  Unknown

Number of prior incidents: 0  Minor  Serious

Case Number(s): \_\_\_\_\_

Investigating Agency: \_\_\_\_\_

**Relationship**

Spouse  
 Former Spouse  
 Cohabitant  
 Former Cohabitant  
 Dating  
 Formerly Dating  
 Child in Common  
 Family Member

Length of Relationship  
0 Months 0 Years

Date Relationship Ended  
 (If Applicable): \_\_\_\_\_

**Evidence**

**Evidence Collected**

From:  Crime Scene  Hospital  Other (Explain) \_\_\_\_\_

Photos:  Yes  No Number: 13

Type:  Film  Digital

Taken by: Sgt. Michael Terrell

Photographs \_\_\_\_\_

**What occurred during incident?**

<input type="checkbox"/> Destroying Property	<input type="checkbox"/> Strangled
<input type="checkbox"/> Throwing Objects	<input type="checkbox"/> Kicking
<input type="checkbox"/> Hitting With Fists	<input type="checkbox"/> Grabbing
<input checked="" type="checkbox"/> Threat with Weapon	<input type="checkbox"/> Biting
<input type="checkbox"/> Sexual Assault	<input type="checkbox"/> Slapping
<input checked="" type="checkbox"/> Physical Violence	
<input type="checkbox"/> Threat of Sexual Assault	
<input checked="" type="checkbox"/> Threat of Physical Violence	
<input type="checkbox"/> Prevented from Leaving	
<input type="checkbox"/> Other (Please Describe Below)	

<b>Weapons Used</b>		<b>Medical Treatment</b>
By Suspect	By Victim	<input type="checkbox"/> None <input type="checkbox"/> Will Seek Own Doctor <input type="checkbox"/> First Aid <input type="checkbox"/> Paramedics <input type="checkbox"/> Hospital <input checked="" type="checkbox"/> Refused Medical Aid Hospital: _____ Attending Physician: _____
<input type="checkbox"/> None	<input type="checkbox"/> None	
<input type="checkbox"/> Knife	<input type="checkbox"/> Knife	
<input type="checkbox"/> Firearm	<input type="checkbox"/> Firearm	
<input type="checkbox"/> Hands/Feet	<input type="checkbox"/> Hands/Feet	
<input type="checkbox"/> Other Dangerous	<input type="checkbox"/> Other Dangerous	
Weapons impounded? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Firearm(s) impounded for safety? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Property Tag #: _____		

**Administrative Section**

Reporting Officer: White, Hunter, L. ID#: CO29 Division/Watch: \_\_\_\_\_

Approved by (Name and ID): Weeks, Jessica CO21 Date/Time: 08/21/23



**Alabama Law Enforcement Agency**  
**State Bureau of Investigation**  
**CASE TRANSMITTAL FORM**

This is to certify that \_\_\_\_\_  
Name

Received a copy of Alabama Law Enforcement Agency State Bureau of Investigation

File Number 2023-0001025

Concerning \_\_\_\_\_

Complete Casefile

Partial Casefile

Items included in Partial Casefile:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Receiving Person \_\_\_\_\_

Agency Receiving Report \_\_\_\_\_

Signature of Delivering Person \_\_\_\_\_

Day 21

Date 08/21/23 12:00:00 AM

Time 05:55:23.8251896

