

Los Angeles Police Department
INVESTIGATIVE REPORT
 COMBINED EVID. REPORT
 MULTIPLE DR'S ON THIS REPORT

CASE SCREENING FACTOR(S)		REPORT OF: <i>POLICE 21</i>		INVEST DIV. <i>(CCD)</i>	INC #	DR #				
<input checked="" type="checkbox"/> SUSPECT/VEHICLE NOT SEEN <input checked="" type="checkbox"/> PRINTS OR OTHER EVIDENCE NOT PRESENT <input checked="" type="checkbox"/> MO NOT DISTINCT <input checked="" type="checkbox"/> PROPERTY LOSS LESS THAN \$5,000 <input checked="" type="checkbox"/> NO SERIOUS INJURY TO VICTIM <input checked="" type="checkbox"/> ONLY ONE VICTIM INVOLVED		LAST NAME, FIRST, MIDDLE (OR NAME OF BUSINESS) <i>SCHWARTZ, VANESSA MARIE</i> ADDRESS <i>R-12266 CHAMBERS BL A UHWA CA 91607</i> B -		SEX <i>F</i>	DESC <i>W</i>	HT <i>5'09</i>	WT <i>195</i>	AGE <i>30</i>	DOB <i>01/16/1974</i>	
PREMISES (SPECIFIC TYPE) <input type="checkbox"/> ATM				DR. LIC. NO. (IF NONE, OTHER ID & NO.) <i>P4869769 CAL OP</i>		FOREIGN LANGUAGE SPOKEN (IF APPLICABLE) <i>—</i>		OCCUPATION <i>SATURIC PRINTER</i>		
ENTRY 459/BFV POINT OF ENTRY		POINT OF EXIT		LOCATION OF OCCURRENCE		SAME AS V'S <input checked="" type="checkbox"/> RES. <input type="checkbox"/> BUS.		R.D.	PRINTS BY PERL INV. <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
<input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> SIDE <input type="checkbox"/> ROOF <input type="checkbox"/> FLOOR <input type="checkbox"/> OTHER		METHOD		DATE & TIME OF OCCURRENCE <i>11-10-09 / 1220 HRS</i>				DATE & TIME REPORTED TO PD <i>12-29-09 1250 HRS</i>		
		INSTRUMENT/TOOL USED		TYPE PROPERTY STOLEN/LOST/DAMAGED <input type="checkbox"/> 03.04.00 GIVEN		STOLEN/LOST <i>\$ —</i>	RECOVERED <i>\$ —</i>	EST. DAMAGED ARSON/ VAND. <i>\$ —</i>		
VICT'S VEH. (IF INVOLVED) YEAR, MAKE, TYPE, COLOR, LIC. NO. <i>NVI</i>		NOTIFICATION(S) (PERSON & DIVISION)				CONNECTED REPORT(S) (TYPE & DR #)				
MO 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. <i>WIFE SUBJECT RETAINED VICT'S CHECKBOOK. SUBJECT FORWARDED VICT'S NAME TO SEVERAL CHECKS. ALSO CASHED THEM FOR U.S. CURRENCY w/o VICT'S KNOWLEDGE. NO SUSP IS SEEN.</i>										
REPORTING EMPLOYEE(S) <i>RAMIREZ</i>		INITIALS, LAST NAME	SERIAL NO.	DIV./DETAIL <i>35571 15 / DESK</i>	SUSPICIOUS ACTIVITY(SAR) <input type="checkbox"/>	HATE CRIME/INCIDENT <input type="checkbox"/>	DOMESTIC VIOLENCE <input type="checkbox"/>	SIGNATURE <i>Van Shie</i> OR RECEIVED BY PHONE <input type="checkbox"/>		
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 P.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) 485-4193 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 (213) 974-7499.

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

DEPARTAMENTO DE POLICIA
DE LOS ANGELES

MEMORANDUM DE REPORTE PARA VICTIMAS

Su caso será asignado a un detective para continuar la investigación basándose en factores específicos obtenidos durante la investigación inicial. Estudios han demostrado que la presencia de estos factores pueden predecir si una investigación detallada podría resultar en el arresto y prosecución del responsable o la recuperación de la propiedad, de una manera que es menos costosa para ud, el contribuyente. Disminuciones significantes de personal han hecho imposible a los detectives discutir personalmente cada caso con todas las víctimas de crímenes. El detective no lo contactará rutinariamente a menos que requiera información adicional.

PARA REPORTAR INFORMACIÓN ADICIONAL: Si tiene datos específicos que proveer que puedieran asistir en la investigación de su caso, favor de comunicarse con el detective de Lunes a Viernes, entre las 8:00 y 9:30 de la mañana o entre las 2:30 y 4:00 de la tarde al teléfono _____. Si el detective no se encuentra disponible cuando usted llame, favor de dejar un mensaje incluyendo un número de teléfono donde se pueda comunicar con ud.

