

<input type="checkbox"/> NO SUSPECT INFO <input type="checkbox"/> NO PROSECUTION DESIRED <input type="checkbox"/> INSURANCE REPORT <input type="checkbox"/> COURTESY REPORT <input type="checkbox"/> DOMESTIC VIOLENCE <input type="checkbox"/> BIAS MOTIVATED <input type="checkbox"/> GANG RELATED <input type="checkbox"/> CONFIDENTIAL SEX CRIME	 <p>TUSTIN POLICE DEPARTMENT 300 CENTENNIAL WAY TUSTIN, CA 92780 CRIME/INCIDENT REPORT</p>	2 <input type="checkbox"/> ACTIVE <input type="checkbox"/> SUSPENDED <input type="checkbox"/> RECORDS <input type="checkbox"/> COURTESY 3 <input type="checkbox"/> FEL. <input checked="" type="checkbox"/> MISD.	4 CR# <p style="font-size: 1.2em; text-align: center;">20-2672</p> 5 REFER OTHER REPORTS
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6 CODE SECTION CPL 273.6(a)	7 CRIME/INCIDENT TYPE VIOLATION OF DOMESTIC COURT ORDER	8 PRIMARY-COUNTS	9 SECONDARY-COUNTS	10 OTHER-COUNTS	11 OTHER-COUNTS
12 SPECIFIC LOCATION OF CRIME 17082 KENYON DRIVE #E		13 OCCURRED ON OR BETWEEN	14 DATE 5/17/20	15 DAY SUNDAY	16 TIME 0140
17 FIRM NAME (at location)		18 DATE RPT'D 5/17/20	19 TIME RPT'D 0140	20 AND	21 DATE 5/17/20

24 NAME (LAST, FIRST, MIDDLE)	25 OCCUPATION	26 D.O.B.	27 RESIDENCE ADDRESS	30 CITY	STATE	ZIP CODE	31 RES. PHONE	32 HT.
29 BUSINESS NAME & ADDRESS		34 CITY	STATE	ZIP CODE	35 BUS. PHONE		36 WT.	
37 E-MAIL		38 CELL PHONE						

39 CODE	40 NAME (LAST, FIRST, MIDDLE)	41 OCCUPATION	42 D.O.B.	43 SEX <input type="checkbox"/> 1 M <input type="checkbox"/> 1 F	44 RACE <input type="checkbox"/> 1 WHT <input type="checkbox"/> 4 IND <input type="checkbox"/> 8 P.ISL. <input type="checkbox"/> 5 CHI <input type="checkbox"/> 9 VIET	45 HISP <input type="checkbox"/> 2 HISP <input type="checkbox"/> 6 JAPN <input type="checkbox"/> 10 OTH	46 BLK <input type="checkbox"/> 3 BLK <input type="checkbox"/> 7 FIL
46 RESIDENCE ADDRESS		46 CITY	STATE	ZIP CODE	47 RES. PHONE		48 HT.
49 BUSINESS NAME & ADDRESS		50 CITY	STATE	ZIP CODE	51 BUS. PHONE		52 WT.
53 E-MAIL		54 CELL PHONE					

87 LICENSE #	88 STATE	89 YEAR	90 MAKE	91 MODEL	92 0 <input type="checkbox"/> UNK 1 <input type="checkbox"/> 2-DR 2 <input type="checkbox"/> 4-DR 3 <input type="checkbox"/> CONV 4 <input type="checkbox"/> P/U 5 <input type="checkbox"/> TRUCK 6 <input type="checkbox"/> VAN 7 <input type="checkbox"/> S/W 8 <input type="checkbox"/> RV 9 <input type="checkbox"/> M/C 10 <input type="checkbox"/> OTHER BODY
93 COLOR/COLOR			94 OTHER CHARACTERISTICS		95 DISPOSITION OF VEHICLE

MAVS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	BOOK MARKED AS EVIDENCE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	RETENTION PERIOD <input type="checkbox"/> 5 YEARS <input type="checkbox"/> PERMANENT
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Q01 96 <input type="checkbox"/> 1 THERE IS A WITNESS TO THE CRIME <input checked="" type="checkbox"/> 2 A SUSPECT WAS ARRESTED <input checked="" type="checkbox"/> 3 A SUSPECT WAS NAMED <input checked="" type="checkbox"/> 4 A SUSPECT CAN BE LOCATED <input type="checkbox"/> 5 A SUSPECT CAN BE DESCRIBED <input type="checkbox"/> 6 A SUSPECT CAN BE IDENTIFIED <input type="checkbox"/> 7 A SUSPECT VEHICLE CAN BE IDENTIFIED <input type="checkbox"/> 8 THERE IS IDENTIFIABLE STOLEN PROPERTY <input type="checkbox"/> 9 THERE IS A SIGNIFICANT M.O. <input type="checkbox"/> 10 SIGNIFICANT PHYSICAL EVIDENCE IS PRESENT <input type="checkbox"/> 11 THERE IS A MAJOR INJURY/SEX CRIME INVOLVED <input type="checkbox"/> 12 THERE IS A GOOD POSSIBILITY OF A SOLUTION <input type="checkbox"/> 13 FURTHER INVESTIGATION NEEDED <input type="checkbox"/> 14 CRIME IS GANG RELATED <input type="checkbox"/> 15 HATE CRIME RELATED <input type="checkbox"/> 16 REPRODUCTIVE HEALTH CRIME	Q02 97 <input type="checkbox"/> 1 FINGERPRINTS <input type="checkbox"/> 2 TOOLS <input type="checkbox"/> 3 TOOL MARKINGS <input type="checkbox"/> 4 GLASS <input type="checkbox"/> 5 PAINT <input type="checkbox"/> 6 BULLET CASING <input type="checkbox"/> 7 BULLET <input type="checkbox"/> 8 RAPE KIT <input type="checkbox"/> 9 SEMEN <input type="checkbox"/> 10 BLOOD <input type="checkbox"/> 11 URINE <input type="checkbox"/> 12 HAIR <input type="checkbox"/> 13 FIREARMS <input type="checkbox"/> 14 PHOTOGRAPHS <input type="checkbox"/> 15 OTHER (DESCRIBE)	DOMESTIC VIOLENCE 99 1. ORDER SERVED AT SCENE BY: P# _____ 2. ENTRY MADE BY: P# _____ 3. NAME OF PERSON SERVED: _____ 4. RESPONDENT SIGNATURE: <u>N/A</u>
98 TOTAL LOSS / DOLLAR AMOUNT		CSI 100 CSI PERFORMED BY: NAME & P# _____ NOTES: <u>N/A</u>

101 SUPERVISOR AT SCENE (RANK, NAME & ID NO.) Sgt. Nelson # 1249	102 MARSY'S LAW NOTIFICATION	103 UNIT NUMBER 820
104 REPORTING OFFICER / ID NO. B. SCHULTZ # 1310	105 DATE 5/17/20	106 APPROVED BY / ID NO. R. Nelson # 1249
		107 DATE 5-17-2020

