

COPIES TO: <input type="checkbox"/> DA <input type="checkbox"/> INV <input type="checkbox"/> PATROL <input type="checkbox"/> PROB <input checked="" type="checkbox"/> OTHER: 1) Detective Larry Duffield of the Northern California Computer Crimes Task Force 2) Solano Community College Sheriff's Department		SOLANO COUNTY SHERIFF'S OFFICE 530 UNION AVENUE, SUITE 100 FAIRFIELD, CA. 94533 (707) 421-7000 CA04800 CRIME REPORT				CASE NO. CR16-2293 SCC16-019 REP DEV CODE		PAGE 1 RD 248				
CHARGE(S) 530.5(a)PC (Identity Theft)						DATE RPT'D 042816		TIME RPT'D 1347				
LOCATION Inside Building #600, Fiscal Department				OCCURRED ON OR BETWEEN		DATE 042816		DAY Thursday				
ADDRESS 4000 Suisun Valley Road				CITY Fairfield		DATE		TIME				
VICTIM - NAME (Last, First Middle) Solano Community College District				SEX	RACE	DOB / AGE	HGT	WGT	HAIR			
RESIDENCE ADDRESS 4000 Suisun Valley Road				CITY Fairfield		STATE		RES. PHONE () -				
BUSINESS ADDRESS				CITY		STATE		BUS. PHONE (707) 864-7000				
EXTENT OF INJURIES / DOLLAR LOSS TO TARGET						ST / DL#						
CODE R	NAME (Last, First Middle)			SEX	RACE	DOB / AGE	HGT	WGT	HAIR			
RESIDENCE ADDRESS				CITY		STATE		RES. PHONE () -				
BUSINESS NAME AND ADDRESS Solano Community College District, 4000 Suisun Valley Road				CITY Fairfield		STATE CA		BUS. PHONE				
CODE W-1	NAME (Last, First Middle)			SEX	RACE	DOB / AGE	HGT	WGT	HAIR			
RESIDENCE ADDRESS				CITY		STATE		RES. PHONE () -				
BUSINESS NAME AND ADDRESS Solano Community College District, 4000 Suisun Valley Road				CITY Fairfield		STATE CA		BUS. PHONE				
CODE W-2	NAME (Last, First Middle)			SEX	RACE	DOB / AGE	HGT	WGT	HAIR			
RESIDENCE ADDRESS				CITY		STATE		RES. PHONE () -				
BUSINESS NAME AND ADDRESS Solano Community College District, 4000 Suisun Valley Road				CITY Fairfield		STATE CA		BUS. PHONE				
CODE W-3	NAME (Last, First Middle)			SEX	RACE	DOB / AGE	HGT	WGT	HAIR			
RESIDENCE ADDRESS				CITY		STATE		RES. PHONE () -				
BUSINESS NAME AND ADDRESS Solano Community College District, 4000 Suisun Valley Road				CITY Fairfield		STATE CA		BUS. PHONE				
VICTIMS VEH.	LICENSE #	STATE	YEAR	MAKE	MODEL			BODY STYLE				
	N/A											
COLOR / COLOR		OTHER CHARACTERISTICS (i.e. Damage, Unique marks, Paint)				DISPOSITION OF VEHICLE						
FACTORS	<input checked="" type="checkbox"/> 1 THERE IS A WITNESS <input type="checkbox"/> 2 SUSPECT ARRESTED <input type="checkbox"/> 3 SUSPECT NAMED <input type="checkbox"/> 4 SUSPECT CAN BE LOCATED <input type="checkbox"/> 5 SUSPECT CAN BE DESCRIBED <input type="checkbox"/> 6 SUSPECT CAN BE ID'D <input type="checkbox"/> 7 SUSPECT VEHICLE CAN BE ID'D <input type="checkbox"/> 8 STOLEN PROPERTY CAN BE ID'D <input checked="" type="checkbox"/> 9 THERE IS SIGNIFICANT M.O. <input type="checkbox"/> 10 SIGNIFICANT PHYSICAL EVIDENCE PRESENT <input type="checkbox"/> 11 THERE IS MAJOR INJURY/SEX CRIME <input type="checkbox"/> 12 THERE IS A GOOD POSSIBILITY OF SOLUTION <input checked="" type="checkbox"/> 13 FURTHER INVESTIGATION IS NEEDED <input type="checkbox"/> 14 CRIME IS GANG RELATED <input type="checkbox"/> 15 HATE CRIME RELATED				<input type="checkbox"/> 0 NONE <input type="checkbox"/> 1 FINGERPRINTS <input type="checkbox"/> 2 TOOLS <input type="checkbox"/> 3 TOOL MARKS <input type="checkbox"/> 4 GLASS <input type="checkbox"/> 5 PAINT <input type="checkbox"/> 6 BULLET CASING <input type="checkbox"/> 7 BULLET PROJECTILE <input type="checkbox"/> 8 RAPE KIT <input type="checkbox"/> 9 SEMEN <input type="checkbox"/> 10 BLOOD <input type="checkbox"/> 11 URINE <input type="checkbox"/> 12 HAIR <input type="checkbox"/> 13 FIREARM(S) <input type="checkbox"/> 14 PHOTOS <input checked="" type="checkbox"/> 15 BREATH <input type="checkbox"/> 16 OTHER Documents				<input type="checkbox"/> A-ACTIVE <input type="checkbox"/> S-SUSPENDED <input type="checkbox"/> R-RECORDS <input type="checkbox"/> C-CLOSED <input type="checkbox"/> K-COURTESY <input type="checkbox"/> U-UNFOUNDED <input type="checkbox"/> P-PENDING <input checked="" type="checkbox"/> F-FOLLOW-UP REQUIRED <input type="checkbox"/> A-OTHER ASIAN <input type="checkbox"/> B-BLACK <input type="checkbox"/> C-CHINESE <input type="checkbox"/> D-CAMBODIAN <input type="checkbox"/> F-FILIPINO <input type="checkbox"/> G-GUAMANIAN <input type="checkbox"/> H-HISPANIC <input type="checkbox"/> I-AMERICAN INDIAN <input type="checkbox"/> J-JAPANESE <input type="checkbox"/> K-KOREAN <input type="checkbox"/> L-LOATIAN <input type="checkbox"/> O-OTHER <input type="checkbox"/> P-PACIFIC ISLANDER <input type="checkbox"/> S-SAMON <input type="checkbox"/> U-HAWAIIAN <input type="checkbox"/> V-VIETNAMESE <input type="checkbox"/> W-WHITE <input type="checkbox"/> X-UNKNOWN <input type="checkbox"/> Z-ASIAN INDIAN			
	SIGNATURE <i>EMC</i>		DATE 042916		ID# IAS							
REPORTING DEPUTY / ID# A. GARCIA 123		DATE 042916		REVIEWED BY / ID# EMC IAS		DATE 042916		CSI PERFORMED BY				
SUPERVISOR AT SCENE N/A		FORMS ATTACHED <input checked="" type="checkbox"/> PROPERTY <input type="checkbox"/> ADD'L NAMES <input type="checkbox"/> ARREST		<input type="checkbox"/> VEHICLE <input type="checkbox"/> ACCIDENT <input checked="" type="checkbox"/> NARRATIVE		<input type="checkbox"/> CITATION <input type="checkbox"/> CHP 180 <input type="checkbox"/> CHP 202		<input type="checkbox"/> SUSPECT <input type="checkbox"/> CRIME SCENE <input type="checkbox"/> Other				
ADVISED RE: GC 13968c		ENTERED RMS BY										

