

San Antonio Police Department				(1) Weather Conditions at Time of Offense				(2) Case Number								
☐ OFFENSE ☒ INCIDENT ☐ SUPPLEMENTAL REPORT				☐ Warm ☒ Cool ☐ Dry ☐ Wet ☐ Unknown				910126536								
☐ Gang Related ☐ Suspected Hate Crime ☐ Domestic Violence ☐ Drive-by Shooting				Routing of Reports ☐ Homicide ☐ Robbery ☐ Forgery ☐ Intelligence ☐ Arson ☐ Youth ☐ T.I. D. Check Appropriate Box (Original to Records) ☐												
(3) Offense/Event Disturbance				(4) Location of Offense (Number and Street) N. Loop 1604 W / Hausman Rd				Apt. #		(5) District 7320						
(6) Dates of Occurrence (MM/DD/YY) 2-19-09				(7) Hours of Occurrence 2252		(8) Reporting Officer (Name/Badge) S. Ciendro #0418		Signature <i>[Signature]</i>		Reporting Date 2-19-09						
(9) Firm Name Address Phone								(10) Approving Authority (Name, Badge Date)								
(11) Code C - Complainant R - Reporting Person M - Manager/Owner W - Witness G - Guardian O - Other								D - Day N - Night B - Both								
Code	Name (Last, First, MI)			Title		Race - Sex - DOB		Best Address		Phone						
C	Asvestas, Cassidy							Res. 9488 Leslie Rd		317-3626						
	Race	W	Sex	F	DOB			Bus. -								
O1	Garcia, Nicole A							Res. 9488 Leslie Rd		317-3626						
	Race	W	Sex	F	DOB	8-16-81		Bus. -								
O2	Asvestas, Ronald							Res. 9488 Leslie Rd		317-3626						
	Race	W	Sex	M	DOB	04-28-56		Bus. -								
								Res.								
	Race		Sex		DOB			Bus.								
Inj. Per.	Code	(12) Victim Taken to			(13) Transported By			(14) Describe Injuries			(15) Condition					
Property Section	Codes	S - Stolen D - Damaged L - Lost F - Found R - Recovered E - Evidence														
	Code	Description (Brand/Make)			Article		Model/Caliber/Color		Serial Number		OAN Number	Estimated Value				
List Additional Items on SAPD Form 2-PCU																
I on the above listed date and time, had legal custody, and was the legal owner of the property listed here-in, which corporeal, personal property was wrongfully taken, without my consent, and I desire to prosecute the party, or parties, responsible. X _____ X _____ Date: _____ (Signature of Owner/Manager) (Signature of Reporting Officer)																
Forgery Evidence	One Forged Check/Card on the Account of Check Number _____ Dated _____ Pay to the order of _____ Bank In the Amount of \$ _____ Drawn on the _____ Account/Card Number _____ And signed with the Makers Signature of _____															
(16) Property Tag Number		(17) Property Receipt Made ☐ Yes ☐ No		(18) Photograph Taken ☐ Yes ☐ No		(19) OAN applied it (TYPE) ☐ DL ☐ SSN ☐ DOB ☐ OTHER			(20) Total Stolen Value							
(21) Size of Property Taken Was ☐ Concealable ☐ Hand Carried ☐ Needed Assistance				(22) Obvious Property Not Taken ☐ Jewelry ☐ Money ☐ Furs ☐ Guns ☐ Radio/TV/Stereo ☐ Other: _____												
Vehicles/Bicycle Information	(23)		License Number		State/Yr/Type		Year		Make		Model		Style		VIN	
	☐ Stolen ☐ Crim. Misch. ☐ Burg Vehicle ☐ Unauth. Use ☐ Access. Theft ☐ Theft LPO ☐ Impound Veh. ☐ Abandoned Veh.															
			Bicycle Serial Number		Make		Model		Type Frame ☐ Boys ☐ Girl		Type Brake ☐ Hand ☐ Foot		Wheel Size		Speed	
	(24) Color 1 (Solid or Top) Color 2				(25) Special Vehicle Features Enter Number(s) From Below											
	1 Beige 9 Cream 17 Pink 2 Black 10 Gold 18 Red 3 Blue/Light 11 Gray 19 Silver 4 Blue 12 Green/Light 20 Tan 5 Blue/Dark 13 Green 21 Turquoise 6 Bronze 14 Green/Dark 22 White 7 Brown 15 Maroon 23 Yellow 8 Copper 16 Orange 24 Other				1. Level Altered 9. Damage to Front 17. Special Wheels/Tires (Mags, Wide Tires, Etc.) 2. Sticker/Decal on Body/Bumper 10. Damage to Rear 18. Extra Antenna(s)/Mirrors 3. Sticker/Decal on Window 11. Damage to Side 19. Tinted Windows 4. Rust or Primer 12. Painted Inscription on Body 20. Other 5. Decorative Paint 13. Vinyl Top 6. Window Broken 14. Door Panel(s) Removed 7. Missing Parts 15. Torn Seat(s)/Headliner 8. Loud Mufflers 16. Camper Top											
(26) Further Vehicle/Bicycle Description:																
(27) Insurance Company				Policy Number				(28) Value of Vehicle/Bicycle		(29) Vehicle/bicycle Insured? ☐ Yes ☐ No						

17. Park
18. Parking Lot
19. Restaurant
20. Other

SAPD Form 2-2 Rev. (Jun 07) PC