

REPORT ID NUMBER	DR # 18-6879	PROPERTY <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	DATE AND TIME OF INCIDENT 7/21/2018 @ 0132 Hours	DISTRICT 515	DATE AND TIME REPORTED 7/21/2018 @ 0132 Hours
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OFFICER ID / NAME #10108/M. HALL	OFFICER ASSIGNMENT <input type="checkbox"/> P <input type="checkbox"/> T <input checked="" type="checkbox"/> D <input type="checkbox"/> N <input type="checkbox"/> V <input type="checkbox"/> ACO	NCIC CODE / DESCRIPTION Supp / Supplemental Report
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DISPOSITION <input checked="" type="checkbox"/> EXC <input type="checkbox"/> UNF <input type="checkbox"/> ACT <input type="checkbox"/> INACT	LOCATION OF INCIDENT	TYPE OF REPORT <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> OFFICE <input type="checkbox"/> PHONE
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- | | | | | | |
|--|--|--|--|---|---|
| <input type="checkbox"/> NIA
<input type="checkbox"/> DAYTIME
<input type="checkbox"/> NIGHT TIME
<input type="checkbox"/> UNK DAY / NIGHT TIME
<input type="checkbox"/> ATTEMPT ONLY
<input type="checkbox"/> BODILY FORCE
<input type="checkbox"/> BOLT CUTTER
<input type="checkbox"/> BREAKS / CUT LOCK
<input type="checkbox"/> BREAKS WINDOW
<input type="checkbox"/> BRICK / ROCK
<input type="checkbox"/> CHANNEL LOCK
<input type="checkbox"/> DECEPTION / TRICKERY
<input type="checkbox"/> HID IN BUILDING
<input type="checkbox"/> NO FORCE / UNLOCKED
<input type="checkbox"/> PRY TOOL
<input type="checkbox"/> SAW / BURN / DRILL
<input type="checkbox"/> UNK METHOD ENTRY | <input type="checkbox"/> UNK TYPE TOOLS
<input type="checkbox"/> USED KEYS / PICK
<input type="checkbox"/> UNOCCUPIED
<input type="checkbox"/> VACANT
<input type="checkbox"/> VICTIM PRESENT
<input type="checkbox"/> ALARM ACTIVATED
<input type="checkbox"/> ATE / DRANK / SMOKED
<input type="checkbox"/> ATTEMPT ONLY
<input type="checkbox"/> DISABLED ALARM
<input type="checkbox"/> DISABLED PHONE
<input type="checkbox"/> EMBEZZLED
<input type="checkbox"/> FORGED DOCUMENT
<input type="checkbox"/> FRAUD
<input type="checkbox"/> HAD ACCOMPLICE
<input type="checkbox"/> HOT PROWL
<input type="checkbox"/> HOT WIRE / PUNCHED IGNITION
<input type="checkbox"/> MASTURBATED | <input type="checkbox"/> PARTIALLY DISROBED
<input type="checkbox"/> RAN AWAY
<input type="checkbox"/> RANSACKED
<input type="checkbox"/> SHOPLIFT
<input type="checkbox"/> SHUT OFF POWER
<input type="checkbox"/> USED DEMAND NOTE
<input type="checkbox"/> USED PHONE
<input type="checkbox"/> USED VEHICLE
<input type="checkbox"/> USED VICTIM'S TOOLS
<input type="checkbox"/> VANDALIZED
<input type="checkbox"/> DEMANDED MONEY
<input type="checkbox"/> PUT PROPERTY IN BAG
<input type="checkbox"/> SELECTIVE IN LOOT
<input type="checkbox"/> TOOK ONLY CONCEALABLES
<input type="checkbox"/> TOOK ONLY MONEY
<input type="checkbox"/> TOOK ONLY TV / STEREO / VCR / DVD
<input type="checkbox"/> TOOK VICTIM'S VEHICLE | <input type="checkbox"/> SIMULATED / REPLICA WEAPON
<input type="checkbox"/> USED FIREARM
<input type="checkbox"/> USED HANDS / FEET
<input type="checkbox"/> USED KNIFE
<input type="checkbox"/> USED OTHER WEAPON
<input type="checkbox"/> BLINDFOLDED VICTIM
<input type="checkbox"/> BOUND / GAGGED VICTIM
<input type="checkbox"/> INFLICTED INJURY
<input type="checkbox"/> MADE THREATS
<input type="checkbox"/> RIPPED / CUT CLOTHING
<input type="checkbox"/> STRUCK VICTIM
<input type="checkbox"/> THREATENED RETALIATION
<input type="checkbox"/> HAD BEEN DRINKING
<input type="checkbox"/> UNDER INFLUENCE OF DRUGS
OTHER: | <input type="checkbox"/> NIA
<input type="checkbox"/> ALLEY
<input type="checkbox"/> APARTMENT
<input type="checkbox"/> BANK
<input type="checkbox"/> BAR / NIGHT CLUB
<input type="checkbox"/> CARPORT
<input type="checkbox"/> CHURCH
<input type="checkbox"/> COMMERCIAL BUSINESS PARK
<input type="checkbox"/> CONSTRUCTION SITE
<input type="checkbox"/> CONVENIENCE STORE
<input type="checkbox"/> DEPARTMENT STORE
<input type="checkbox"/> DRIVEWAY
<input type="checkbox"/> DUPLEX
<input type="checkbox"/> GARAGE
<input type="checkbox"/> GAS STATION
<input type="checkbox"/> GROCERY STORE
<input type="checkbox"/> JEWELRY STORE
<input type="checkbox"/> LIQUOR STORE
<input type="checkbox"/> LOT / FIELD
<input type="checkbox"/> MEDICAL | <input type="checkbox"/> MOBILE HOME PARK
<input type="checkbox"/> MOTEL / HOTEL
<input type="checkbox"/> OFFICE
<input type="checkbox"/> OUTBUILDING / SHED
<input type="checkbox"/> PARK
<input type="checkbox"/> PARKING LOT
<input type="checkbox"/> RESTAURANT
<input type="checkbox"/> RETAIL STORE
<input type="checkbox"/> SCHOOL
<input type="checkbox"/> SELF STORAGE
<input type="checkbox"/> SHOPPING CENTER
<input type="checkbox"/> SIDEWALK
<input type="checkbox"/> SINGLE FAMILY RESIDENCE
<input type="checkbox"/> STREET
<input type="checkbox"/> THEATER
<input type="checkbox"/> VEHICLE
<input type="checkbox"/> WAREHOUSE
<input type="checkbox"/> YARD
OTHER: |
|--|--|--|--|---|---|

