

<b>CASE SCREENING FACTOR(S)</b>		REPORT OF: <u>Vanessa...</u>		INVEST DIV. <u>WV</u>	INC# <u>190114001487</u>	DR# <u>1108</u>
<input checked="" type="checkbox"/> SUSPECT/VEHICLE NOT SEEN	<input type="checkbox"/> PRINTS OR OTHER EVIDENCE NOT PRESENT	LAST NAME, FIRST, MIDDLE (OR NAME OF BUSINESS)		SEX	DESC	HT
<input type="checkbox"/> MO NOT DISTINCT	<input type="checkbox"/> PROPERTY LOSS LESS THAN \$5,000	<u>GOLEZ, ANDREW</u>		<u>M</u>	<u>W</u>	<u>5'11"</u>
<input type="checkbox"/> NO SERIOUS INJURY TO VICTIM	<input type="checkbox"/> ONLY ONE VICTIM INVOLVED	ADDRESS		WT	AGE	DOB
		<u>3217 WOODSIDE ST LOS ANGELES CA 90008</u>		<u>175</u>	<u>71</u>	<u>02-24-74</u>
		PHONE				
		<u>323-3301</u>				
		E-MAIL ADDRESS		CELL PHONE		
<b>PREMISES</b> (SPECIFIC TYPE) <input checked="" type="checkbox"/> ATM		DR. LIC. NO. (IF NONE, OTHER ID & NO.)		FOREIGN LANGUAGE SPOKEN		OCCUPATION
<u>SMALL FRONT PORCH</u>		<u>306-1046</u>				<u>RETIRED</u>
<b>ENTRY</b> 459/BFV POINT OF ENTRY		POINT OF EXIT		LOCATION OF OCCURRENCE		SAME AS V/S <input checked="" type="checkbox"/> RES. <input type="checkbox"/> BUS. <input type="checkbox"/> R.D. <input type="checkbox"/>
<input type="checkbox"/> FRONT	<input type="checkbox"/> REAR	METHOD		DATE & TIME OF OCCURRENCE		PRINTS BY PREL. INV. <input type="checkbox"/> Y <input type="checkbox"/> N
<input type="checkbox"/> SIDE	<input type="checkbox"/> ROOF			<u>12-11-14 0800-0815</u>		ATTEMPT OBTAINED <input type="checkbox"/> Y <input type="checkbox"/> N
<input type="checkbox"/> FLOOR	<input type="checkbox"/> OTHER	INSTRUMENT/TOOL USED		TYPE PROPERTY STOLEN/LOST/DAMAGED <input type="checkbox"/> 03.04.00 GIVEN		RECOVERED <input type="checkbox"/>
				<u>SMALL BRICK WALL</u>		EST. DAMAGED ARSON / VAND. <u>\$ 400.00</u>
		VICT'S VEH. (IF INVOLVED) YEAR, MAKE, TYPE, COLOR, LIC. NO.		NOTIFICATION(S) (PERSON & DIVISION)		CONNECTED REPORT(S) (TYPE & DR #)
<b>MO</b> IF LONG FORM, LIST UNIQUE ACTIONS. IF SHORT FORM, DESCRIBE SUSPECT'S ACTIONS IN BRIEF PHRASES, INCLUDING WEAPON USED. DO NOT REPEAT ABOVE INFO BUT CLARIFY REPORT AS NECESSARY. IF ANY OF THE MISSING ITEMS ARE POTENTIALLY IDENTIFIABLE, ITEMIZE AND DESCRIBE ALL ITEMS MISSING IN THIS INCIDENT IN THE NARRATIVE.						
<u>WALL SUSP(S) POSTED/TAPED SEVERAL SIGNS ON VICT'S FENCE, WHEN VICT REMOVED THE POSTING, IT CAUSED THE PAINT TO CHIP DAMAGING THE WALL</u>						
MANDATORY MARYS'S RIGHTS CARD PROVIDED TO THE VICTIM <input type="checkbox"/> MOTIVATED BY HATRED/PREJUDICE <input type="checkbox"/> DOMESTIC VIOLENCE <input type="checkbox"/>						
<b>REPORTING EMPLOYEE(S)</b>		INITIALS, LAST NAME	SERIAL NO.	DIV./DETAIL	PERSON REPORTING	SIGNATURE OR RECEIVED BY PHONE <input checked="" type="checkbox"/>
		<u>BAKER, C</u>	<u>39796</u>	<u>WV</u>		
				<u>85L95</u>		
NOTE: IF SHORT FORM AND VICTIM/PR ARE NOT THE SAME, ENTER PR INFORMATION IN INVOLVED PERSONS SECTION.						

**THIS REPORT DOES NOT CONSTITUTE VALID IDENTIFICATION**

**KEEP THIS REPORT FOR REFERENCE. INSTRUCCIONES EN ESPANOL AL REVERSO.**

Your case will be assigned to a detective for follow-up investigation based upon specific facts obtained during the initial investigation. Studies have shown that the presence of these facts can predict whether a detailed follow-up investigation would likely result in the arrest and prosecution of the suspect(s) or the recovery of property, in a manner that is cost-effective to you, the taxpayer. Significant decreases in personnel have made it impossible for detectives to personally discuss each and every case with all crime victims. A detective will not routinely contact you, unless the detective requires additional information.

**TO REPORT ADDITIONAL INFORMATION:** If you have specific facts to provide which might assist in the investigation of your case, please contact the detective Monday through Friday, between 8:00 A.M. and 9:30 A.M., or between 2:30 P.M. and 4:00 P.M. at telephone number \_\_\_\_\_. If the detective is not available when you call, please leave a message and include the telephone number where you can be reached.

**COPY OF REPORT:** If you wish to purchase a copy of the complete report, phone (213) 486-8130 to obtain the purchase price. Send a check or money order payable to the Los Angeles Police Department to Records and Identification Division, Box 30158, Los Angeles, CA 90030. Include a copy of this report or the following information with your request: 1) Name and address of victims; 2) Type of report and DR number (if listed above); 3) Date and location of occurrence. NOTE: Requests not accompanied by proper payment will not be processed.

**DR NUMBER:** If not entered on this form, the DR number may be obtained by writing to Records and Identification Division and giving the information needed to obtain a copy of the report (see above paragraph). Specify that you only want the DR number. It will be forwarded without delay. There is no charge for this service.

**CREDIT CARDS/CHECKS:** Immediately notify concerned credit corporation or banks to avoid possibility of being liable for someone else using your stolen or lost credit card or check.

- HOW YOU CAN HELP THE INVESTIGATION OF YOUR CASE:**
- \* Keep this memo for reference.
  - \* If stolen items have serial numbers not available at time of report, attempt to locate them and phone them to the detective at the listed number.
  - \* If you discover additional losses, complete and mail in the Supplemental Property Loss form given to you by the reporting employee.
  - \* Promptly report recovery of property.
  - \* Promptly report additional information such as a neighbor informing you of suspicious activity at time crime occurred.

**VICTIM-WITNESS ASSISTANCE PROGRAM:** The Los Angeles City and County Victim-Witness Assistance Program (VWAP) can help to determine if you qualify for Victim of Violent Crime compensation. If you qualify, they will assist with filling your claim application. If you are a victim or a witness to a crime and will be going to court, they will explain the court procedures to you. Their staff may also assist you with other problems created by the crime.

To find the program location nearest to you, call the Victim-Witness Assistance Program at the Los Angeles City Attorney's Office (213) 485-6976, or the Los Angeles County District Attorney's Office (800) 380-3811.

**VICTIMS OF VIOLENT CRIME COMPENSATION: Refer to paragraph at bottom of reverse side.**