PREMISES 7	POINT OF ENTRY 8	PROPERTY/ATTACKED 11	TRADEMARKS
BUSINESS Q03 <input type="checkbox"/> 1 BANK/SAV LOAN FINANCE/CREDIT UN <input type="checkbox"/> 2 BAR <input type="checkbox"/> 3 CLEANERS/LAUNDRY <input type="checkbox"/> 4 CONSTRUCTION SITE <input type="checkbox"/> 5 THEATER <input type="checkbox"/> 6 FAST FOODS <input type="checkbox"/> 7 GAS STATION <i>N/A</i> <input type="checkbox"/> 8 HOTEL/MOTEL <i>N/A</i> <input type="checkbox"/> 9 DEPT./DISCOUNT STORE <input type="checkbox"/> 10 GUN/SPORT GOODS <input type="checkbox"/> 11 JEWELRY STORE <input type="checkbox"/> 12 LIQUOR STORE <input type="checkbox"/> 13 PHOTO STAND <input type="checkbox"/> 14 CONVENIENCE STORE <input type="checkbox"/> 15 RESTAURANT <input type="checkbox"/> 16 SUPERMARKET <input type="checkbox"/> 17 TV/RADIO <input type="checkbox"/> 18 AUTO PARTS <input type="checkbox"/> 19 BICYCLE SALES <input type="checkbox"/> 20 CAR/MOTORCYCLE SALES <input type="checkbox"/> 21 CLOTHING STORE <input type="checkbox"/> 22 HARDWARE <input type="checkbox"/> 23 MEDICAL <input type="checkbox"/> 24 OFFICE BUILDING <input type="checkbox"/> 25 SHOE STORE <input type="checkbox"/> 26 WAREHOUSE <input type="checkbox"/> 27 OTHER _____	Q04 <input type="checkbox"/> 1 FRONT <input type="checkbox"/> 2 REAR <input type="checkbox"/> 3 SIDE <input type="checkbox"/> 4 DOOR <input type="checkbox"/> 5 WINDOW <input type="checkbox"/> 6 SLIDING GLASS DOOR <input type="checkbox"/> 7 BASEMENT <input type="checkbox"/> 8 ROOF <i>N/A</i> <input type="checkbox"/> 9 FLOOR <input type="checkbox"/> 10 WALL <input type="checkbox"/> 11 DUCT/VENT <input type="checkbox"/> 12 GARAGE <input type="checkbox"/> 13 ADJ. BUILDING <input type="checkbox"/> 14 GROUND LEVEL <input type="checkbox"/> 15 UPPER LEVEL <input type="checkbox"/> 16 UNKNOWN <input type="checkbox"/> 17 OTHER _____ METHOD OF ENTRY 9 Q05 <input type="checkbox"/> 1 NO FORCE USED <input type="checkbox"/> 2 WINDOW SMASHED <input type="checkbox"/> 3 ATTEMPT ONLY <input type="checkbox"/> 4 BODILY FORCE <input type="checkbox"/> 5 BOLT CUT / PLIERS <input type="checkbox"/> 6 CHANNEL LOCK/PIPE WRENCH/VICE GRIPS <input type="checkbox"/> 7 SAW/DRILL/BURN <input type="checkbox"/> 8 SCREWDRIVER <i>N/A</i> <input type="checkbox"/> 9 TIRE IRON <input type="checkbox"/> 10 UNK PRY BAR <input type="checkbox"/> 11 COAT HANGER WIRE <input type="checkbox"/> 12 KEY SLIP SHIM <input type="checkbox"/> 13 PUNCH <input type="checkbox"/> 14 REMOVE LOUVERS <input type="checkbox"/> 15 BRICK/ROCK <input type="checkbox"/> 16 HID IN BUILDING <input type="checkbox"/> 17 WALKED IN <input type="checkbox"/> 18 UNKNOWN <input type="checkbox"/> 19 OTHER _____ VEHICLE ENTRY 10 Q06 <input type="checkbox"/> 1 DOOR/LOCK FORCED <input type="checkbox"/> 2 TRUNK FORCED <input type="checkbox"/> 3 WINDOW BROKEN <input type="checkbox"/> 4 WINDOW FORCED <input type="checkbox"/> 5 WINDOW OPEN <input type="checkbox"/> 6 UNLOCKED <i>N/A</i> <input type="checkbox"/> 7 UNKNOWN <input type="checkbox"/> 8 OTHER _____	Q07 <input type="checkbox"/> 1 CASH NOTES <input type="checkbox"/> 2 CLOTHES/FUR <input type="checkbox"/> 3 CONSUMABLE GOODS <input type="checkbox"/> 4 FIREARMS <input type="checkbox"/> 5 HOUSEHOLD GOODS <input type="checkbox"/> 6 JEWELRY METALS <input type="checkbox"/> 7 LIVESTOCK <input type="checkbox"/> 8 OFFICE EQUIPMENT <input type="checkbox"/> 9 TV/RADIO/CAMERA <input type="checkbox"/> 10 MISCELLANEOUS <input type="checkbox"/> 11 UNKNOWN <input type="checkbox"/> 12 OTHER <i>N/A</i> SEX CRIMES ONLY 12 Q08 <input type="checkbox"/> 1 SUSPECT CLIMAXED <input type="checkbox"/> 2 UNKNOWN IF CLIMAXED <input type="checkbox"/> 3 VICTIM BOUND/TIED <input type="checkbox"/> 4 VICTIM INJURED <input type="checkbox"/> 5 COVERED VICTIM FACE <input type="checkbox"/> 6 PHOTOGRAPHED VICTIM <input type="checkbox"/> 7 VIC ORALLY COPULATED SUSP <input type="checkbox"/> 8 SUSP ORALLY COPULATED VIC <input type="checkbox"/> 9 RAPE BY INSTRUMENT (FOREIGN OBJECTS) <i>N/A</i> <input type="checkbox"/> 10 SODOMY <input type="checkbox"/> 11 SUGGESTED VIC COMMIT LEWD PERVERTED ACT <input type="checkbox"/> 12 INSERTED FINGER INTO VAGINA <input type="checkbox"/> 13 FORCED VIC TO FONDLE SUSP <input type="checkbox"/> 14 SUSP FONDLED VICTIM <input type="checkbox"/> 15 MASTURBATED SELF <input type="checkbox"/> 16 OTHER _____ BURGLARY ONLY 13 Q09 IS MEMBER OF NEIGH WATCH? 01 <input type="checkbox"/> YES 02 <input type="checkbox"/> NO IS MEMBER OF OPERATION IDENT? 03 <input type="checkbox"/> YES 04 <input type="checkbox"/> NO INTERESTED IN NEIGH WATCH? 05 <input type="checkbox"/> YES 06 <input type="checkbox"/> NO HAD HOME BUSINESS INSPECTION? 07 <input type="checkbox"/> YES 08 <input type="checkbox"/> NO WHEN? <i>N/A</i>	SUSPECT(S) ACTIONS 14 Q10 <input type="checkbox"/> 1 DEMANDED MONEY <input type="checkbox"/> 2 INFLICTED INJURIES <input type="checkbox"/> 3 SELECTIVE IN LOOT <input type="checkbox"/> 4 STRUCK VICTIM <input type="checkbox"/> 5 ALARM DISABLED <input type="checkbox"/> 6 ARSON <input type="checkbox"/> 7 ATE/DRANK ON PREMISES <input type="checkbox"/> 8 BLINDFOLDED VICTIM BOUND/GAGGED <input type="checkbox"/> 9 CAT BURGLAR <input type="checkbox"/> 10 DEFECATED/URINATED <input type="checkbox"/> 11 DISROBED VICTIM FULLY <input type="checkbox"/> 12 DISROBED VICTIM PARTIALLY <input type="checkbox"/> 13 FIRED WEAPON <input type="checkbox"/> 14 FORCED VIC TO MOVE <input type="checkbox"/> 15 FORCED VIC INTO VEHICLE <input type="checkbox"/> 16 HAD BEEN DRINKING <input type="checkbox"/> 17 INDICATION MULTI SUSPECTS <input type="checkbox"/> 18 KNEW LOC. OF HIDDEN ITEMS <input type="checkbox"/> 19 MADE THREATS <input type="checkbox"/> 20 PLACED PROPERTY IN SACK/POCKET <input type="checkbox"/> 21 PREPARED EXIT <input type="checkbox"/> 22 RANSACKED <input type="checkbox"/> 23 RIPPED/CUT CLOTHING <input type="checkbox"/> 24 SHUT OFF POWER <input type="checkbox"/> 25 SMOKED ON PREMISES <input type="checkbox"/> 26 SEARCHED VICTIM <input type="checkbox"/> 27 SUSPECT ARMED <input type="checkbox"/> 28 THREATENED RETALIATION <input type="checkbox"/> 29 TOOK ONLY CONSUMABLES <input type="checkbox"/> 30 TOOK VICTIM/S VEHICLE <input type="checkbox"/> 31 TORTURED <input type="checkbox"/> 32 UNDER INFLUENCE DRUGS <input type="checkbox"/> 33 USED DEMAND NOTE <input type="checkbox"/> 34 USED LOOKOUT <input type="checkbox"/> 35 USED DRIVER <input type="checkbox"/> 36 USED MATCH/CANDLE <input type="checkbox"/> 37 USED VICTIM'S NAME <input type="checkbox"/> 38 USED VICTIM'S SUITCASE/PILLOWCASE <input type="checkbox"/> 39 USED VICTIM'S TOOLS <input type="checkbox"/> 40 VEH NEEDED TO REMOVE PROPERTY <input type="checkbox"/> 41 CUT/DISCONNECTED PHONE <input type="checkbox"/> 42 CASED LOCATION BEFORE CRIME <input type="checkbox"/> 43 FOLLOWED/STALKED VICTIM <input checked="" type="checkbox"/> 44 OTHER VIOLATION OF RESTRAINING ORDER SUSP. PRET. TO BE 15 Q11 <input type="checkbox"/> 1 CONDUCTING SURVEY <input type="checkbox"/> 2 CUST./CLIENT <input type="checkbox"/> 3 DELIVERY PERSON <input type="checkbox"/> 4 DISABLED MOTORIST <input type="checkbox"/> 5 DRUNK <input type="checkbox"/> 6 EMPLOYEE/EMPLOYER <input type="checkbox"/> 7 FRIEND/RELATIVE <input type="checkbox"/> 8 ILL/INJURED <input type="checkbox"/> 9 NEED PHONE <input type="checkbox"/> 10 POLICE/LAW <input type="checkbox"/> 11 RENTER <input type="checkbox"/> 12 REPAIRMAN <input type="checkbox"/> 13 SALE OF ILLICIT GOODS <input type="checkbox"/> 14 SALES PERSON <input type="checkbox"/> 15 SEEK ASSISTANCE <input type="checkbox"/> 16 SEEK DIRECTIONS <input type="checkbox"/> 17 SEEKING SOMEONE <input type="checkbox"/> 18 SOLICIT FUNDS <input type="checkbox"/> 19 OTHER _____ PHYSICAL SECURITY 16 Q12 <input type="checkbox"/> 1 AUDIBLE ALARM <input type="checkbox"/> 2 SILENT ALARM <input type="checkbox"/> 3 PRIVATE SECURITY PATROL <input type="checkbox"/> 4 DOG <input type="checkbox"/> 5 STANDARD LOCKS (DEADBOLT, WINDOWS, ETC) <input type="checkbox"/> 6 AUXILIARY LOCKS <input type="checkbox"/> 7 WINDOW BARS/GRILLS <input type="checkbox"/> 8 OUTSIDE LIGHTING ON <input type="checkbox"/> 9 INSIDE LIGHTING ON <input type="checkbox"/> 10 GARAGE DOOR LOCKED <input type="checkbox"/> 11 OBSCURED INTERIOR VIEW (COMMERCIAL/BUSINESS) <input type="checkbox"/> 12 SECURITY SIGNING (N.W. ALARM ETC.) <input type="checkbox"/> 13 UNKNOWN <input type="checkbox"/> 14 OTHER _____ <i>N/A</i>
RESIDENCE <input checked="" type="checkbox"/> 28 APARTMENT Q03 <input type="checkbox"/> 29 CONDOMINIUM <input type="checkbox"/> 30 DUPLEX/FOURPLEX <input type="checkbox"/> 31 GARAGE ATTACHED <input type="checkbox"/> 32 GARAGE DETACHED <input type="checkbox"/> 33 HOUSE <input type="checkbox"/> 34 MOBILE HOME <input type="checkbox"/> 35 OTHER _____	<input type="checkbox"/> 1 FRONT <input type="checkbox"/> 2 REAR <input type="checkbox"/> 3 SIDE <input type="checkbox"/> 4 DOOR <input type="checkbox"/> 5 WINDOW <input type="checkbox"/> 6 SLIDING GLASS DOOR <input type="checkbox"/> 7 BASEMENT <input type="checkbox"/> 8 ROOF <i>N/A</i> <input type="checkbox"/> 9 FLOOR <input type="checkbox"/> 10 WALL <input type="checkbox"/> 11 DUCT/VENT <input type="checkbox"/> 12 GARAGE <input type="checkbox"/> 13 ADJ. BUILDING <input type="checkbox"/> 14 GROUND LEVEL <input type="checkbox"/> 15 UPPER LEVEL <input type="checkbox"/> 16 UNKNOWN <input type="checkbox"/> 17 OTHER _____	<input type="checkbox"/> 1 CASH NOTES <input type="checkbox"/> 2 CLOTHES/FUR <input type="checkbox"/> 3 CONSUMABLE GOODS <input type="checkbox"/> 4 FIREARMS <input type="checkbox"/> 5 HOUSEHOLD GOODS <input type="checkbox"/> 6 JEWELRY METALS <input type="checkbox"/> 7 LIVESTOCK <input type="checkbox"/> 8 OFFICE EQUIPMENT <input type="checkbox"/> 9 TV/RADIO/CAMERA <input type="checkbox"/> 10 MISCELLANEOUS <input type="checkbox"/> 11 UNKNOWN <input type="checkbox"/> 12 OTHER <i>N/A</i>	<input type="checkbox"/> 1 DEMANDED MONEY <input type="checkbox"/> 2 INFLICTED INJURIES <input type="checkbox"/> 3 SELECTIVE IN LOOT <input type="checkbox"/> 4 STRUCK VICTIM <input type="checkbox"/> 5 ALARM DISABLED <input type="checkbox"/> 6 ARSON <input type="checkbox"/> 7 ATE/DRANK ON PREMISES <input type="checkbox"/> 8 BLINDFOLDED VICTIM BOUND/GAGGED <input type="checkbox"/> 9 CAT BURGLAR <input type="checkbox"/> 10 DEFECATED/URINATED <input type="checkbox"/> 11 DISROBED VICTIM FULLY <input type="checkbox"/> 12 DISROBED VICTIM PARTIALLY <input type="checkbox"/> 13 FIRED WEAPON <input type="checkbox"/> 14 FORCED VIC TO MOVE <input type="checkbox"/> 15 FORCED VIC INTO VEHICLE <input type="checkbox"/> 16 HAD BEEN DRINKING <input type="checkbox"/> 17 INDICATION MULTI SUSPECTS <input type="checkbox"/> 18 KNEW LOC. OF HIDDEN ITEMS <input type="checkbox"/> 19 MADE THREATS <input type="checkbox"/> 20 PLACED PROPERTY IN SACK/POCKET <input type="checkbox"/> 21 PREPARED EXIT <input type="checkbox"/> 22 RANSACKED <input type="checkbox"/> 23 RIPPED/CUT CLOTHING <input type="checkbox"/> 24 SHUT OFF POWER <input type="checkbox"/> 25 SMOKED ON PREMISES <input type="checkbox"/> 26 SEARCHED VICTIM <input type="checkbox"/> 27 SUSPECT ARMED <input type="checkbox"/> 28 THREATENED RETALIATION <input type="checkbox"/> 29 TOOK ONLY CONSUMABLES <input type="checkbox"/> 30 TOOK VICTIM/S VEHICLE <input type="checkbox"/> 31 TORTURED <input type="checkbox"/> 32 UNDER INFLUENCE DRUGS <input type="checkbox"/> 33 USED DEMAND NOTE <input type="checkbox"/> 34 USED LOOKOUT <input type="checkbox"/> 35 USED DRIVER <input type="checkbox"/> 36 USED MATCH/CANDLE <input type="checkbox"/> 37 USED VICTIM'S NAME <input type="checkbox"/> 38 USED VICTIM'S SUITCASE/PILLOWCASE <input type="checkbox"/> 39 USED VICTIM'S TOOLS <input type="checkbox"/> 40 VEH NEEDED TO REMOVE PROPERTY <input type="checkbox"/> 41 CUT/DISCONNECTED PHONE <input type="checkbox"/> 42 CASED LOCATION BEFORE CRIME <input type="checkbox"/> 43 FOLLOWED/STALKED VICTIM <input checked="" type="checkbox"/> 44 OTHER VIOLATION OF RESTRAINING ORDER
PUBLIC Q03 <input type="checkbox"/> 36 CHURCH <input type="checkbox"/> 37 HOSPITAL <input type="checkbox"/> 38 PARK/PLAYGROUND <input type="checkbox"/> 39 PARKING LOT <i>N/A</i> <input type="checkbox"/> 40 PUBLIC BUILDING <input type="checkbox"/> 41 SCHOOL <input type="checkbox"/> 42 SHOPPING MALL <input type="checkbox"/> 43 STREET/HWY/ALLEY <input type="checkbox"/> 44 OTHER _____	<input type="checkbox"/> 1 FRONT <input type="checkbox"/> 2 REAR <input type="checkbox"/> 3 SIDE <input type="checkbox"/> 4 DOOR <input type="checkbox"/> 5 WINDOW <input type="checkbox"/> 6 SLIDING GLASS DOOR <input type="checkbox"/> 7 BASEMENT <input type="checkbox"/> 8 ROOF <i>N/A</i> <input type="checkbox"/> 9 FLOOR <input type="checkbox"/> 10 WALL <input type="checkbox"/> 11 DUCT/VENT <input type="checkbox"/> 12 GARAGE <input type="checkbox"/> 13 ADJ. BUILDING <input type="checkbox"/> 14 GROUND LEVEL <input type="checkbox"/> 15 UPPER LEVEL <input type="checkbox"/> 16 UNKNOWN <input type="checkbox"/> 17 OTHER _____	<input type="checkbox"/> 1 CASH NOTES <input type="checkbox"/> 2 CLOTHES/FUR <input type="checkbox"/> 3 CONSUMABLE GOODS <input type="checkbox"/> 4 FIREARMS <input type="checkbox"/> 5 HOUSEHOLD GOODS <input type="checkbox"/> 6 JEWELRY METALS <input type="checkbox"/> 7 LIVESTOCK <input type="checkbox"/> 8 OFFICE EQUIPMENT <input type="checkbox"/> 9 TV/RADIO/CAMERA <input type="checkbox"/> 10 MISCELLANEOUS <input type="checkbox"/> 11 UNKNOWN <input type="checkbox"/> 12 OTHER <i>N/A</i>	<input type="checkbox"/> 1 DEMANDED MONEY <input type="checkbox"/> 2 INFLICTED INJURIES <input type="checkbox"/> 3 SELECTIVE IN LOOT <input type="checkbox"/> 4 STRUCK VICTIM <input type="checkbox"/> 5 ALARM DISABLED <input type="checkbox"/> 6 ARSON <input type="checkbox"/> 7 ATE/DRANK ON PREMISES <input type="checkbox"/> 8 BLINDFOLDED VICTIM BOUND/GAGGED <input type="checkbox"/> 9 CAT BURGLAR <input type="checkbox"/> 10 DEFECATED/URINATED <input type="checkbox"/> 11 DISROBED VICTIM FULLY <input type="checkbox"/> 12 DISROBED VICTIM PARTIALLY <input type="checkbox"/> 13 FIRED WEAPON <input type="checkbox"/> 14 FORCED VIC TO MOVE <input type="checkbox"/> 15 FORCED VIC INTO VEHICLE <input type="checkbox"/> 16 HAD BEEN DRINKING <input type="checkbox"/> 17 INDICATION MULTI SUSPECTS <input type="checkbox"/> 18 KNEW LOC. OF HIDDEN ITEMS <input type="checkbox"/> 19 MADE THREATS <input type="checkbox"/> 20 PLACED PROPERTY IN SACK/POCKET <input type="checkbox"/> 21 PREPARED EXIT <input type="checkbox"/> 22 RANSACKED <input type="checkbox"/> 23 RIPPED/CUT CLOTHING <input type="checkbox"/> 24 SHUT OFF POWER <input type="checkbox"/> 25 SMOKED ON PREMISES <input type="checkbox"/> 26 SEARCHED VICTIM <input type="checkbox"/> 27 SUSPECT ARMED <input type="checkbox"/> 28 THREATENED RETALIATION <input type="checkbox"/> 29 TOOK ONLY CONSUMABLES <input type="checkbox"/> 30 TOOK VICTIM/S VEHICLE <input type="checkbox"/> 31 TORTURED <input type="checkbox"/> 32 UNDER INFLUENCE DRUGS <input type="checkbox"/> 33 USED DEMAND NOTE <input type="checkbox"/> 34 USED LOOKOUT <input type="checkbox"/> 35 USED DRIVER <input type="checkbox"/> 36 USED MATCH/CANDLE <input type="checkbox"/> 37 USED VICTIM'S NAME <input type="checkbox"/> 38 USED VICTIM'S SUITCASE/PILLOWCASE <input type="checkbox"/> 39 USED VICTIM'S TOOLS <input type="checkbox"/> 40 VEH NEEDED TO REMOVE PROPERTY <input type="checkbox"/> 41 CUT/DISCONNECTED PHONE <input type="checkbox"/> 42 CASED LOCATION BEFORE CRIME <input type="checkbox"/> 43 FOLLOWED/STALKED VICTIM <input checked="" type="checkbox"/> 44 OTHER VIOLATION OF RESTRAINING ORDER
VEHICLE Q03 <input type="checkbox"/> 45 CAMPER <input type="checkbox"/> 46 MOTOR HOME <input type="checkbox"/> 47 PASSENGER CAR <i>N/A</i> <input type="checkbox"/> 48 PICK-UP <input type="checkbox"/> 49 TRAILER <input type="checkbox"/> 50 TRUCK <input type="checkbox"/> 51 VAN <input type="checkbox"/> 52 OTHER _____	<input type="checkbox"/> 1 FRONT <input type="checkbox"/> 2 REAR <input type="checkbox"/> 3 SIDE <input type="checkbox"/> 4 DOOR <input type="checkbox"/> 5 WINDOW <input type="checkbox"/> 6 SLIDING GLASS DOOR <input type="checkbox"/> 7 BASEMENT <input type="checkbox"/> 8 ROOF <i>N/A</i> <input type="checkbox"/> 9 FLOOR <input type="checkbox"/> 10 WALL <input type="checkbox"/> 11 DUCT/VENT <input type="checkbox"/> 12 GARAGE <input type="checkbox"/> 13 ADJ. BUILDING <input type="checkbox"/> 14 GROUND LEVEL <input type="checkbox"/> 15 UPPER LEVEL <input type="checkbox"/> 16 UNKNOWN <input type="checkbox"/> 17 OTHER _____	<input type="checkbox"/> 1 CASH NOTES <input type="checkbox"/> 2 CLOTHES/FUR <input type="checkbox"/> 3 CONSUMABLE GOODS <input type="checkbox"/> 4 FIREARMS <input type="checkbox"/> 5 HOUSEHOLD GOODS <input type="checkbox"/> 6 JEWELRY METALS <input type="checkbox"/> 7 LIVESTOCK <input type="checkbox"/> 8 OFFICE EQUIPMENT <input type="checkbox"/> 9 TV/RADIO/CAMERA <input type="checkbox"/> 10 MISCELLANEOUS <input type="checkbox"/> 11 UNKNOWN <input type="checkbox"/> 12 OTHER <i>N/A</i>	<input type="checkbox"/> 1 DEMANDED MONEY <input type="checkbox"/> 2 INFLICTED INJURIES <input type="checkbox"/> 3 SELECTIVE IN LOOT <input type="checkbox"/> 4 STRUCK VICTIM <input type="checkbox"/> 5 ALARM DISABLED <input type="checkbox"/> 6 ARSON <input type="checkbox"/> 7 ATE/DRANK ON PREMISES <input type="checkbox"/> 8 BLINDFOLDED VICTIM BOUND/GAGGED <input type="checkbox"/> 9 CAT BURGLAR <input type="checkbox"/> 10 DEFECATED/URINATED <input type="checkbox"/> 11 DISROBED VICTIM FULLY <input type="checkbox"/> 12 DISROBED VICTIM PARTIALLY <input type="checkbox"/> 13 FIRED WEAPON <input type="checkbox"/> 14 FORCED VIC TO MOVE <input type="checkbox"/> 15 FORCED VIC INTO VEHICLE <input type="checkbox"/> 16 HAD BEEN DRINKING <input type="checkbox"/> 17 INDICATION MULTI SUSPECTS <input type="checkbox"/> 18 KNEW LOC. OF HIDDEN ITEMS <input type="checkbox"/> 19 MADE THREATS <input type="checkbox"/> 20 PLACED PROPERTY IN SACK/POCKET <input type="checkbox"/> 21 PREPARED EXIT <input type="checkbox"/> 22 RANSACKED <input type="checkbox"/> 23 RIPPED/CUT CLOTHING <input type="checkbox"/> 24 SHUT OFF POWER <input type="checkbox"/> 25 SMOKED ON PREMISES <input type="checkbox"/> 26 SEARCHED VICTIM <input type="checkbox"/> 27 SUSPECT ARMED <input type="checkbox"/> 28 THREATENED RETALIATION <input type="checkbox"/> 29 TOOK ONLY CONSUMABLES <input type="checkbox"/> 30 TOOK VICTIM/S VEHICLE <input type="checkbox"/> 31 TORTURED <input type="checkbox"/> 32 UNDER INFLUENCE DRUGS <input type="checkbox"/> 33 USED DEMAND NOTE <input type="checkbox"/> 34 USED LOOKOUT <input type="checkbox"/> 35 USED DRIVER <input type="checkbox"/> 36 USED MATCH/CANDLE <input type="checkbox"/> 37 USED VICTIM'S NAME <input type="checkbox"/> 38 USED VICTIM'S SUITCASE/PILLOWCASE <input type="checkbox"/> 39 USED VICTIM'S TOOLS <input type="checkbox"/> 40 VEH NEEDED TO REMOVE PROPERTY <input type="checkbox"/> 41 CUT/DISCONNECTED PHONE <input type="checkbox"/> 42 CASED LOCATION BEFORE CRIME <input type="checkbox"/> 43 FOLLOWED/STALKED VICTIM <input checked="" type="checkbox"/> 44 OTHER VIOLATION OF RESTRAINING ORDER
VICTIM PROFILE - DOMESTIC VIOLENCE ONLY			
PHYSICAL CONDITION 17 Q13 <input type="checkbox"/> 1 UNDER INFL. ALCOHOL/ DRUGS <input type="checkbox"/> 2 SICK/INJURED <input type="checkbox"/> 3 SENIOR CITIZEN <input type="checkbox"/> 4 BLIND <input type="checkbox"/> 5 HANDICAPPED <input type="checkbox"/> 6 DEAF <input type="checkbox"/> 7 MUTE <input type="checkbox"/> 8 MENTALLY/EMOTIONALLY IMPAIRED <input checked="" type="checkbox"/> 9 OTHER <i>HAD BEEN DRINKING</i>	RELATIONSHIP TO SUSPECT <input type="checkbox"/> 1 HUSBAND <input type="checkbox"/> 2 WIFE <input type="checkbox"/> 3 MOTHER <input type="checkbox"/> 4 FATHER <input type="checkbox"/> 5 DAUGHTER <input type="checkbox"/> 6 SON <input type="checkbox"/> 7 BROTHER <input type="checkbox"/> 8 SISTER <input type="checkbox"/> 9 OTHER FAMILY <input type="checkbox"/> 10 ACQUAINTANCE <input type="checkbox"/> 11 FRIEND <input type="checkbox"/> 12 BOYFRIEND <input checked="" type="checkbox"/> 13 GIRLFRIEND <input type="checkbox"/> 14 NEIGHBOR <input type="checkbox"/> 15 BUSINESS ASSOCIATE <input type="checkbox"/> 16 STRANGER <input type="checkbox"/> 17 UNKNOWN	MARITAL STATUS 18 Q14 <input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> 2 MARRIED <input type="checkbox"/> 3 DIVORCED <input type="checkbox"/> 4 SEPARATED <input type="checkbox"/> 5 ANNULLED <input type="checkbox"/> 6 COMMON LAW <input type="checkbox"/> 7 WIDOW(ER) <input type="checkbox"/> 8 UNKNOWN <input type="checkbox"/> 9 OTHER _____	19 Q15

