Los Angeles County Sheriff's Department Officer Involved Shooting

Page 1 of 4

Report Date: 07/08/20	Bureau/Station/Facility:	Services Division	on/TTCF		Admin. Invest.	Hit? 🗸
	- 1, 7700000 TO 1000000000000000000000000000000	Incident Informat	ACT PROTOCOLOR	777		
URN: 018-0	0017-3199-057	324500 ARRESTS 25.00	larch 6, 2	2018	Time:	0336
City or Station: Lake Els	sinore, Riverside County	Nature of Incident:	all was in	valvad in	a hit abaating	whon ho
Location:	k Road / Edgewood Drive	Deputy Campb attempted to de was on his way	etain vehic	cle burgla	ry suspects. D	eputy Campbell
Location Type (check one or more): Backyard Beach Business Freeway Industrial Park Parking Lot Residence Rural School Street Other:	Lighting (check only one): Darkness Daylight Other Street Lights Weather (circle only one): Clear Cloudy Fog Rain Distance: 3 Feet	Incident Type (check	one or more		nitiated by (check of Arrest Warrant Call Observation One Person Unit Other Search Warrant Two Person Unit Prior Activity (check Inmate Transpor Other Routine Patrol	t only one):
Total # of Shots Fired by Deputy	Total # of Shots Fired by Suspect 0	Warning Shot Other:			Aero Unit?	Canine Unit?
		Employee Witnes	ses	7	7 T	
		Name Name		niftTime (check BM PM niftTime (check	Day Regula	e (check only one): ar Overtime Off Duty e (check only one):
] EM [PM	Day Regul	ar Overtime Off Duty
Employee # Last	Name First	Name	M.I. Sh	niftTime (check		e (check only one): ar Overtime Off Duty
	No.	n-Employee Witn	THE Y YEAR IN		1 Steeners	M.I.
Last Name			First Nam			Home Ph
Street Address	City		Zip Code		k Ph	
Last Name			First Nam			M.I.
Street Address	City		Zip Code	Wor	k Ph	Home Ph
Last Name			First Nam	ne		M.I.
Street Address	City		Zip Code	War	k Ph	Home Ph
	SA LA	Supervisors				
Employee # Last Name	First Na	nme	M.I. (c	heck one or in the original in t	more): ring shooting	Witness to shooting
Employee # Last Name	First Na			heck one or i		Witness to shooting Involved in shooting
Employee# Last N	Name	Watch Sergear	THE CALSE OF THE PROPERTY OF THE PARTY OF TH	Name		M.I.
	Castillo		a. o. majibajahati -		Armando	
ATTECH STATE	A STATE OF THE STA	Watch Command	The State of the S	News		
Employee # Last N	Pittack		First	Name	David	M.I.

PSTD Use Only
SH # _____2450197

2 of

	Negative Control			Rollout Informa	tion				ist 13	
Arrival Date	03/06/18	rival Time	0800	Date Submitted	07/08/	20	Date of Recommendation			
Employee #	Last Name		Arella	ano	Fi	rst Name	Thomas		M.I.	М
Employee #	Last Name		Alva	rez	Fi	rst Name	Irys		M.I.	D
Employee #	Last Name		Burs	se	Fi	rst Name	Michael		M.I.	Α
			Shoot	ting / Force Int	ormati	on		18612	her K	
Method						Туре	of Injury	Body	Part In	jured
(TT) Control II (TD) Control II (CE) Chemica (OC) Chemica (TG) Chemica (EX) Explosivi (FH) Firearm (FR) Firearm (FS) Firearm (FO) Firearm (FB) Flashbar (FL) Flashligh	mpact) luids Restraint lold Holds:(Control Technique: Holds:(Team Takedown) Holds:(Takedown) al al Agents (OC Spray) al Agents (Tear Gas) es (Handgun) (Rifle) (Shotgun) (Other)	(OV) (OB) (OO) (PK) (PS) (PH) (PP) (PP) (RS) (CN) (RH) (HB) (TP) (SP) (SP) (SB) (SB) (SB) (ST) (TR) (UC)	Other Weapon Personal We Personal We Personal We Personal We Resistance Restraint Der	on: Blunt Object on: Other apon: Feet/Leg: (Kick apon: Feet/Leg: (Swe apon (Hand/Arm) apon (Push) apon (Other) vice (Capture Net) vice (Handcuffs) vice: Hobble (Legs On vice: Hobble (TARP) vice: REACT Belt	eep)	(AB) (BR) (BU) (CP) (CO) (DH) (DB) (FR) (GS) (HB) (LC) (ND) (OD) (PW) (SD) (ST) (UN)	Abrasion Bruise Burn Complaint of Pain Concussion Death Dislocation Dog Bite Fractures Gunshot Human Bite Lacerations Nerve Damage Organ Damage Paralysis Puncture Wound Soft Tissue Damage Sprain/Twists Unconscious	(AK) (AR) (BK) (EL) (FE) (GR) (HE) (KS) (LX) (LX) (LX) (LX) (LX) (LX) (LX) (LX	Abdom Ankle Arm Back Chest Elbow Face Feet Fingers Genital Groin Hand Head Hip Internal Knees Leg Neck	s

