

SUPPLEMENTAL REPORT

Date Prepared: 02-18-12

1. Original File No. P12-024811		2. [Redacted]	3. Off. ID 581	4. NPC W	5. Crime-Ct.	6. Crime-Ct.	7. Crime-Ct.	8. Date / Time Occurred 02-18-12 / 1447	9. Day 7		
10. Date / Time Assigned 3-12 / 1552		11. Date / Time Inv. Start /		12. Date / Time Inv. Term. /		13. Type Clr.		14. Type Cont.	15. Additional Adults Arr. 0	16. Additional Juv. Arr. 0	
17. Address of Occurrence (Street No. - Name - City - Zip) 5652 HAROLD AVE.								18. Type of Place PUBLIC SIDEWALK			
For ID USE: V = Victim, I = Informant, W = Witness, O = Other											
19. ID:	20. Last Name - First - Middle (Firm Name if Business)							21. Race - Sex	22. DOB		
23. Residence Address				24. Business or School Address				25. Home Phone	26. Bus. Phone		
27. ID:	28. Last Name - First - Middle (Firm Name if Business)							29. Race - Sex	30. DOB		
31. Residence Address				32. Business or School Address				33. Home Phone	34. Bus. Phone		
S U S P E C T	35. Last Name - First - Middle			36. Race - Sex	37. Age	38. Ht.	39. Wt.	40. Hr.	41. Eyes	42. DOB or ID	43. Arrested Yes <input type="checkbox"/> No <input type="checkbox"/>
	44. Address - Clothing - Other Marks or Identifying Characteristics										
45. Juv. Other () 2		Juv. Ct. () 5		Within Dept. () 6		Detained () 1		Not Detained () 2			
S U S P E C T	46. Last Name - First - Middle			47. Race - Sex	48. Age	49. Ht.	50. Wt.	51. Hr.	52. Eyes	53. DOB or ID	54. Arrested Yes <input type="checkbox"/> No <input type="checkbox"/>
	55. Address - Clothing - Other Marks or Identifying Characteristics										
56. Juv. Other () 2		Juv. Ct. () 5		Within Dept. () 6		Detained () 1		Not Detained () 2			

ORIGINALLY REPORTED DOLLAR VALUES ARE CHANGED AS SHOWN BELOW

Cat.	A Currency Notes	B Jewelry Prec. Met.	C Clothing Furs	E Office Equip.	F T.V. - Radio Cameras	G Firearms	H Household Goods	I Consum. Goods	J Livestock	K Misc.
PS	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
PR	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
60. Originally Reported Offenses (Code - Crime)					61. Original Offenses Changed to (Code - Crime)					58. Stolen Auto Value ASP:
(1) 245(A)(1)PC Assault with deadly weapon.					(1)					59. Recovered Auto Value A2
(2)					(2)					Reporting Officer G. ILI
62. Narrative of Supplemental Report					62a. Audio Recording Available? No					Reviewed By <i>[Signature]</i>
NARRATIVE:					62b. Incident Number:					COPIES TO
I was assisting Ofc. C. Reeves on a traffic collision investigation in the area of Main St./ Garner St.										
At about 1447hrs., I heard over the police radio of an Officer involved shooting just occurred in the area of Harold St./ Philbin Ave. I responded to the area to assist in the investigation. I was assigned to block traffic at the intersection of Harold St./ Gramercy Pl.										
About 2130hrs. the scene was unsecured. See initial report for disposition.										
Nothing further										
VCLD ()										
ACTIONS										
APB Sent										
APB Cancld.										
APR Sent										
APR Cancld.										
Entered DOJ - NCIC										
Cancld.										
ENTERED										
STATS ARBK ANI										

DATE OF SERVICE 2/18/12



CRIME SCENE
STERI CLEAN

Steri-Clean
"Restoring Homes and Lives"™
Serving all of California
(888) 577-7206
Trauma Scene Waste License #010

Enroute Job 7:30 am/pm
Arrive Job 8:00 am/pm
Depart Job _____ am/pm
Arrive Office _____ am/pm
Standby Hours _____ am/pm

BIOHAZARD

JOB LOCATION: Harold & Garmony Riverside, CA

Techs: Brandon, Kaseg Filled Out By Brandon

Scene Description Officer involved shooting, blood on sidewalk & grass approximately 5' x 4' affected area victim Decedent, IUC # 120248

Estimated Cost _____

SUPPLIES 4/RO2 orange st QTY SUPPLIES QTY LABOR (2 hour minimum) QTY

Absorbent		Biohazard Bags	
Fogging Solution - Odor Removal		Trash Bags (Contractor Grade)	
Tear Gas Neutralizer		Rags - High Performance Cotton	
Disinfectant - EPA Registered		Scrapers	
Blood Illuminator		Scrubbers	
Primer/Sealer - Spray Can		Wire Brush	
Primer/Sealer- Gallon		Carpet Utility Knife with Refill Blades	
Paint Roller and Tray		PPE - Gloves, Mask, Coveralls, etc.	
Plastic Sheeting/Tarps		Filter - Organic for Respirator	
Vacuum Bags		Filter - Tear Gas (EN141)	
Vacuum - Hepa Filter		Digital Photos	
Versa-Vac Vacuum Bags			

Supervising Technician	
Technician	
After Hours/Overtime/Holiday	<u>2</u>
Drive Time	<u>1</u>
Ozone # _____ pick up by	

VEHICLES	QTY
Box Van, Unit # _____	
Roadway Truck	<u>1</u>
Van, Unit # _____	
Mileage	
Toll Road/Parking Fees	

EQUIPMENT EQUIPMENT

Carpet Extractor		Shop Vac - Commercial	
Steam (Vapor) Cleaner		Versa-Vac Insulation Removal Vacuum	
Fogger		Reciprocating Saw	
Generator (7,000 Watt)	<u>1</u>	Circular Saw	
Gasoline (for equipment)	<u>1</u>	Drill	
Pressure Washer		Electric Tool - Other	
Vacuum Recovery System - Biohazard	<u>1</u>	Ozone Generator - Per 24 Hour period	
Surface Cleaner			

DISPOSAL	QTY
44 Gallon biohazard	<u>1</u>
Liquid (In Gallons) biohazard	
Sharps	
Medications	
Regular Waste Disposal - small	

Payment Received \$ _____
Method Cash Check Charge

Services Performed using Roadway truck vacuum Recovery System removed all blood from sidewalk.

By signing below, I accept financial responsibility for services provided by Crime Scene Steri-Clean, LLC and associates and any subcontractors. Payments are due within 30 days of services rendered. Insurance payments paid to the insured, for services rendered by Crime Scene Steri-Clean, LLC must be forwarded immediately upon receipt. Deductibles are the responsibility of the homeowner/Executor of the Estate/or next of kin. After 30 Days, past due or unpaid balances are subject to the following: Interest Fees, Collection/Service Fees, and Property Liens.

DIRECT PAY INSURANCE AUTHORIZATION - I hereby authorize my insurance company to issue payment directly to Crime Scene Steri-Clean, LLC for the work performed in regards to this claim as outlined above.

SIGN _____ PRINT _____ DATE _____

I have read and agree to the payment and terms and hereby authorize all work as specified.
SIGN [Signature] PRINT SGT. DAVID AMADOR DATE 2-18-12

All work was provided as stated and is completed to my satisfaction. Return trips may result in additional charges.
SIGN [Signature] PRINT OFC. G. ILI DATE 02/18/12