<input type="checkbox"/> GANG RELATED <input checked="" type="checkbox"/> ADULT ARREST <input type="checkbox"/> SUSPECT ONLY <input type="checkbox"/> JUVENILE ARREST <input type="checkbox"/> SUPPLEMENT TO ORG RPT	TUSTIN POLICE DEPARTMENT 300 CENTENNIAL WAY TUSTIN, CA 92780 SUSPECT/ARRESTEE REPORT	2 <input type="checkbox"/> ACTIVE <input type="checkbox"/> SUSPENDED <input type="checkbox"/> RECORDS <input type="checkbox"/> COURTESY 3 <input type="checkbox"/> FEL. <input checked="" type="checkbox"/> MISD.	4 CR# <div style="font-size: 24pt; text-align: center;">20-2672</div> 5 REFER OTHER RPT# 6 PAGE <div style="font-size: 24pt; text-align: center;">3</div>
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7 CODE SECTION CPL 273.6(a)	8 CRIME / INCIDENT TYPE VIOLATION OF DOMESTIC COURT ORDER	9 PRIMARY-COUNTS	10 SECONDARY-COUNTS	11 OTHER-COUNTS	12 OTHER-COUNTS
13 LOCATION OF CRIME/ARREST 17082 KENYON DRIVE #E		14 DATE OF CRIME / ARREST 05/17/20 / 5/17/20		15 TIME OF CRIME / ARREST 0140 / 0232	

