

CA0331300

Riverside Police Department Initial Report

1. Dist.		2. Type Clr.		3. Type Cont						4. File Number P13133894		
5. Code Section/Classification 245 (C) P.C. on a Police Officer						6. Add Charges <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			7. Location of Occurrence 2395 10 th St., Riverside			
8. Julian date and time of occurrence 09-13-13 2120				9. Day 6	10. Date/Time Reported 09-13-2013/2108		11. Date of Report 09-13-2013	12. Type of Premises residential yard				
13. Victim Name or Firm Name						14. Residence Address			15. Res. Phone ()			
16. Sex/Race		Height	Weight	Hair	Eyes	17. DOB		18. Business Address		19. Bus. Phone ()		
20. If treated for injuries, by whom?				21. If hospitalized, where?			22. Date/Time		23. Nature of Injuries			
24. Vict. Veh.		License Number		State	Color (Top/Bottom)		Year	Make/Model/Type		How was the vehicle involved?	Veh. Stored? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
25. WILL THE VICTIM PROSECUTE?										<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
FOR CODE USE V- Victim DC- Discovered Crime RP- Reporting Party P- Parent O- Other												
Code O-1	26. Name (Last, First Middle) Jimenez, Hector					27. Residence Address 2395 10 th St., Riverside				28. Res. Phone ()		
29. Sex/Race H/M	Height 5'6"	Weight 220	Hair gry	Eyes hzl	30. DOB 05-11-63		31. Business Address			32. Bus. Phone ()		
33. If treated for injuries, by whom? n/a				34. If hospitalized, where? n/a			35. Date/Time n/a		36. Nature of Injuries deceased			
37. WAS THERE A WITNESS TO THE CRIME?										<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
38. Pursuant to California Penal Code Section 293 (a), you are informed that your name will be a matter of public record unless you request that it not become a Public Record, pursuant to Section 6254 of the Government Code. Do you elect to exercise your right to privacy? QUALIFYING SECTIONS ONLY!						Victim #1 (Yes) _____ (No) _____			Victim #2 (Yes) _____ (No) _____			
39. CAN A SUSPECT BE NAMED OR IDENTIFIED? BY WHOM?										<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
40. Name (Arrestee #1)				Sex/Race	Height	Weight	Hair	Eyes	DOB or Age	Interviewed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Cited? Bkd? <input type="checkbox"/> <input type="checkbox"/>	
Address of Arrestee #1				Prob Parole <input type="checkbox"/> <input type="checkbox"/>	Gang Related <input type="checkbox"/> Yes <input type="checkbox"/> No		SS # CDL #		Bkg. Or Cite number			
41. Name (Arrestee #2)				Sex/Race	Height	Weight	Hair	Eyes	DOB or Age	Interviewed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Cited? Bkd? <input type="checkbox"/> <input type="checkbox"/>	
Address of Arrestee #2				Prob Parole <input type="checkbox"/> <input type="checkbox"/>	Gang Related <input type="checkbox"/> Yes <input type="checkbox"/> No		SS # CDL #		Bkg. Or Cite number			
42. CAN A SUSPECT VEHICLE BE IDENTIFIED? BY WHOM?										<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
43. Susp Veh		License Number		State	Color (Top/Bottom)		Year	Make/Model/Type		Identifying Characteristics	Veh Stored? <input type="checkbox"/> Yes <input type="checkbox"/> No	
44. IS THERE ANY SIGNIFICANT PHYSICAL EVIDENCE?										<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
45. Physical Evidence Present? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				46. Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				47. Supp/related Reports? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
48. Physical Evidence Seized? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				49. Weapon Seized? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				50. Gang Related? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
51. Fingerprint Search Made? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				52. Fingerprints Obtained? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				53. Narcotics Field Tested? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
54. Type of Weapon, Force or Device Used knife				55. Motive suicide by cop				Type: Weight:				
56. Describe briefly how the offense occurred. RPD Officers were dispatched to 2395 10 th Street at 2108 hours in reference to a suicidal subject cutting himself with a knife. Upon arrival officers made contact with O-1 Jimenez who was uncooperative and wouldn't comply with commands to drop the knife. When O-1 Jimenez became aggressive and moved towards the officers with the knife he was shot and killed. See supplemental reports for more details.												
RECORDS SECTION												
57. Reporting Officer Det. R. Sanfilippo			I.D. # 496	115 Qualify <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	58. Supervisor Approving <i>[Signature]</i>			I.D. # 1074	59. Date Reviewed 9/18/13		60. Send copies of this report to:	
Copies					INV <input type="checkbox"/>	RMC <input type="checkbox"/>	DPS <input type="checkbox"/>	COR <input type="checkbox"/>	FBI <input type="checkbox"/>	DOJ <input type="checkbox"/>	DA <input type="checkbox"/>	PROB <input type="checkbox"/>
					ENTERED	STATS	ARBK	ANI	Dispatcher ID #	APR/ARB sent	Cancelled	Page 1 of 1
									DQJNCC sent	Cancelled		

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