MOTIVE	TYPE OF PROPERTY	DOMESTIC VIOLENCE	NARCOTICS
<input type="checkbox"/> NIA <input type="checkbox"/> 11550 H&S <input type="checkbox"/> ALCOHOL RELATED <input type="checkbox"/> CASH <input type="checkbox"/> CHILD ABUSE <input type="checkbox"/> CREATED <input type="checkbox"/> DOMESTIC VIOLENCE <input type="checkbox"/> DRUG RELATED <input type="checkbox"/> DUI <input type="checkbox"/> ELDER ABUSE <input type="checkbox"/> FIREARMS <input type="checkbox"/> FOOD RELATED <input type="checkbox"/> GANG RELATED <input type="checkbox"/> JEWELRY	<input type="checkbox"/> NIA <input type="checkbox"/> ALCOHOL <input type="checkbox"/> APPLIANCES <input type="checkbox"/> BICYCLE <input type="checkbox"/> BOAT <input type="checkbox"/> CAMERA EQUIPMENT <input type="checkbox"/> CLOTHING / FURS <input type="checkbox"/> CONSUMABLE GOODS <input type="checkbox"/> CREDIT CARDS / CHECKS <input type="checkbox"/> CURRENCY <input type="checkbox"/> DOOR <input type="checkbox"/> FIREARMS <input type="checkbox"/> FURNITURE <input type="checkbox"/> GARDEN EQUIPMENT	<input type="checkbox"/> NIA <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> HAD CHILD TOGETHER <input type="checkbox"/> COHABITATING <input type="checkbox"/> BOYFRIEND / GIRLFRIEND <input type="checkbox"/> TRAUMATIC INJURY <input type="checkbox"/> PROSECUTION DESIRED <input type="checkbox"/> NO PROSECUTION DESIRED INITIALS _____ INITIALS _____ <input type="checkbox"/> COURT ORDER VIOLATED <input type="checkbox"/> TRO SERVED <input type="checkbox"/> PREVIOUSLY RESPONDED OTHER:	<input type="checkbox"/> NIA <input type="checkbox"/> AMPHETAMINES <input type="checkbox"/> COCAINE <input type="checkbox"/> HALLUCINOGENS <input type="checkbox"/> HEROIN <input type="checkbox"/> MARIJUANA <input type="checkbox"/> CULTIVATION <input type="checkbox"/> 11357(b) ONLY <input type="checkbox"/> PCP <input type="checkbox"/> POSSESSION <input type="checkbox"/> POSSESSION FOR SALE <input type="checkbox"/> SYNTHETICS <input type="checkbox"/> TRANSPORT <input type="checkbox"/> UNDER THE INFLUENCE OTHER:

FOR UCR PURPOSES - PLEASE CHECK APPROPRIATE LETTER(S)

HOMICIDE <input type="checkbox"/> NIA <input type="checkbox"/> A - MURDER <input type="checkbox"/> B - NON-NEGLIGENT MANSLAUGHTER <input type="checkbox"/> A - SINGLE VICTIM / SINGLE OFFENDER <input type="checkbox"/> B - SINGLE VICTIM / UNKNOWN OFFENDER(S) <input type="checkbox"/> C - SINGLE VICTIM / MULTIPLE OFFENDERS <input type="checkbox"/> D - MULTIPLE VICTIM / SINGLE OFFENDER <input type="checkbox"/> E - MULTIPLE VICTIM / MULTIPLE OFFENDERS <input type="checkbox"/> F - MULTIPLE VICTIM / UNKNOWN OFFENDER(S)	THEFTS & VEHICLE BURGLARY <input type="checkbox"/> NIA <input type="checkbox"/> A - OVER \$400 <input type="checkbox"/> B - \$201 TO \$400 <input type="checkbox"/> C - \$50 TO \$200 <input type="checkbox"/> D - UNDER \$50 <input type="checkbox"/> A - PICK POCKET <input type="checkbox"/> B - PURSE SHATCHING <input type="checkbox"/> C - SHOPLIFTING <input type="checkbox"/> D - THEFT FROM VEHICLE (EXCEPT B) <input type="checkbox"/> E - THEFT OF VEHICLE PARTS / ACCESSORIES <input type="checkbox"/> F - BICYCLES <input type="checkbox"/> G - FROM BUILDINGS (EXCEPT C & H) <input type="checkbox"/> H - FROM COIN OPERATED MACHINES <input type="checkbox"/> I - ALL OTHERS	BURGLARY <input type="checkbox"/> NIA <input type="checkbox"/> A - FORCIBLE ENTRY <input type="checkbox"/> B - UNLAWFUL ENTRY - NO FORCE <input type="checkbox"/> C - ATTEMPTED FORCIBLE ENTRY <input type="checkbox"/> A - COMMITTED DURING NIGHT (6 PM - 6 AM) - RESIDENCE <input type="checkbox"/> B - COMMITTED DURING DAY (6 AM - 5 PM) - RESIDENCE <input type="checkbox"/> C - UNKNOWN - RESIDENCE <input type="checkbox"/> D - COMMITTED DURING NIGHT (6 PM - 6 AM) - NON-RESIDENCE <input type="checkbox"/> E - COMMITTED DURING DAY (6 AM - 6 PM) - NON-RESIDENCE <input type="checkbox"/> F - UNKNOWN- NON-RESIDENCE	RAPE <input type="checkbox"/> NIA <input type="checkbox"/> A - RAPE BY FORCE <input type="checkbox"/> B - ATTEMPTED RAPE BY FORCE ASSAULT <input type="checkbox"/> NIA <input type="checkbox"/> A - FIREARMS <input type="checkbox"/> B - KNIFE / CUTTING INSTRUMENT <input type="checkbox"/> C - OTHER DANGEROUS WEAPON <input type="checkbox"/> D - STRONG ARM (HANDS / FISTS / FEET / ETC) <input type="checkbox"/> E - OTHER ASSAULTS (SIMPLE, NOT AGGRAVATED)
ROBBERY <input type="checkbox"/> NIA <input type="checkbox"/> A - FIREARMS <input type="checkbox"/> B - KNIFE / CUTTING INSTRUMENT <input type="checkbox"/> C - OTHER DANGEROUS WEAPON <input type="checkbox"/> D - STRONG ARM (HANDS / FISTS / FEET / ETC) <input type="checkbox"/> A - HIGHWAY <input type="checkbox"/> B - COMMERCIAL HOUSE <input type="checkbox"/> C - GAS / SERVICE STATION <input type="checkbox"/> D - CONVENIENCE STORE <input type="checkbox"/> E - RESIDENCE <input type="checkbox"/> F - BANK <input type="checkbox"/> G - MISCELLANEOUS		CASE INVOLVES DOMESTIC VIOLENCE <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> OTHER ASSAULTS <input type="checkbox"/> FIREARM <input type="checkbox"/> KNIFE <input type="checkbox"/> OTHER WEAPONS <input type="checkbox"/> STRONG	
ALL VICTIM TESTIFY? <input type="checkbox"/> YES <input type="checkbox"/> NO NEIGHBORHOOD CHECKED? <input type="checkbox"/> YES <input type="checkbox"/> NO		VICTIM IS A SENIOR CITIZEN (60+) <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> HOMICIDE <input type="checkbox"/> RAPE <input type="checkbox"/> ROBBERY <input type="checkbox"/> AGGRAVATED ASSAULT	