COPIA DE REPORTE: Si desea comprar una copia del reporte completo, llame al (213) 485-4607 para obtener el precio actual. Remita un cheque o giro postal a Los Angeles Police Department Records and Identification Division, Box 30158, Los Angeles, California 90030. Incluya con su petición una copia de este reporte o la siguiente información: 1) Nombre y domicilio de la víctima(s); 2) Tipo de reporte, y numero de DR, (si está listado en esta forma); 3) Fecha y lugar de los hechos. NOTA: Peticiones no adjuntas al pago apropiado no serán procesadas.

Número DR: Si no aparece en esta forma, el número DR se puede obtener escribiendo a Records and Identification Division dándoles la información necesaria para obtener una copia del reporte (véa el párrafo superior). Especifique que usted quiere el número DR. Será mandado sin tardanzas. No hay cargos por este servicio.

TARJETA DE CREDITO/CHEQUES: Notifique inmediatamente a su compañía de crédito o banco para evitar la posibilidad de hacerse sujeto a que alguien use sus cheques o tarjeta perdida o robada.

COMO PUEDE AYUDAR EN LA INVESTIGACION DE SU CASO

- Mantenga este memorándum como referencia.
- Si los bienes robados tienen número de serie, y no los tenía al llenar el reporte trate de localizarlos y llame al detective al número listado.
- Si describe perdidas adicionales, llene y mande la forma Supplemental Property Loss proveída por el empleado tomando el reporte.
- Reporte la recuperación de bienes de inmediato.
- Reporte detalles adicional de inmediato tal como un vecino informandole de actividad sospechosa en el tiempo en que ocurrió el delito.

PROGRAMA DE ASISTENCIA A VICTIMAS Y TESTIGOS: El programa de asistencia a víctimas y testigos de la ciudad y del condado de Los Angeles (WVAP) puede ayudar a determinar si usted califica para una compensación como víctima de un crimen violento. Si usted califica, le ayudarán a llenar su reclamo. Si usted es víctima o testigo de un crimen y estará asistiendo a la corte, ellos le explicarán el procedimiento de la corte. El personal del programa también le puede ayudar con otros problemas causados por el crimen.

Para encontrar el sitio del programa mas cercano a usted, llame al Programa de Asistencia a Víctimas y Testigos en la oficina del abogado de la Ciudad de Los Angeles (213) 485-6976 o a la oficina del Fiscal del Condado de Los Angeles (213) 974-7499.

COMPENSACION PARA VICTIMAS DE CRIMENES VIOLENTOS: Si usted ha sido víctima de un crimen violento y está herido a causa de ese crimen, usted puede calificar para un reembolso de parte del Estado por gastos médicos: pérdidas de sueldo o de mantenimiento, rehabilitación o reentrenamiento vocacional. Si la herida o la muerte resultó a causa de un accidente automovilístico, usted o su afectado también puede calificar si el chofer culpable fué sometido a uno de los siguientes cargos: conducir bajo la influencia del alcohol o de drogas; chocar y huir; usar el vehículo como arma, o huyendo del sitio de un delito violento.

Si usted pagó los gastos fúnebres de una víctima de un delito violento, puede ser reembolsado hasta \$2,275 por los gastos. El Estado no reembolsará por daños ni pérdidas de propiedad. La ley (Sección 13959 y las siguientes secciones del Código Gubernamental) requiere que la víctima sea residente de California, que reporte el crimen y que coopere con la ley para recibir el reembolso. Usted tiene un año, a partir de la fecha del delito, para hacer su reclamo (este límite se puede extender si hay una causa que lo justifique).

Obtenga una solicitud como víctima de crimen violento llamando al Programa de Asistencia a Víctimas y Testigos: Abogado de la Ciudad (213) 485-6976, Abogado de Distrito (213) 974-7499. También puede encontrar aplicaciones en las estaciones de la policía de Los Angeles.

VICTIMS OF VIOLENT CRIME COMPENSATION: If you are a victim of a violent crime and are injured as a result of the crime, you may be able to be repaid by the State for medical expenses, loss of wages or support, rehabilitation or job retraining. If injury or death was the result of an auto accident, you or your survivor may also qualify if the driver at fault was charged with one of the following: driving under the influence of alcohol or drugs; hit and run; using the vehicle as a weapon; or fleeing the scene of a violent crime.

If you paid the funeral/burial expenses for someone who was a victim of a violent crime, you may be repaid up to \$2,275 for these expenses. Property loss or damage will not be repaid by the State. The law (California Government Code Section 13959 et seq.) requires that a victim must be a California resident, must report the crime, and must cooperate with law enforcement in order to receive repayment. You have one year from the date of the crime to file a claim (may be extended for good cause).

To Obtain a victim of violent crime application, you may call one of these Victim-Witness Assistance Programs: City Attorney - (213) 485-6976, District Attorney - (213) 974-7499. Copies of the application may also be obtained at any Los Angeles police station.