16 LICENSE #	17 STATE	18 VEH YR	19 MAKE	20 MODEL	21 BODY <input type="checkbox"/> UNK <input type="checkbox"/> 2-DR <input type="checkbox"/> 4-DR	22 COLOR/COLOR	23 OTHER CHARACTERISTICS (i.e. T/C Damage, Unique Marks or Paint, etc.)	24 DISPOSITION OF VEH
25 REGISTERED OWNER								

26 NAME (LAST, FIRST, MIDDLE) CAMPOS-VENTURA, HERSONN ERAIBY	CII NUMBER A31340463	27 SEX <input checked="" type="checkbox"/> M <input type="checkbox"/> F	28 DOB	29 RACE <input type="checkbox"/> 1 WHT <input checked="" type="checkbox"/> 2 HISP <input type="checkbox"/> 3 BLK <input type="checkbox"/> 4 IND <input type="checkbox"/> 5 CHI <input type="checkbox"/> 6 JAPN <input type="checkbox"/> 7 FIL <input type="checkbox"/> 8 PISL. <input type="checkbox"/> 9 VIET <input type="checkbox"/> 10 OTH	30 AKA	31 POB LOS ANGELES CA	32 HGT 600	33 WGT 220	34 BUILD <input type="checkbox"/> 1 THIN <input type="checkbox"/> 2 MED <input type="checkbox"/> 3 UNK <input checked="" type="checkbox"/> 4 HEAVY <input type="checkbox"/> 5 MUSCLR	35 HAIR <input type="checkbox"/> 0 UNK <input type="checkbox"/> 1 BRO <input checked="" type="checkbox"/> 2 BLK <input type="checkbox"/> 3 BLN <input type="checkbox"/> 4 RED <input type="checkbox"/> 5 GRAY <input type="checkbox"/> 6 S/P <input type="checkbox"/> 7 WHI <input type="checkbox"/> 8 OTH	36 EYES <input type="checkbox"/> 0 UNK <input checked="" type="checkbox"/> 1 BRO <input type="checkbox"/> 2 BLK <input type="checkbox"/> 3 BLU <input type="checkbox"/> 4 GRN <input type="checkbox"/> 5 HAZEL <input type="checkbox"/> 6 GRAY <input type="checkbox"/> 7 OTH	37 DL #	38 STATE CA		
39 RESIDENCE ADDRESS		40 ZIP CODE		41 RES. PHONE		42 CELL PHONE		43 BUSINESS OR SCHOOL NAME AND ADDRESS SBM DETAILING / SELF-EMPLOYED		44 ZIP CODE		45 GRADE		46 BUS. PHONE	
47 SSN #		48 OCCUPATION(S) CAR DETAILER		49 STATUS <input type="checkbox"/> 1 DRIVER <input checked="" type="checkbox"/> 2 PED <input type="checkbox"/> 3 PASS		50 BOOKING # AR 20-770		51 CLOTHING BLK SHIRT / BLUE PANTS		52 GANG AFFILIATION HOW KNOWN		<input type="checkbox"/> 1 KNOWN <input type="checkbox"/> 2 SUSPECTED			

53 AMOUNT OF HAIR Q21 <input checked="" type="checkbox"/> 01 FULL HEAD OF HAIR <input type="checkbox"/> 02 THINNING <input type="checkbox"/> 03 RECEDING <input type="checkbox"/> 04 BALD <input type="checkbox"/> 05 UNKNOWN <input type="checkbox"/> 06 OTHER	54 HAIR LENGTH Q22 <input type="checkbox"/> 01 VERY SHORT <input checked="" type="checkbox"/> 02 SHORT <input type="checkbox"/> 03 REGULAR <input type="checkbox"/> 04 OVER COLLAR <input type="checkbox"/> 05 OVER SHOULDERS <input type="checkbox"/> 06 LONG <input type="checkbox"/> 07 UNKNOWN <input type="checkbox"/> 08 OTHER	55 HAIR CONDITION Q23 <input checked="" type="checkbox"/> 01 CLEAN <input type="checkbox"/> 02 DIRTY <input type="checkbox"/> 03 GREASY <input type="checkbox"/> 04 MATTED <input type="checkbox"/> 05 ODOR <input type="checkbox"/> 06 OTHER	56 HAIR STYLE Q24 <input checked="" type="checkbox"/> 01 REGULAR <input type="checkbox"/> 02 PART RIGHT <input type="checkbox"/> 03 PART LEFT <input type="checkbox"/> 04 PART CENTER <input type="checkbox"/> 05 STRAIGHT BACK <input type="checkbox"/> 06 COMBED FORWARD <input type="checkbox"/> 07 BUZZ JOB <input type="checkbox"/> 08 FLAT TOP <input type="checkbox"/> 09 STRAIGHT <input type="checkbox"/> 10 CURLY OR PERMED <input type="checkbox"/> 11 WAVY <input type="checkbox"/> 12 AFRO CLOSE <input type="checkbox"/> 13 AFRO FULL (1 INCH) <input type="checkbox"/> 14 PROCESSED (BLK ONLY) <input type="checkbox"/> 15 IN CORN ROWS <input type="checkbox"/> 16 WITH PONY TAIL <input type="checkbox"/> 17 WITH TAIL <input type="checkbox"/> 18 IN BRAIDS <input type="checkbox"/> 19 NEW WAVE <input type="checkbox"/> 20 PUNK <input type="checkbox"/> 21 UNKNOWN <input type="checkbox"/> 22 OTHER <input type="checkbox"/> 23 SHAVED <input type="checkbox"/> 24 FADE <input type="checkbox"/> 25 MULLET	57 FACIAL HAIR Q25 <input type="checkbox"/> 01 CLEAN SHAVEN <input checked="" type="checkbox"/> 02 MUSTACHE-THIN <input type="checkbox"/> 03 MUSTACHE-THICK <input type="checkbox"/> 04 UNSHAVEN <input checked="" type="checkbox"/> 05 FEW DAYS GROWTH <input checked="" type="checkbox"/> 06 SHORT BEARD <input type="checkbox"/> 07 LONG BEARD <input type="checkbox"/> 08 UNKEMPT BEARD <input type="checkbox"/> 09 SIDEBURNS <input type="checkbox"/> 10 FUMANCHU <input type="checkbox"/> 11 GOATEE <input type="checkbox"/> 12 UNKNOWN <input type="checkbox"/> 13 OTHER <input type="checkbox"/> 14 VAN DYKE	58 R/L HANDED Q26 <input type="checkbox"/> 01 RIGHT HANDED <input type="checkbox"/> 02 LEFT HANDED <input checked="" type="checkbox"/> 03 UNKNOWN	59 COMPLEXION Q27 <input checked="" type="checkbox"/> 01 LIGHT / FAIR <input type="checkbox"/> 02 MEDIUM <input type="checkbox"/> 03 DARK <input type="checkbox"/> 04 TAN <input type="checkbox"/> 05 SUNBURNED <input type="checkbox"/> 06 FRECKLED <input type="checkbox"/> 07 OLIVE <input type="checkbox"/> 08 RUDDY <input type="checkbox"/> 09 ACNE/POCKED <input type="checkbox"/> 10 WEATHERED <input type="checkbox"/> 11 WRINKLED <input type="checkbox"/> 12 ALBINO <input type="checkbox"/> 13 UNKNOWN <input type="checkbox"/> 14 OTHER	60 GLASSES Q28 <input type="checkbox"/> 01 YES BUT NO DESCR. <input type="checkbox"/> 02 PRESCRIPTION <input type="checkbox"/> 03 SUN GLASSES <input type="checkbox"/> 04 PLASTIC FRAME - COLOR <input type="checkbox"/> 05 WIRE FRAME <input type="checkbox"/> 06 CONTACTS <input checked="" type="checkbox"/> 07 NONE <input type="checkbox"/> 08 UNKNOWN <input type="checkbox"/> 09 OTHER
62 DISPOSITION: ADULT ARRESTEE <input type="checkbox"/> 849b1 <input type="checkbox"/> DETOX <input type="checkbox"/> RELSD O.R. <input checked="" type="checkbox"/> BOOKED OCJ <input type="checkbox"/> BOOKED OTHER				63 <input type="checkbox"/> MISD. ARR / CITE / RELEASE CITATION #			