REVIEWED BY <i>[Signature]</i>	ID# 10108	DATE: 7-23-18	COMPUTER APPROVED BY
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CODE	NAME (LAST, FIRST, MIDDLE)	RESIDENCE ADDRESS				RESIDENCE PHONE
W						
VICTIM CRIME CODE	RACE	SEX	AGE	DOB	BUSINESS / SCHOOL ADDRESS	BUSINESS PHONE
CODE	NAME (LAST, FIRST, MIDDLE)	RESIDENCE ADDRESS				RESIDENCE PHONE
VICTIM CRIME CODE	RACE	SEX	AGE	DOB	BUSINESS / SCHOOL ADDRESS	BUSINESS PHONE
CODE	NAME (LAST, FIRST, MIDDLE)	RESIDENCE ADDRESS				RESIDENCE PHONE
VICTIM CRIME CODE	RACE	SEX	AGE	DOB	BUSINESS / SCHOOL ADDRESS	BUSINESS PHONE
CODE	NAME (LAST, FIRST, MIDDLE)	RESIDENCE ADDRESS				RESIDENCE PHONE
VICTIM CRIME CODE	RACE	SEX	AGE	DOB	BUSINESS / SCHOOL ADDRESS	BUSINESS PHONE

VIC VEH YEAR	MAKE	MODEL	COLOR(S)	LICENSE NUMBER	STATE	VIN / MISC
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SUSPECT INFORMATION S = SUSPECT A = ADULT SUSPECT ARRESTED J = JUVENILE SUSPECT ARRESTED