(RM)

(NN)

NONE

(OL)	Other Weapon, Eaged		(00) 011	cooperativ	6
Bran	d	(IV)	Iver Johnson	(RO)	Rossi
(AK)	AK-47	(JE)	Jennings	(SW)	Smith & Wesson
(BN)	Benelli	(LO)	Lorcin	(SR)	Sturm Ruger
(BR)	Beretta	(LU)	Luger	(SS)	SIG Sauer
(BW)	Browning	(MA)	Marlin	(ST)	Sterling
(CH)	Charter Arms	(MO)	Mossberg	(TA)	Taurus
(CO)	Colt	(NC)	NCI aka SKS	(WÉ)	Weatherby
(DA)	Davis Industries	(NA)	North American	(WN)	Winchester
(GL)	Glock	(NO)	Norinco	(US)	US Government
(HA)	Harrington & Richardson	(RA)	Raven	(YY)	Handmade (Inmate)
(HI)	Hi Standard	(RM)	Remington	(XX)	Homemade (Non-Inmate)
(HK)	H & K	(RG)	RG	(ZZ)	Other Brand
(IT)	Ithica	(RI)	RGI		

a	liber		•		
)	9 mm	(24)	243 caliber	(41)	.410 guage
)	10 mm	(25)	.25 caliber	(44)	44 caliber
)	12 guage	(30)	.308 caliber	(45)	.45 caliber
)	20 guage	(35)	.357 caliber	(50)	50 mm
)	.22-250	(36)	30-60 caliber	(SL)	Slug
ć	.22 caliber	(38)	.38 caliber	(WW)	Other calibe
í	222 polihor	iani	40 polibor	, ,	

(WR)

Wrist

Refused Med Treatment

FORCE APPLIED (one code per block)

Used By (E# or S#)	Used Against (E# or S#)	Method (Code)	Brand (Code)	Caliber (Code)	Authorized Weapon? (Y/N)	Authorized Ammunition? (Y/N)	Type of Injury (Code)	Body Part (Code)
S#1	E#!	OV					CP	KN
E#1	S#1	FH	BR	9	Υ	Y	GS	FI
								,,