64 TRANSPORTED BY: SCHULTZ / VALENCIA	65 DATE/TIME 05/17/2020 0345	66 <input checked="" type="checkbox"/> FINGERPRINTED OCJ	67 <input checked="" type="checkbox"/> PHOTOGRAPHED OCJ
68 REPORTING OFFICER / ID NO. SCHULTZ #1316	69 DATE 05/17/2020	70 APPROVED BY / ID NO. R. Nelson #1249	71 DATE 5-17-2020

72 CR # 20-2672

<p>73 SPEECH Q29</p> <p><input checked="" type="checkbox"/> 01 NORMAL</p> <p><input type="checkbox"/> 02 LISP</p> <p><input type="checkbox"/> 03 SLURRED</p> <p><input type="checkbox"/> 04 STUTTER</p> <p><input type="checkbox"/> 05 DEEP</p> <p><input type="checkbox"/> 06 HIGH PITCHED</p> <p><input type="checkbox"/> 07 SOFT</p> <p><input type="checkbox"/> 08 UNKNOWN OR NOT HEARD</p> <p><input type="checkbox"/> 09 OTHER _____</p>	<p>75 TEETH Q31</p> <p><input type="checkbox"/> 01 BRACES</p> <p><input type="checkbox"/> 02 BUCKED</p> <p><input type="checkbox"/> 03 CHIPPED</p> <p><input type="checkbox"/> 04 MISSING</p> <p><input type="checkbox"/> 05 CROOKED</p> <p><input type="checkbox"/> 06 GOLD / SILVER CAPPED</p> <p><input checked="" type="checkbox"/> 07 STAINED</p> <p><input type="checkbox"/> 08 NORMAL TEETH</p> <p><input type="checkbox"/> 09 UNKNOWN</p> <p><input type="checkbox"/> 10 OTHER _____</p>	<p>77 UNIQUE CLOTHING Q33</p> <p><input type="checkbox"/> 01 BEACH CLOTHES</p> <p><input type="checkbox"/> 02 TRANSIENT</p> <p><input type="checkbox"/> 03 CONSTRUCTION</p> <p><input type="checkbox"/> 04 GANG STYLE</p> <p><input type="checkbox"/> 05 PUNK</p> <p><input type="checkbox"/> 06 MILITARY</p> <p><input type="checkbox"/> 07 OTHER UNIFORM</p> <p><input type="checkbox"/> 08 WELL DRESSED</p> <p><input checked="" type="checkbox"/> 09 NORMAL DAY CLOTHES</p> <p><input type="checkbox"/> 10 HAT</p> <p><input type="checkbox"/> 11 SKI MASK</p> <p><input type="checkbox"/> 12 STOCKING MASK</p> <p><input type="checkbox"/> 13 UNKNOWN</p> <p><input type="checkbox"/> 14 OTHER _____</p>	<p>78 WEAPON TYPE Q34</p> <p><input type="checkbox"/> 01 HANDS</p> <p><input type="checkbox"/> 02 FEET</p> <p><input type="checkbox"/> 03 CLUB</p> <p><input type="checkbox"/> 04 MARTIAL ARTS</p> <p><input type="checkbox"/> 05 BASEBALL BAT</p> <p><input type="checkbox"/> 06 NUNCHUKU</p> <p><input type="checkbox"/> 07 OTHER STRIKING OBJECT</p> <p><input type="checkbox"/> 08 KNIFE</p> <p><input type="checkbox"/> 09 BOTTLE</p> <p><input type="checkbox"/> 10 SIMULATED FIREARM</p> <p><input type="checkbox"/> 11 TOY GUN</p> <p><input type="checkbox"/> 12 HANDGUN</p> <p><input type="checkbox"/> 13 RIFLE / SHOTGUN</p> <p><input checked="" type="checkbox"/> 14 NONE</p> <p><input type="checkbox"/> 15 UNKNOWN</p> <p><input type="checkbox"/> 16 OTHER _____</p>
<p>74 ACCENT Q30</p> <p><input checked="" type="checkbox"/> 01 US NORMAL</p> <p><input type="checkbox"/> 02 US SOUTHERN</p> <p><input type="checkbox"/> 03 US EAST COAST</p> <p><input type="checkbox"/> 04 BLACK SLANG</p> <p><input type="checkbox"/> 05 SPANISH</p> <p><input type="checkbox"/> 06 ASIAN</p> <p><input type="checkbox"/> 07 EUROPEAN</p> <p><input type="checkbox"/> 08 MIDDLE EAST</p> <p><input type="checkbox"/> 09 JAMAICAN</p> <p><input type="checkbox"/> 10 UNKNOWN OR NOT HEARD</p> <p><input type="checkbox"/> 11 OTHER _____</p>	<p>76 SCARS, MARKS, OR TATTOOS Q32</p> <p><input type="checkbox"/> 01 FACE _____</p> <p><input type="checkbox"/> 02 TEETH _____</p> <p><input type="checkbox"/> 03 NECK _____</p> <p><input type="checkbox"/> 04 RIGHT ARM _____</p> <p><input type="checkbox"/> 05 LEFT ARM _____</p> <p><input type="checkbox"/> 06 RIGHT HAND _____</p> <p><input type="checkbox"/> 07 LEFT HAND _____</p> <p><input type="checkbox"/> 08 RIGHT LEG _____</p> <p><input type="checkbox"/> 09 LEFT LEG _____</p> <p><input type="checkbox"/> 10 RIGHT SHOULDER _____</p> <p><input type="checkbox"/> 11 LEFT SHOULDER _____</p> <p><input type="checkbox"/> 12 FRONT TORSO _____</p> <p><input type="checkbox"/> 13 BACK TORSO _____</p> <p><input type="checkbox"/> 14 MISSING FINGERS _____</p> <p><input type="checkbox"/> 15 MISSING LIMBS _____</p> <p><input type="checkbox"/> 16 UNKNOWN _____</p> <p><input type="checkbox"/> 17 OTHER _____</p> <p style="text-align: center;"><i>N/A</i></p>	<p>79 FIREARM DETAIL Q35</p> <p><input type="checkbox"/> 01 BLUE STEEL</p> <p><input type="checkbox"/> 02 CHROME / NICKEL</p> <p><input type="checkbox"/> 03 REVOLVER</p> <p><input type="checkbox"/> 04 AUTOMATIC</p> <p><input type="checkbox"/> 05 DERRINGER</p> <p><input type="checkbox"/> 06 PUMP</p> <p><input type="checkbox"/> 07 BOLT ACTION</p> <p><input type="checkbox"/> 08 DOUBLE BARREL</p> <p><input type="checkbox"/> 09 OVER-UNDER</p> <p><input type="checkbox"/> 10 DISGUISED FIREARM</p> <p><input type="checkbox"/> 11 SAWED OFF</p> <p><input type="checkbox"/> 12 ALTERED STOCK</p> <p><input checked="" type="checkbox"/> 13 NONE</p> <p><input type="checkbox"/> 14 UNKNOWN</p> <p><input type="checkbox"/> 15 OTHER _____</p>	

