. greatering	-		1 of					Los Ange	les Police	Departme	nt UCR	CODE			ED EVID. F			
-	Γ			03.01.00		REPORT OF: INVEST DIV. INC# DR#												
_	CASE SCREENING FACTOR(S)								E (OR NAME OF		L SEX	0907 Desc	202-2 Нт	WT 1	AGE	DOB		
ITY SES DIV		☐ SUSPECTIVEHICLE NOT SEEN ☐ PRINTS OR OTHER EVIDENCE NOT PRESENT ☐ MO NOT DISTINCT ☐ PROPERTY LOSS LESS THAN \$5,000					COB		ARD NORM		M	W	508	140	81 (9/21/1934		
ECURITY							ADDRESS ZIP PHONE X R- AVE. LOS ANGELES 90019											
SECU						VICTIM	в- 5455	B- 5455 WILSHIRE BLVD. SUITE 1701 L.A. 90212 (310) 285-1633								☑		
			S (SPECIFIC T		7	┨		MAIL ADDRESS CELL PHONE							IE			
L	٦ ١	KEMISE	S (GPECIFIC)	(rc) _	MTA		DR, LIC. NO	. (IF NONE, OTH	ER ID & NO.)	FOREIGN LANGUAGE SPOKEN OC			1	ccupationMUSICIAN				
۵× و	Ē	NTRY 45	9/BFV POINT OF	ENTRY	POINT OF	EXIT	LOCATION	ON OF OCCURR	ENCE SA	MEAS VS				PRINTS BY PREL. INV.				
CTSOB	FRONT REAR															— —		
[SIDE METHOD					DATE & 07/27/		ME OF OCCURRENCE DATE & TIME REPORTE 016 1300 07/29/2016 1700 09/01/2016						RTED TO	PD		
		ROOF INSTRUMENT/TOOL USED						2,00							. DAMAGED ON / VAND.			
به د م	OTHER						\$ \$ \$									ON / VAND.		
SHOTS FIRED	V	ICT'S VE	H.(IF INVOLVE	D) YEAR, MAKE, TY	PE, COLOF	R, LIC. NO	D. NOTIFIC	ATION(S) (PERS	ON & DIVISION)		CONI	NECTED F	REPORT(S) (TYPE &	DR#)			
	M	O IF LONG F	ORM, LIST UNIO	UE ACTIONS. IF S	HORT FOR	M, DESC	 SCRIBE SUSPECT'S ACTIONS IN BRIEF PHRASES, INCLUDING WEAPON USED. DO NOT REPEAT ABOVE INFO E								E INFO BU	T CLARIFY		
	ו		RT AS NECESSARY. IF ANY OF THE MISSING ITEMS ARE POTENTIALLY IDENTIFIABLE, ITEMIZE AND DESCRIBE ALL ITEMS MISSING IN THIS INCIDENT IN THE NARRATIVE. USPECT RECENTLY VIOLATED HER RESTRAINING ORDER BY SENDING NUMEROUS UNSOLICITED															
는 원				HE VICTIM. LASC CASE NO. BQ033717										, os ompozitoriza				
USE OF FORCE	MANDATORY MARSY'S RIGHTS CARD PROVIDED TO THE VICTIM													MOTIVATED BY DOMESTIC HATRED/PREJUDICE VIOLENCE				
			INITIAL	S, LAST NAME		SIGNATE	RE /	10	OR RE	CEIVED BY	PHONE							
	1	EPORTIN		TECTIVE MA	DERO	34	131 I	SVD TMU	REPORTIN	~ 7 7 7	FLONGATO COLEND RT FORM AND VICTIMPR ARE NOT THE SAME,				CHITTI ON DECOMATION			
S.	\Box	MPLOYE		any CASE SCRE	EUWO E	07007	Si hawaa a	va mad abaakaa	NOTE. IN IN	OLVED PERSO			THE OAN	DE, ENTER	FRINTO	AND THE STATE OF T		
S T			EAR MAK				INTER		EXTERIOR	OR IEELS	BODY			1	WINDOWS			
NARCOTICS STOLEN -	VEHICLE VEH. LIC. NO. STATE					-	COLOR:		2 PAINTED INSC		CRIPT 1 DAMAGE 5 RK		FRONT	1 DAMAGE 5 RIGHT 6 FRONT				
	COLOR(S) VEH. LIC. NO. STAT				NE.	********	KET SEATS 5 CUSTOM PAINT AGED INSIDE 6 VINYL TOP					REAR	3 CURTAINS 7 REAR					
GND/GIT	r	SEX DESC HAIR EYES HEIGHT WEIGHT RIN RRO 506 120			T AGE 59		CLOTHING	NAME, ADD	RESS, DOB, IF KNOWN; NAME, BKG, NO., CHA									
	S-1	PERSONAL ODDITIES (UNUSUAL FEATURES, SCARS, TATTOOS, ETC.) WEADON (VERBAL THREATS, BODILY FORCE, SIMULATED GUN, ETC. IF KNIFE OR GUN,																