GUARDE ESTE MEMORANDUM PARA REFERENCIA

Coping with Identity Theft
Page 2

CREDIT REPORTING BUREAUS:

EQUIFAX

P.O. Box 740241
Atlanta, GA 30374-0241

To order credit report: (800) 685-1111

To opt out of marketing lists: (888) 567-8688

To report fraud: (888) 766-0008

TRANSUNION

P.O. Box 6790
Fullerton, CA 92834

To order credit report: (800) 916-8800

To opt out of marketing lists: (888) 567-8688

To report fraud: (800) 680-7289

EXPERION

P.O. Box 2104
Allen, TX 75013-2104

To order credit report: (888) 397-3742

To opt out of marketing lists: (888) 567-8688

To report fraud: (888) 397-3742

SOCIAL SECURITY ADMINISTRATION – (800) 269-0271

CHECK VERIFICATION COMPANIES:

Checkrite – (800) 766-2748

Checksystems – (800) 428-9623

Equifax – (800) 437-5120

National Processing Co. – (800) 526-5380

Scan – (800) 262-7771

Telecheck – (800) 710-9898

CONSUMER CREDIT COUNSELING SERVICE – (800) 388-2227

Call for Police Report #
78 hrs

COPING WITH IDENTITY THEFT

You have recently been the victim of Identity Theft. The following tips are offered to assist you in resolving any problems associated with this crime. The names, addresses, and phone numbers of businesses and organizations that you might find useful are listed on the next page.

If you fall prey to such a crime, immediately contact the fraud units of the three credit reporting bureaus and all creditors with whom your name has been used fraudulently.

If you have checks stolen or bank accounts set up fraudulently, report it to the six check verification companies, stop payment on outstanding checks through your bank, cancel your checking and savings accounts, and obtain new account numbers. Give the bank a secret password for your account (not your mother's maiden name).

Write a form letter that can be mailed or faxed whenever you receive an inquiry about fraudulent checks written from your bank account. The letter should give a brief description of what happened, check numbers and check manufacturer (obtained from your bank), bank account number, case number (assigned by the police or law enforcement agency with jurisdiction), the name of the detective handling your case, and the name and phone number of the customer service representative at your bank.

If your ATM card has been stolen or compromised, get a new card, account number, and password.

If someone has submitted a fraudulent change-of-address to the post office to illegally receive credit cards in your name, notify your Postal Inspector, find out where the fraudulent credit cards were sent, and tell the Postmaster for that address to forward all mail in your name to your own address. You may also need to talk to the mail carrier.

If someone else obtains your Social Security number, call the Social Security Administration. As a last resort, the SSA may allow you to change your number. If you have a passport, notify the passport office in writing to be on the lookout for anyone ordering a new passport using your Social Security number.

If your long distance calling card has been stolen, or you find fraudulent charges on your bill, cancel the account immediately and open a new one. Provide a password that must be used any time the account is changed.

If your driver's license number is being misused – to write bad checks for example – contact the Department of Motor Vehicles to see if another license has been issued in your name. If so, put a fraud alert on your license and request a new number immediately.

Los Angeles Police Department
VICTIM'S SUPPLEMENTAL FINANCIAL LOSS REPORT

SHADED AREA FOR POLICE USE ONLY

MAIL COMPLETED REPORT TO: VALLEY FORGERY	TYPE OF CRIME THEFT	RD	DR
STREET ADDRESS 6240 SYLMAR AV	VICTIM (AS ON ORIGINAL REPORT) SCHLATS, YANESSA MARTE	LOCATION OF OCCURRENCE 17366 CHANDLER BC TA	
CITY VAN NUYS	ZIP 91401	DATE OF THIS REPORT 12-28-09	DATE OF ORIGINAL 12-28-09

Instructions: Additional financial losses must be reported on this form.

1. **TYPE OR PRINT LEGIBLY USING BLACK INK.** If more space is required, use a separate sheet of paper.
 2. Enter the date you are making this report, the victim's name and DR Number (if known) in the space provided at the top of this form.
 3. List account number(s), financial institution(s), and amount of loss. Provide name(s) and telephone number(s) of person(s) at financial institutions you have contacted regarding this investigation.
 4. Attach supporting documentation to this report.
 5. ~~Print and sign your name in the space provided in the lower right hand corner and provide a daytime phone number.~~
 6. Mail the original copy of this report to the Detective Division shown above.
 7. Keep a copy of this completed form for your own records.

<u>THIS SECTION TO BE COMPLETED BY DETECTIVE AND RECORDS UNIT</u>					<u>PERSON REPORTING</u>
					PRINT NAME
REPORTING DETECTIVE	SERIAL NO.	DIV.	SUPERVISOR APPROVING	SERIAL NO.	SIGNATURE
DATE/TIME REPRODUCED	DIV.	CLERK			DAYTIME PHONE

(DISTRIBUTION SAME AS ORIGINAL REPORT)

(SEE NEXT PAGE)

03.05.00 (05/06)

VICTIM'S SUPPLEMENTAL FINANCIAL LOSS REPORT

Page 2

In narrative form, continue listing merchants names, account numbers and dollar amounts of loss.