Officer Involved Shooting Involved Employee Information

URN: 018-00017-3199-057
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				Involved	Emp	oyee			
E_1_	Employee #	Last Name		Campbell			First N	Todd	M.I. A
	Sex: M Race: White	Rank: DSG		Unit Assignme	TCF			ssignment (Unit #, Module, e LCMC	
	ShiftTime (circle only one): EM PM Day	ShiftType (<i>circle only one</i>): Regular Overtime ()	Off Duty	Intoxication/Dr	ug Usage	?	Substar	nce Used:	
	Hospital Admission?	Hospital Name:		Coroner Case	?		Corone	r Case #	Interviewed?
	Hrs of sleep prior to shooting	: Duty Time (hrs):		(circle only one): Clothes no Vest	Raid Ja	cket w/ Vest	Other F	actors:	
	Age: Height 5	"10" Weight: 200		Clothes w/ Vest Jacket no Vest		no Vest w/ Vest			
	Range Qualification Date:		PPC Qu	alification Date:				Laser Training Date:	
	Certified with Weapon Used?	Patrol Certification?		ation Unit		Prior Shoot	tings?	Number of Prior Shootings:	Directed Force:
	Weapons Fired Brand: Bere		n #S	hots 1	Weapon Brand:	s Fired		Caliber	# Shots
	Field Training Officer Emp#	Last Name					First Na		M.f.
	Field Training Officer Emp #	Last Name					First Na	ame	M.I.
E	Employee #	Last Name			<u> </u>		First N	lame	M.1.
	Sex: Race:	Rank:		Unit Assignme	nt:		Work As	ssignment (Unit #, Module, e	tc.):
	ShiftTime (circle only one)	ShiftType (circle only one): Regular Overtime	Off Duty	Intoxication/Dr	ug Usage	?	Substar	nce Used:	
	EM PM Day Hospital Admission?	Hospital Name:	On Duty	Coroner Case	? 🗍		Corone	r Case #	Interviewed?
	Hrs of sleep prior to shooting	: Duty Time (hrs):		(circle only one):			Other F	actors:	
	Age: Height:	Weight:	Plain	Clothes no Vest Clothes w/ Vest Jacket no Vest	Uniform	cket w/ Vest no Vest w/ Vest			
	Range Qualification Date:		PPC Qu	alification Date:				Laser Training Date:	
	Certified with Weapon Used?	Patrol Certification?		ation Unit:		Prior Sho	otings?	Number of Prior Shootings:	Directed Force:
	Weapons Fired Brand:	Caliber	#\$	hots	Weapor Brand:	is Fired		Caliber	# Shots
	Field Training Officer Emp #						First Na		M.I.
	Field Training Officer Emp#	Last Name					First Na	ame	Wil.
E	Employee #	Last Name					First N		M.I.
	Sex: Race:	Rank:		Unit Assignme	nt:		Work As	ssignment (Unit #, Module, e	etc.):
	ShiftTime (circle only one): EM PM Day	ShiftType (circle only one): Regular Overtime	Off Duty	Intoxication/Di	ug Usage	?	Substar	nce Used:	
	Hospital Admission?	Hospital Name:		Coroner Case	?		Corone	r Case #	Interviewed?
	Hrs of sleep prior to shooting	: Duty Time (hrs):		(circle only one) Clothes no Vest	Raid Ja	icket w/ Vest	Other F	actors:	
	Age: Height:	Weight:		Clothes w/ Vest Jacket no Vest		no Vest w/ Vest		_	
	Range Qualification Date:		PPC Qu	ualification Date:		,		Laser Training Date:	
	Certified with Weapon Used?	Patrol Certification?		ation Unit:		Prior Sho	otings?	Number of Prior Shootings:	Directed Force:
	Weapons Fired Brand:	Caliber	# S	ihots	Weapor Brand:	ns Fired	F1 P.	Caliber	# Shots
	Field Training Officer Emp #						First Na		M.I.
	Field Training Officer Emp #	Last Name					FRSUN	ans	IVI.I.

Officer Involved Shooting Suspect Information

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•	URN:

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S 1	Last Name	Cortez		First Nam	e	Jessica	^{M.I.} R
_	AKA Last Name			First Nam	e		M.I.
	Sov: — Booo:	Street Address		Cit			State & Zin Code
	Sex: F Race: Hispanic			City			State & Zip Code
	Work Phone:	Home Phone:	Social Sec	eurity #:		Driver's License #	
	Age: 19 D.O.B. 02/17/99	Height: 503 Weight: 116	FBI#			CII #	
	Booking # 201808810	Primary Charge: 245(C)	PC	Seconda	ary Charge:		
	Coroner Case?	Coroner Case #	. •	Intoxication/Drug Usag	ge? 🗸	Substance Used: Marijua	na/Alcohol
	Armed?	Apprehended? ✓		Mental Illness?	<u> </u>	Criminal History?	na// (Identiti
	Vehicle Make Model		Paro	le: Pr	obation:	Prior Felor	ny Conviction:
	KIA Sportag	e 2000		(1000)	Television and Control of the Contro	To the comment of the	TOOMS TO SELECT STATE OF THE SELECT STATE OF T
S	Last Name			First Nam			M.I.
	AKA Last Name			First Nam	e		M.I.
	Sex: Race:	Street Address:		City			State & Zip Code:
	Work Phone:	Home Phone:	Social Sec	curity #:		Driver's License #:	
	Age: D.O.B.	Height: Weight:	FBI#			CII#	
	Booking #	Primary Charge:		Seconda	ary Charge:		
		Coroner Case #		1		Substance Used:	
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	Armed?	Apprehended?		Mental Illness?		Criminal History?	 ny Conviction:
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