	WEAPON DESCRIBE FULLY.) SEX DESC HAIR EYES HEIGHT WEIGHT AGE CLOTHING NAME, ADDRESS, DOB, IF													L MES				
			10	LIES HEISTI	******	"	AGE ;	5,511,211,0	TOTAL, TES	1,200,000, 11	***************************************		. 110., 012	4101., 11 70				
	5-2	PERSONAL	ODDITIES (UNU	ISUAL FEATURES,	SCARS, TA	T700S,	ETC.)	,		RBAL THREAT SCRIBE FULLY		ORCE, SII	MULATED	GUN, ETC	. IF KNIFE	OR GUN,		
	W-WITNESS; R-PERSON RPTG; S-PERSON SECURING (459); D-PERSON DISCOVERING (459); P-PARENT;																	
SUPVR	<u> </u> "	NAME		CP - CONTACT P	ERSON (DO EX DES		VIOLENCE)	ADDRESS	3	CITY ZIP) PHOI	PHONE				
FIREGRM STOLEN/ LOST - DSVD & R&I CRIME PROPERTY ITS	w	RICE, MICHELLE F W DR. LIC. NO. (IF NONE, LIST OTHER ID & NO.) FOREIGN L				ANCI IA	GE SPOKEN	R.	64.4						(210) 285 1620			
		STATE BAR NO. 235189					OE OF OREIN	E-MAIL ADDRE	SAA		CELL				(310) 285-1630 PHONE			
		NAME SEX DESC					DOB	ADDRESS			CITY ZIP				PHONE			
	w	KORY, ROBERT M W DR. LIC, NO. (IF NONE, LIST OTHER ID & NO.) FOREIGN L					SE SPOKEN	R.		<u> </u>				(21)	(210) 205 1622			
		STATE BAR NO. 110750					02 01 0.121	E-MAIL ADDRE	SAA		CELL				(310) 285-1633 PHONE			
\Box		NAME		s	EX DESC	;	DOB	ADDRESS CITY					ZIP	VE				
CHILD ABUSE JUVENILE DIV					LOBERS	ANDIN	TE ODOLON	R-				· ·						
		DR. LIC. NO. (IF NONE, LIST OTHER ID & NO.) FOREIGN L					se spuren	E-MAIL ADDRESS					CELI	L PHONE	HONE			
	c	OMBINED USE THIS SECTION IN LIEU OF PROPERTY					EVID. BKD.	10,10,00 GIVEN		<u>,</u>			VITNESS OFCR. SERIAL NO.					
		VID. RPT.	REPORT IF NO GUN AND NO MORE THAN THREE ITEMS OF EVIDENCE. ARTICLE SERIAL NO JTYPE TEST I			BRAND/DRUG		MODEL NO/D	Drug Test	MISC,		<u> </u>						
	ITE	M QUAN.	OF DRUG				T, UNITS	RESULT		SEALED WHT ENVELOPE								
EXTRA COPIES			ENVELDE	me						ADDRESSED TO VICTS NAME								
			 							HORETZER ID ACT 2 MAINS								
		- ISS	THE FOUL OWING HE	EADINGS TO DOCUMEN	MACHINEORM	ATION REC	AROING THE I	V/FSTIGATION: ADD	ITIONAL PERSONS II	VOLVED (separate	hy hynal: SOLIRI	OF OF ACTIV	/CTY: INVEST	IGATION: API	BEST: INJER	(MEDICA)		
	NAF	INF	DRMATION, NOTE: A	NY OF THESE HEADING!	ICV, BWV, AN	D DIGITAL	MAGING; BOO	KING; EVIDENCE; CA SEE GENERAL RE	NVASSING, ADDITIO PORTING INSTRUCT	NAL; COLLISION 61 ONS- FIELD NOTES	JMMARY, PROPI BOOK DIVIDER, F	ERTY STOLE	EN/LOST/REG	COVERED/DA ESTIGATIVE F	MAGED; AND REPORT-FIEL	COURT D NOTEBOOK		
ZA C	DIMOER, FORM 18:30.01, FOR FURTHER INFO. VICTIM INDEMNIFICATION NUMBER? IS ANY OF THE VICTIM'S PROPERTY MARKED WITH AN OWN INDEMNIFICATION NUMBER?												r	APPLIED				
EX		RMATION (IF		Dayses	2 s	ERIAL NO	D, DI	VISION (DETE	IF YES, EXPLAIN IN NARRATIVE. TES								
		PROVAL AND	the Contract of the Contract o	S-NO	0	SIN	<u> 135</u>	Bard					NU.					
ſ	R	EVIEW	ME & TIME RER	SODUCED (() "	ERK.	DI	VISION	1				CATE	GORY				