- JUVENILES ONLY -

80 FATHER (LAST, FIRST, MIDDLE)	81 OCCUPATION	82 D.O.B.	83 NOTIFIED <input type="checkbox"/> YES <input type="checkbox"/> NO	84 DATE	85 TIME
86 RESIDENCE ADDRESS	87 CITY	88 ZIP CODE	89 RES. PHONE ()	90 CELL PHONE ()	
91 BUSINESS ADDRESS	92 CITY	93 ZIP CODE	94 BUS. PHONE ()		
95 MOTHER (LAST, FIRST, MIDDLE)	96 OCCUPATION	97 D.O.B.	98 NOTIFIED <input type="checkbox"/> YES <input type="checkbox"/> NO	99 DATE	100 TIME
101 RESIDENCE ADDRESS	102 CITY	103 ZIP CODE	104 RES. PHONE ()	105 CELL PHONE ()	
106 BUSINESS ADDRESS	107 CITY	108 ZIP CODE	109 BUS. PHONE ()		
110 STEP FATHER (LAST, FIRST, MIDDLE)	111 OCCUPATION	112 D.O.B.	113 NOTIFIED <input type="checkbox"/> YES <input type="checkbox"/> NO	114 DATE	115 TIME
116 RESIDENCE ADDRESS	117 CITY	118 ZIP CODE	119 RES. PHONE ()	120 CELL PHONE ()	
121 BUSINESS ADDRESS	122 CITY	123 ZIP CODE	124 BUS. PHONE ()		
125 STEP MOTHER (LAST, FIRST, MIDDLE)	126 OCCUPATION	127 D.O.B.	128 NOTIFIED <input type="checkbox"/> YES <input type="checkbox"/> NO	129 DATE	130 TIME
131 RESIDENCE ADDRESS	132 CITY	133 ZIP CODE	134 RES. PHONE ()	135 CELL PHONE ()	
136 BUSINESS ADDRESS	137 CITY	138 ZIP CODE	139 BUS. PHONE ()		
140 LEGAL GUARDIAN (LAST, FIRST, MIDDLE)	141 OCCUPATION	142 D.O.B.	143 NOTIFIED <input type="checkbox"/> YES <input type="checkbox"/> NO	144 DATE	145 TIME
146 RESIDENCE ADDRESS	147 CITY	148 ZIP CODE	149 RES. PHONE ()	150 CELL PHONE ()	
151 BUSINESS ADDRESS	152 CITY	153 ZIP CODE	154 BUS. PHONE ()		
155 DISPOSITION: JUVENILE (MUST BE COMPLETED)					
<input type="checkbox"/> RELEASED TO PARENT <input type="checkbox"/> DETAINED JUVENILE HALL-PARENT NOTIFIED <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YOUTH SHELTER HOME <input type="checkbox"/> UNABLE TO LOCATE PARENT <input type="checkbox"/> PARENT REFUSED CUSTODY					
156 FOLLOW UP: (MUST BE COMPLETED)					
<input type="checkbox"/> NO FOLLOW UP REQUIRED <input type="checkbox"/> FOLLOW UP REQUIRED <input type="checkbox"/> DIVERSION <input type="checkbox"/> PETITION <input type="checkbox"/> INFORMAL COUNSEL					
157 REPORTING OFFICER / ID NO	158 DATE	159 APPROVED BY / ID NO.		160 DATE	
SCHULTZ #1316	5/17/20				

ADDITIONAL NAMES / LAW ENFORCEMENT PERSONNEL ONLY

A- ASSISTED AT SCENE C- CRIME SCENE INVESTIGATION F- ASSIGNED FOLLOW-UP OFFICER
 P- PERIMETER ASSIST W- WITNESS

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137 CODE A	138 NAME (LAST, FIRST NAME) SCHLESENGER, JOSHUA	139 ID NO. 1271	140 AGENCY NAME TUSTIN POLICE DEPARTMENT		
141 AGENCY ADDRESS 300 CENTENNIAL WAY		CITY TUSTIN	STATE CA	ZIP 92780	142 AGENCY PHONE (714) 573-3200
143 CAN TESTIFY TO: APPLICATION OF CAROTID RESTRAINT HOLD					
144 CODE A	145 NAME (LAST, FIRST NAME) VALENCIA, DAVID	146 ID NO. 1284	147 AGENCY NAME TUSTIN POLICE DEPARTMENT		
148 AGENCY ADDRESS 300 CENTENNIAL WAY		CITY TUSTIN	STATE CA	ZIP 92780	149 AGENCY PHONE (714) 573-3200
150 CAN TESTIFY TO: TRANSPORTED SUSPECT TO HOSPITAL AND JAIL					
151 CODE A	152 NAME (LAST, FIRST NAME) NELSON, ROBERT	153 ID NO. 1249	154 AGENCY NAME TUSTIN POLICE DEPARTMENT		
155 AGENCY ADDRESS 300 CENTENNIAL WAY		CITY TUSTIN	STATE CA	ZIP 92780	156 AGENCY PHONE (714) 573-3200
157 CAN TESTIFY TO: SPOKE TO SUSPECT					
158 CODE	159 NAME (LAST, FIRST NAME)	160 ID NO.	161 AGENCY NAME TUSTIN POLICE DEPARTMENT		
162 AGENCY ADDRESS 300 CENTENNIAL WAY		CITY TUSTIN	STATE CA	ZIP 92780	163 AGENCY PHONE (714) 573-3200
164 CAN TESTIFY TO:					
165 CODE	166 NAME (LAST, FIRST NAME)	167 ID NO.	168 AGENCY NAME TUSTIN POLICE DEPARTMENT		
169 AGENCY ADDRESS 300 CENTENNIAL WAY		CITY TUSTIN	STATE CA	ZIP 92780	170 AGENCY PHONE (714) 573-3200
171 CAN TESTIFY TO:					
172 CODE	173 NAME (LAST, FIRST NAME)	174 ID NO.	175 AGENCY NAME		
176 AGENCY ADDRESS		CITY TUSTIN	STATE CA	ZIP 92780	177 AGENCY PHONE (714) 573-3200
178 CAN TESTIFY TO:					
179 CODE	180 NAME (LAST, FIRST INITIAL)	181 ID NO.	182 AGENCY NAME		
183 AGENCY ADDRESS		CITY	STATE	ZIP	184 AGENCY PHONE
185 CAN TESTIFY TO:					
186 CODE	187 NAME (LAST, FIRST NAME)	188 ID NO.	189 AGENCY NAME		
190 AGENCY ADDRESS		CITY	STATE	ZIP	191 AGENCY PHONE
192 CAN TESTIFY TO:					
193 CODE	194 NAME (LAST, FIRST NAME)	195 ID NO.	196 AGENCY NAME		
197 AGENCY ADDRESS		CITY	STATE	ZIP	198 AGENCY PHONE
199 CAN TESTIFY TO:					
200 CODE	201 NAME (LAST, FIRST NAME)	202 ID NO.	203 AGENCY NAME		
204 AGENCY ADDRESS		CITY	STATE	ZIP	205 AGENCY PHONE
206 CAN TESTIFY TO:					
207 REPORTING OFFICER / ID NO. B. SCHULTZ #1316		208 DATE 5/17/20	209 APPROVED BY / ID NO. R. Nelson #1249		210 DATE 5-17-2020

TUSTIN POLICE DEPARTMENT

ADDITIONAL NAMES

TPD #103A (REV 9/2006)

PAGE _____

1 CR# _____

CRIME	2 CODE SECTION			3 CRIME			4 REFER OTHER REPORTS																
	5 LOCATION						6 AREA																
NAME	7 CODE	8 NAME (LAST, FIRST, MIDDLE)			9 OCCUPATION			10 D.O.B.			11 SEX <input type="checkbox"/> 1 M <input type="checkbox"/> 1 F		12 RACE <input type="checkbox"/> 1 WHT <input type="checkbox"/> 4 IND <input type="checkbox"/> 8 P.ISL		<input type="checkbox"/> 2 HISP <input type="checkbox"/> 5 CHI <input type="checkbox"/> 9 VIET		<input type="checkbox"/> 3 BLK <input type="checkbox"/> 6 JAPN <input type="checkbox"/> 7 FIL <input type="checkbox"/> 10 OTH						
	13 RESIDENCE ADDRESS						14 CITY			STATE			ZIP CODE			15 RES. PHONE ()		16 HT:					
	17 BUSINESS NAME & ADDRESS						18 CITY			STATE			ZIP CODE			19 BUS. PHONE ()		20 WT:					
	21 EMAIL						22 CELL PHONE ()																
VEH	23 LICENSE #			24 STATE		25 YEAR		26 MAKE		27 MODEL		28 0 UNK BODY		2 4-DR		4 P/U		6 VAN		8 RV		10 OTHER	
	29 COLOR/COLOR				30 OTHER CHARACTERISTICS								31 DISPOSITION OF VEHICLE										
NAME	32 CODE	33 NAME (LAST, FIRST, MIDDLE)			34 OCCUPATION			35 D.O.B.			36 SEX <input type="checkbox"/> 1 M <input type="checkbox"/> 1 F		37 RACE <input type="checkbox"/> 1 WHT <input type="checkbox"/> 4 IND <input type="checkbox"/> 8 P.ISL		<input type="checkbox"/> 2 HISP <input type="checkbox"/> 5 CHI <input type="checkbox"/> 9 VIET		<input type="checkbox"/> 3 BLK <input type="checkbox"/> 6 JAPN <input type="checkbox"/> 7 FIL <input type="checkbox"/> 10 OTH						
	38 RESIDENCE ADDRESS						39 CITY			STATE			ZIP CODE			40 RES. PHONE ()		41 HT:					
	42 BUSINESS NAME & ADDRESS						43 CITY			STATE			ZIP CODE			44 BUS. PHONE ()		45 WT:					
	46 EMAIL						47 CELL PHONE ()																
VEH	48 LICENSE #			49 STATE		50 YEAR		51 MAKE		52 MODEL		53 0 UNK BODY		2 4-DR		4 P/U		6 VAN		8 RV		10 OTHER	
	54 COLOR/COLOR				55 OTHER CHARACTERISTICS								56 DISPOSITION OF VEHICLE										
NAME	57 CODE	58 NAME (LAST, FIRST, MIDDLE)			59 OCCUPATION			60 D.O.B.			61 SEX <input type="checkbox"/> 1 M <input type="checkbox"/> 1 F		62 RACE <input type="checkbox"/> 1 WHT <input type="checkbox"/> 4 IND <input type="checkbox"/> 8 P.ISL		<input type="checkbox"/> 2 HISP <input type="checkbox"/> 5 CHI <input type="checkbox"/> 9 VIET		<input type="checkbox"/> 3 BLK <input type="checkbox"/> 6 JAPN <input type="checkbox"/> 7 FIL <input type="checkbox"/> 10 OTH						
	63 RESIDENCE ADDRESS						64 CITY			STATE			ZIP CODE			65 RES. PHONE ()		66 HT:					
	67 BUSINESS NAME & ADDRESS						68 CITY			STATE			ZIP CODE			69 BUS. PHONE ()		70 WT:					
	71 EMAIL						72 CELL PHONE ()																
VEH	73 LICENSE #			74 STATE		75 YEAR		76 MAKE		77 MODEL		78 0 UNK BODY		2 4-DR		4 P/U		6 VAN		8 RV		10 OTHER	
	79 COLOR/COLOR				80 OTHER CHARACTERISTICS								81 DISPOSITION OF VEHICLE										
NAME	82 CODE	83 NAME (LAST, FIRST, MIDDLE)			84 OCCUPATION			85 D.O.B.			86 SEX <input type="checkbox"/> 1 M <input type="checkbox"/> 1 F		87 RACE <input type="checkbox"/> 1 WHT <input type="checkbox"/> 4 IND <input type="checkbox"/> 8 P.ISL		<input type="checkbox"/> 2 HISP <input type="checkbox"/> 5 CHI <input type="checkbox"/> 9 VIET		<input type="checkbox"/> 3 BLK <input type="checkbox"/> 6 JAPN <input type="checkbox"/> 7 FIL <input type="checkbox"/> 10 OTH						
	88 RESIDENCE ADDRESS						89 CITY			STATE			ZIP CODE			90 RES. PHONE ()		91 HT:					
	92 BUSINESS NAME & ADDRESS						93 CITY			STATE			ZIP CODE			94 BUS. PHONE ()		95 WT:					
	96 EMAIL						97 CELL PHONE ()																
VEH	98 LICENSE #			99 STATE		100 YEAR		101 MAKE		102 MODEL		103 0 UNK BODY		2 4-DR		4 P/U		6 VAN		8 RV		10 OTHER	
	104 COLOR/COLOR				105 OTHER CHARACTERISTICS								106 DISPOSITION OF VEHICLE										
NAME	107 CODE	108 NAME (LAST, FIRST, MIDDLE)			109 OCCUPATION			110 D.O.B.			111 SEX <input type="checkbox"/> 1 M <input type="checkbox"/> 1 F		112 RACE <input type="checkbox"/> 1 WHT <input type="checkbox"/> 4 IND <input type="checkbox"/> 8 P.ISL		<input type="checkbox"/> 2 HISP <input type="checkbox"/> 5 CHI <input type="checkbox"/> 9 VIET		<input type="checkbox"/> 3 BLK <input type="checkbox"/> 6 JAPN <input type="checkbox"/> 7 FIL <input type="checkbox"/> 10 OTH						
	113 RESIDENCE ADDRESS						114 CITY			STATE			ZIP CODE			115 RES. PHONE ()		116 HT:					
	117 BUSINESS NAME & ADDRESS						118 CITY			STATE			ZIP CODE			119 BUS. PHONE ()		120 WT:					
	121 EMAIL						122 CELL PHONE ()																
VEH	123 LICENSE #			124 STATE		125 YEAR		126 MAKE		127 MODEL		128 0 UNK BODY		2 4-DR		4 P/U		6 VAN		8 RV		10 OTHER	
	129 COLOR/COLOR				130 OTHER CHARACTERISTICS								131 DISPOSITION OF VEHICLE										
132 REPORTING OFFICER / ID NO.						133 DATE			134 APPROVED BY / ID NO.						135 DATE								