CODE	NAME (LAST, FIRST, MIDDLE)	RACE	SEX	AGE	DOB	HEIGHT	WEIGHT	HAIR	EYES	
S1	Levario, Arthur									
NICKNAME / AKA	ADDRESS					PHONE	ID <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> UNK BY			
	(Previously Listed)									
BOOKING #	MISCELLANEOUS									
FATHER	ADDRESS			MOTHER			ADDRESS			TIME LIVED IN: CITY OF HEMET __ COUNTY OF RIVERSIDE __ STATE OF CALIFORNIA __
WHERE BORN	PARENT'S MARITAL STATUS		GRADE	LIVES WITH						

CODE	NAME (LAST, FIRST, MIDDLE)	RACE	SEX	AGE	DOB	HEIGHT	WEIGHT	HAIR	EYES	
NICKNAME / AKA	ADDRESS					PHONE	ID <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> UNK BY			
BOOKING #	MISCELLANEOUS									
FATHER	ADDRESS			MOTHER			ADDRESS			TIME LIVED IN: CITY OF HEMET __ COUNTY OF RIVERSIDE __ STATE OF CALIFORNIA __
WHERE BORN	PARENT'S MARITAL STATUS		GRADE	LIVES WITH						
SUSP VEH YEAR	MAKE	MODEL	COLOR(S)	LICENSE NUMBER	STATE	VIN / MISC				

SUSPECT DISPOSITION

IN CUSTODY / TRANSPORTED TO RSO
 CITE RELEASED / CITATION #
 RELEASED PER 849(b)
 BAIL POSTED
 DETAIN JUVENILE HALL
 RELEASED TO TIME
 PETITION FILED

Status: D=Damaged L=Lost F=Found E=Evidence S=Stolen R=Recovered B=Both stolen & recovered K=Safekeeping 1=None (info only) 2=Burned 3=Counterfeit/forged 6=Seized
 Category: A=Currency B=Jewelry C=Clothing D=Computer Disk E=Office Equip F=TV, Radio, Cameras G=Firearms H=Household Goods I=Consumable Goods J=Livestock K=Misc. S=Sample blood/urine

STATUS	CATEGORY	QTY	ARTICLE	DESCRIPTION	OWNER CODE	VALUE
E	K	1	BWC	Interview w/ [REDACTED]	HPD	-

*****See attached narrative*****

HEMET POLICE DEPARTMENT

SUPPLEMENTAL REPORT

DR# 18-6879

PAGE: 3

DATE: 7/20/2018

1
2 On 7/20/2018 at approximately 0132 hours, I assisted Detective Gomez with a search warrant of 2095
3 Calle Diablo and 2095 Calle Diablo Ave, within the city limits of Hemet CA. This search warrant was
4 signed and authorized by the Honorable Judge E. Smith, after Arthur Levario shot multiple rounds at
5 Hemet Police Officers during a vehicle pursuit that terminated in the city of Riverside CA.

6
7 After the search of 2095 Calle Diablo, I briefly spoke with [REDACTED] [REDACTED] said about a week
8 prior, he observed Arthur Levario manipulating a black semi-automatic handgun within the residence of
9 2095 Calle Diablo. [REDACTED] told me during this time, a round got stuck in the chamber of the handgun
10 and he [REDACTED] assisted Levario in removing this round from the handgun. [REDACTED] said Levario was
11 in the east bedroom (converted patio) when he saw Levario with this handgun. [REDACTED] told me Levario
12 most likely obtained the handgun from one of his cousins in Riverside CA, but did not know for sure if it
13 was stolen.

14
15 This contact with [REDACTED] was recorded on my body worn camera. I later downloaded this video footage
16 onto the Viewu server.

17
18 I had no further involvement with this investigation. This supplemental report will be forwarded to
19 Detective M. Gomez.

CPL. HALL #10108

REVIEWED BY: 

DATE: 7/20/2018

RIVERSIDE POLICE DEPT - Restricted Information Request
Public Records Act Request
JPEDROZA 5/6/2020 12:37 PM Unauthorized Release Prohibited