**CONTROLLED DOCUMENT
DO NOT DUPLICATE**

By Hay Date 4/29/16
To Pres. Esposito - Nay

**SOLANO COUNTY
SHERIFF'S OFFICE**

CRIME REPORT

CASE NO.
CR16-2293
SCC16-019

PAGE
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PREMISES 8		VEHICLE ENTRY 11		PHYSICAL SECURITY 16	
<input type="checkbox"/> BUSINESS: N/A <input type="checkbox"/> RESIDENCE: N/A <input checked="" type="checkbox"/> PUBLIC: 42 SCHOOL <input type="checkbox"/> VEHICLE: N/A		<input checked="" type="checkbox"/> N/A PROPERTY ATTACKED 12 <input checked="" type="checkbox"/> 10 MISCELLANEOUS SEX CRIMES ONLY 13 <input checked="" type="checkbox"/> N/A BURGLARY ONLY 14 MEMBER OF NEIGHBORHOOD WATCH <input type="checkbox"/> NO MEMBER OF OPERATION IDENTIFY <input type="checkbox"/> NO INTERESTED IN NEIGH. WATCH <input type="checkbox"/> NO HAD HOME/BUSINESS INSPECTION <input type="checkbox"/> NO WHEN? UNKNOWN		<input checked="" type="checkbox"/> N/A VICTIM PROFILE 17 PHYSICAL CONDITION Q13 <input checked="" type="checkbox"/> N/A RELATIONSHIP TO SUSPECT Q14 <input checked="" type="checkbox"/> UNKNOWN MARITAL STATUS Q15 <input checked="" type="checkbox"/> N/A	
POINT OF ENTRY 9		TRADEMARKS 15			
<input checked="" type="checkbox"/> N/A		SUSPECTS ACTIONS Q10 <input checked="" type="checkbox"/> 22 SELECTIVE IN LOOT <input type="checkbox"/> N/A <input type="checkbox"/> N/A <input type="checkbox"/> N/A <input type="checkbox"/> N/A <input type="checkbox"/> N/A			
METHOD OF ENTRY 10		SUSPECT PRETENDED TO BE Q11			
<input checked="" type="checkbox"/> N/A		<input checked="" type="checkbox"/> 6 EMPLOYEE/EMPLOYER			

Reporting Deputy/ID# A.GARCIA 1L23	Date 042916	Reviewed by/ID# EMIL 1AS	Date 042916
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