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NARRATIVE REPORT
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SYNOPSIS

Officers responded to an apartment reference a disturbance between a girlfriend and her boyfriend, which resulted in the male's arrest for violating a criminal protective order and resisting, obstructing, or delaying a police officer. He was booked at Orange County Jail.

To be noted: Throughout this investigation, I was wearing my Tustin Police Department body worn camera and driving a TPD police vehicle with an in-car camera. The following interviews are summaries of statements given to me by the parties involved in this report. They are not intended to be verbatim unless indicated by quotation marks. Statements made that are not pertinent to this report have been omitted.

NARRATIVE (The below incident was captured on my department issued personal body worn camera)

On 5/17/20, I was working a uniformed patrol assignment driving a marked black and white police vehicle (820) in the City of Tustin, County of Orange. At approximately 0140 hours, Officer Schlesinger and I responded to 17082 Kenyon Drive #E reference a subject disturbance. The reporting party/victim, [REDACTED] advised TPD dispatch her boyfriend, Hersonn Campos-Ventura [REDACTED], was drunk, screaming, and throwing things inside their apartment. [REDACTED] informed TPD Dispatch she was did not feel comfortable entering the apartment due to his behavior. Additionally, she stated she saw him walk around the balcony so she hid in between the apartments so he did not see her. TPD Dispatch had difficulty speaking with [REDACTED] who did not answer questions at times, because she did not want him to hear that she was outside. For the purpose of this report, Hersonn Campos-Ventura will be referred to as Hersonn.

Upon my arrival, I contacted [REDACTED] outside of the apartment – in the west alley. She told me the following:

[REDACTED] and Hersonn have been living together for approximately one year (dating for three years) and have no children in common. She mentioned there has been previous domestic violence

B.SCHULTZ #1316

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incidents between them, including an incident approximately a year ago when he hit and choked her (no further details).

█████ believed Hersonn was upset because she went out for the night to a family members birthday party and was returning home late. She thought about entering the apartment, but she heard what sounded like Hersonn breaking and slamming things out of anger, thus, she waited for the police to arrive, because she was scared that he might hurt her due to his aggressive behavior. She admitted to drinking alcohol earlier in the night.

A record check of Hersonn revealed he is the restrained person on a served criminal protective order ██████████ protecting ██████ which was issued on 12/26/17 with an expiration date of 12/26/20 (see attached copy). However, the order allows for peaceful contact. Additionally, he had previous arrests for domestic violence, criminal threats and resisting, obstructing, or delaying a police officer.

█████ requested we contact Hersonn and have him leave the apartment for the night because of his behavior and since he is not on the lease. ██████ provided me her apartment keys and told me I was allowed to enter her apartment. Upon entering the apartment, I did not observe any broken or damaged items.

Officer Schlesinger and I contacted Hersonn who was sleeping in a back bedroom. I made noise and he awoke. It should be noted, he is approximately 6'2" and weighed approximately 245 pounds with a heavy build. I explained to him why we contacted him and asked him if there was an alternative place where he can spend the night. He told me there was no place for him to go. I asked him if he had been drinking and he told me he had been drinking. Additionally, during my contact with him I smelled an odor of an alcoholic beverage emitting from his person. He was reluctant to leave the apartment.

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I asked Hersonn about the aforementioned restraining order and he told me it was from “a long time ago”. He asked what the restraining order was on and told me he went to court for it. According to Hersonn, he was told by his lawyer the restraining order was “waived off”.

Hersonn showed me a text message thread between him and [REDACTED] which showed peaceful communication. He informed her he was not able to sleep and wanted to make sure she came home safely. Additionally, he mentioned in the text message thread he was unable to drive to pick her up, because he had been drinking.

Officer Schlesinger and I re-contacted [REDACTED] and attempted to make arrangements so both parties would be separated for the night. At that time, Hersonn came to the front door of the apartment and started arguing with [REDACTED]. He was upset she accused him of breaking something. I told both parties to stop arguing and instructed [REDACTED] to exit the area and sit on a stairwell of an adjacent apartment – she complied. He started raising his voice at [REDACTED] and stated, “I can’t believe you’re such a bitch, like making shit up that is not true... what are the things I’m breaking?”

I explained to Hersonn the restraining order only allows for peaceful contact and he replied, “Then lock me up, point blank! Lock me up”. Hersonn then asked [REDACTED] why was she “being a bitch”. Officer Schlesinger attempted to calm Hersonn down by gently touching his shoulder, however Hersonn got upset and told Officer Schlesinger not to touch him. I told Hersonn he needed to calm down and lower his voice, however he refused, violating the restraining order. Hersonn made a step towards the top of the stairwell and shouted at [REDACTED] “Fuck you!” “Don’t fucking tell me to stop!”

Based on Hersonn’s escalating and unpredictable behavior coupled with him violating the served criminal protective order, I attempted to arrest him. Prior to physically contacting him, I requested additional units via radio, because I believed Hersonn would potentially be combative. I grabbed his left arm, however he tensed up and pulled away from me assuming a fighting stance. I immediately rushed him, grabbed his upper body with both of my arms and used a leg sweep technique, whereby, I used my left leg and body force to trip him. As a result, he fell to

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the ground. While on his stomach, he continuously clenched both of his fists and kept his arms underneath his body. Officer Schlesinger and I ordered him multiple times to give us his hands and put them behind his back, however he refused and maintained clenched fists. Additionally, he kept rotating his body while actively and physically resisting arrest for approximately twenty seconds. Because of the aforementioned events, Officer Schlesinger applied the Carotid Restraint Hold, which was successful. It appeared Hersonn lost consciousness for approximately two-three seconds. During that time, Officer Schlesinger and I placed him in handcuffs and then immediately placed him in a recovery position. He awoke and began speaking. See Officer Schlesinger's supplemental report for further details.

Sergeants Nelson and Gleason, and Officers Diaz, Valencia, Newman, Melendrez and Baeza arrived on scene to assist.

Orange County Fire Authority (OCFA) was notified, arrived on scene, and evaluated Hersonn. He told them he was "fine" and refused any medical treatment.

I contacted [REDACTED] who witnessed Hersonn physically resisting arrest. She told me the following:

Hersonn was "out of control" and [REDACTED] was scared because she thought he was going to run away and then be aggressive upon his return. He was "not calm".

I asked [REDACTED] if she wanted Hersonn arrested for violating the restraining order. She told me she did not and just wanted him gone "for the night".

I arrested Hersonn for violating the restraining order and resisting, obstructing, or delaying a police officer. I explained to him his charges and escorted him to my patrol vehicle. I transported him to TPD.

HERSONN'S MIRANDA STATEMENTS

At TPD, I read Hersonn his Miranda Rights verbatim using my department issued card. He replied, "Yes" to each question of understanding his rights. I asked him if he understood why I contacted

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him inside the apartment and he replied, "Yes". I asked him why he was reluctant to listen to what I was saying. He invoked his rights and requested to speak to an attorney.

I took photographs of Hersonn and did observe any apparent injuries.

CONCLUSION

Officer Valencia transported Hersonn to OC Global Medical Center (1001 N. Tustin Avenue) where he got medically cleared prior to being booked at Orange County Jail (OCJ) for PC 273.6(a) – violating a served criminal protective order and PC 148(a)(1) – obstructing, resisting or delaying a police officer.

I request this report be forwarded to the Orange County District Attorney's Office for review and filing the following charges against Hersonn Eraiby Campos-Ventura:

PC 273.6(a) – Violation of Criminal Protective Order

PC 148(a)(1) – Obstructing, Resisting, or Delaying a Police Officer

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Narrative:

Throughout this investigation I was wearing my Tustin Police Department body worn camera and driving a marked TPD police car with an in- car camera. The following interviews are summaries of statements given to me by the parties involved in this report. They are not intended to be verbatim unless indicated by quotation marks. Statements that are not pertinent to this report have been omitted.

On 05-17-20, I was working uniformed patrol in a marked police vehicle in the City of Tustin, County of Orange. At approximately 0140 hours, I was dispatched to 17082 Kenyon Drive #E reference a subject disturbance.

The reporting party, [REDACTED], called Tustin PD to report that her boyfriend, Hersonn Eraiby Campos Ventura, was screaming and throwing items inside her apartment. [REDACTED] believed Hersonn was under the influence of alcohol and she was scared for her safety, so she called TPD for assistance. [REDACTED] was so scared of Hersonn's erratic behavior that she decided to hide in an alley down the street until officers arrived.

Officer Schultz and I arrived on scene and contacted [REDACTED] in the alley east of the apartment. Refer to Officer Schultz's original report for details regarding his contact with [REDACTED]

After speaking with [REDACTED] Officer Schultz and I contacted Hersonn inside the apartment. I immediately noticed the odor of an alcoholic beverage as I spoke with Hersonn and he admitted to drinking alcohol. It should be noted that Hersonn appeared to be approximately 6' 2" tall and weighed approximately 245 pounds with a heavy build. A records check revealed Hersonn had prior arrests for resisting or delaying a police officer. We initially contacted Hersonn inside the small bedroom inside the apartment, then moved out to the living room area.

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As Officer Schultz and I spoke with Hersonn he became more emotional. Hersonn began raising his voice and demonstrated frustration with the fact that we were asking him to leave the apartment.

I exited the apartment to speak with [REDACTED] at the front door. [REDACTED] again expressed that she was in fear for her safety because Hersonn has demonstrated violent tendencies in the past. As I was speaking with [REDACTED], Hersonn walked to the front door and began yelling at [REDACTED]. Hersonn called [REDACTED] a "bitch" two times, then yelled "Fuck You" to [REDACTED].

Due to the fact that Hersonn was yelling curse words at [REDACTED], Officer Schultz and I determined that Hersonn was in violation of the peaceful contact clause of his served restraining order. Officer Schultz grabbed Hersonn's left arm in an attempt to place his hands behind his back. Hersonn immediately pulled his left arm away and assumed a fighting stance inside the living room of the apartment. Hersonn clenched his fists and began yelling after he pulled his arm away from Officer Schultz.

I immediately requested additional officers with lights and siren. Officer Schultz tackled Hersonn to the ground. Hersonn placed both his arms under him when he fell to the floor and refused to put his hands behind his back. Hersonn began clenching his fists and tensing his body in order to prevent officers from placing him in handcuffs. Hersonn attempted to pull away from me in order to escape arrest. I gave Hersonn three clear orders to place his hands behind his back in order to effect the arrest.

Hersonn refused to comply after three lawful orders to place his hands behind his back, so I used the Carotid Restraint Hold to overcome his resistance and to effect the arrest. Hersonn lost consciousness for approximately 2-3 seconds. Officer Schultz and I placed him in handcuffs, then immediately put him in the recovery position so he could receive adequate oxygen. Hersonn woke up and immediately began talking again.

I immediately notified TPD Dispatch via police radio that the Carotid Restraint had been applied and requested paramedics from the Orange County Fire Authority to respond to evaluate Hersonn. Hersonn refused medical treatment at the scene.

Tustin Police Department

Narrative Report

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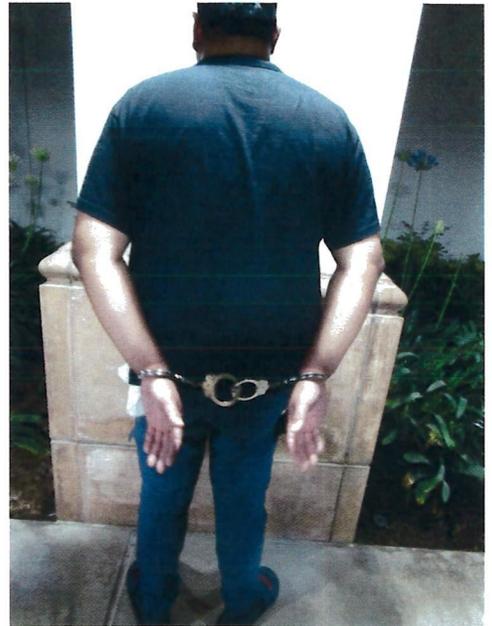
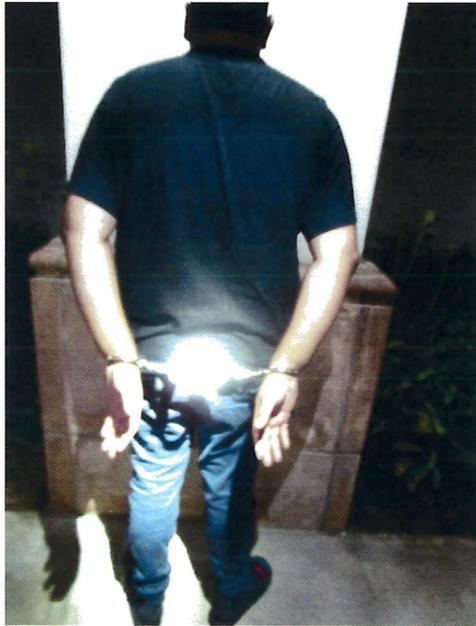
It should be noted that I received formal training on administering the Carotid Restraint Hold when I attended a POST approved Police Academy. I receive refresher training on a biennial basis through the Tustin PD Arrest and Control Instructors. I last completed such training in January 2019.

Sergeant Nelson and Sergeant Gleason arrived on scene to contact Hersonn regarding the incident.

Officer Schultz transported Hersonn to TPD to complete the booking process.

I request this report be attached to Officer Schultz's original arrest report.

20-2672



ORANGE COUNTY JAIL

Santa Ana, California

- EXPEDITE BOOKING
- MEDICAL BOOKING
- NORMAL BOOKING

Medical Temp. No. T1214570

161843

853.6 Supplemental

FOR JAIL USE ONLY

PLEASE PRINT OR TYPE

PRE-BOOKING RECORD

BOOKING NUMBER <u>3165231</u>	RECEIVING OFFICER <u>Chapman #5761</u>	DATE <u>5-17-20/0557</u>	SUPPLEMENTAL WARRANTS	HOW MANY
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STREET BOOKING WARRANT COURT ORDER OTHER (SPECIFY):

COMMITMENT:

TO BE COMPLETED BY ARRESTING OR TRANSPORTING OFFICER

PLEASE FILL IN ALL OF THE BOXES BELOW THIS LINE PRIOR TO SUBMITTING TO THE RECEIVING GUARD STATION

US MILITARY VETERAN/BRANCH
 YES NO ARMY NAVY MARINE CORPS AIR FORCE COAST GUARD

ARRESTING AGENCY <u>JUSTIN</u>	OCSA AREA OR CONTRACT CITY	AGENCY CASE <u>20-2672</u>	DATE & TIME ARRESTED <u>5/17/20 - 02:32</u>
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NAME: LAST <u>CAMPOS-VENTURA</u>	FIRST <u>HERSONN</u>	MIDDLE <u>ERATBY</u>	SUFFIX
BIRTHDATE	SEX <u>M</u>	RACE <u>H</u>	HEIGHT <u>6'0"</u>
	WEIGHT <u>220</u>	HAIR <u>BLK</u>	EYES <u>BRO</u>
	STATE & COUNTRY OF BIRTH <u>CA / USA</u>	CITIZENSHIP <u>USA</u>	

JURISDICTION CTC WARRANT OR CASE NUMBER 15,000

CHARGE 1 <u>CPC 273.6 (a)</u>	CHARGE 3
CHARGE 2 <u>CPC 148(a)(1)</u>	CHARGE 4

DNA DNA COLLECTED BY OFFICER PREVIOUSLY COLLECTED NOT COLLECTED (EXPLAIN BELOW)

OCCUPATION DETAILER MARITAL STATUS S SOCIAL SECURITY NUMBER [REDACTED] TELEPHONE NO. [REDACTED]

SCARS, MARKS, TATTOOS, AMPS -N/A-

ADDRESS [REDACTED] CITY [REDACTED] STATE [REDACTED] ZIP [REDACTED]

ARRESTEE EMPLOYER NAME SBM DETAILING BUSINESS ADDRESS -N/A-

OFFICER'S ADDITIONAL INFORMATION - CHECK BOX IF YOU BELIEVE THE ARRESTEE WILL REQUIRE MEDICAL ATTENTION OR SPECIAL MANAGEMENT.

MEDICAL (ILL OR INJURED) MENTAL INTOXICATED PROTECTIVE CUSTODY HIGH SECURITY

EXPLAIN CPC 4573.6(a) Verbal advisement given.

ARRESTING OFFICER R. SCHWITZ ID# 12110 MANDATORY FOREIGN NOTIFICATION MADE PER CPC 834c YES NO N/A

PERMISSION TO USE TELEPHONE AFTER ARREST

(Pursuant to Penal Code Section 851.5)

I have been given the opportunity to make (3) FREE telephone calls within the LOCAL DIALING area, or at MY OWN EXPENSE IF OUTSIDE the Local dialing area. If I am a custodial parent with responsibility for a minor child, I have been given the opportunity to make two (2) additional FREE telephone calls within the local dialing area, or at MY OWN EXPENSE IF OUTSIDE the local dialing area, for the purpose of arranging for the care of my minor child(ren) in my absence.

Telephone calls DESIRED 3 RECORD OF TELEPHONE CALLS: Telephone Calls COMPLETED 0/REFUSED

CUSTODIAL PARENT Telephone calls DESIRED — CUSTODIAL PARENT Telephone calls COMPLETED —

Location JUSTIN PD Date 5/17/20 Time 0321

Witnessing Officer D VALENCA ID# 1284 Agency JUSTIN PD

F0680-195 (J) (R01/20) SIGNATURE 11/C

ORANGE COUNTY JAIL
Santa Ana, California

Penal Code 853.6 Supplemental

To be completed upon a physical arrest for any misdemeanor, pursuant to Penal Code Section 853.6.

Last Name

First Name

DOB

Booking Number

Check all that apply:

1. The person arrested was so intoxicated that they could have been a danger to themselves or others.
2. The person arrested required medical examination or medical care or was otherwise unable to care for their own safety.
3. The person was arrested under one or more of the circumstances listed in Section 40302 and 40303 of the Vehicle Code.
4. There were one or more outstanding arrest warrants or failures to appear in court on previous misdemeanor citations that have not been resolved for the person.
5. The person could not provide satisfactory evidence of personal identification.
6. The prosecution of the offense or offenses for which the person was arrested, or the prosecution of any other offense or offenses, would be jeopardized by immediate release of the person arrested.
7. There was a reasonable likelihood that the offense or offenses would continue or resume, or that the safety of persons or property would be imminently endangered by release of the person arrested.
8. The person arrested demanded to be taken before a magistrate or refused to sign the Notice to Appear.
9. There is reason to believe that the person would not appear at the time and place specified in the notice. (Arresting officer to specify the basis for this determination). An arrest warrant or failure to appear that is pending at the time of the current offense shall constitute reason to believe that the person would not appear as specified in the notice.
10. The person was subject to Penal Code Section 1270.1.
11. The person has been cited, arrested, or convicted for misdemeanor or felony theft from a store or a vehicle in the previous six months.
12. There is probable cause to believe that the person arrested is guilty of committing organized retail theft, as defined in Penal Code Section 490.4, subdivision (a).

SYNOPSIS: (For Officer's Use Only)



DATE: SEPTEMBER 15, 2020

Inter-Com

TO: JOSH SCHLESINGER, POLICE OFFICER

JS

FROM: MANNY ARZATE, POLICE CAPTAIN

ml

SUBJECT: **ADMINISTRATIVE REVIEW – USE OF FORCE (UOF2020-008)**

An Administrative Review has been completed concerning the use of force that you were involved in on May 17, 2020. After a preliminary review of this incident, it is the opinion of this Department that your actions were **within policy**, no further action will be taken.



DATE: SEPTEMBER 15, 2020

Inter-Com

TO: BRADLEY SCHULTZ, POLICE OFFICER *BS*

FROM: MANNY ARZATE, POLICE CAPTAIN *Ma*

SUBJECT: **ADMINISTRATIVE REVIEW – USE OF FORCE (UOF2020-008)**

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