

PART I CRIMES (ACTUAL OFFENSES)
APRIL 2009

	APRIL		Percent Change	Year to Date		Percent Change
	2008	2009		2008	2009	
Homicide	0	0	0	0	1	100%
Rape	2	6	200%	6	13	117%
Robbery	12	7	-42%	45	25	-44%
Aggravated Assault	33	34	3%	89	112	26%
Burglary	30	29	-3%	128	140	9%
Larceny	102	193	89%	432	777	80%
Auto Theft	8	12	50%	36	56	56%
Arson	3	4	33%	7	7	0%
Totals:	190	285	50%	743	1131	52%

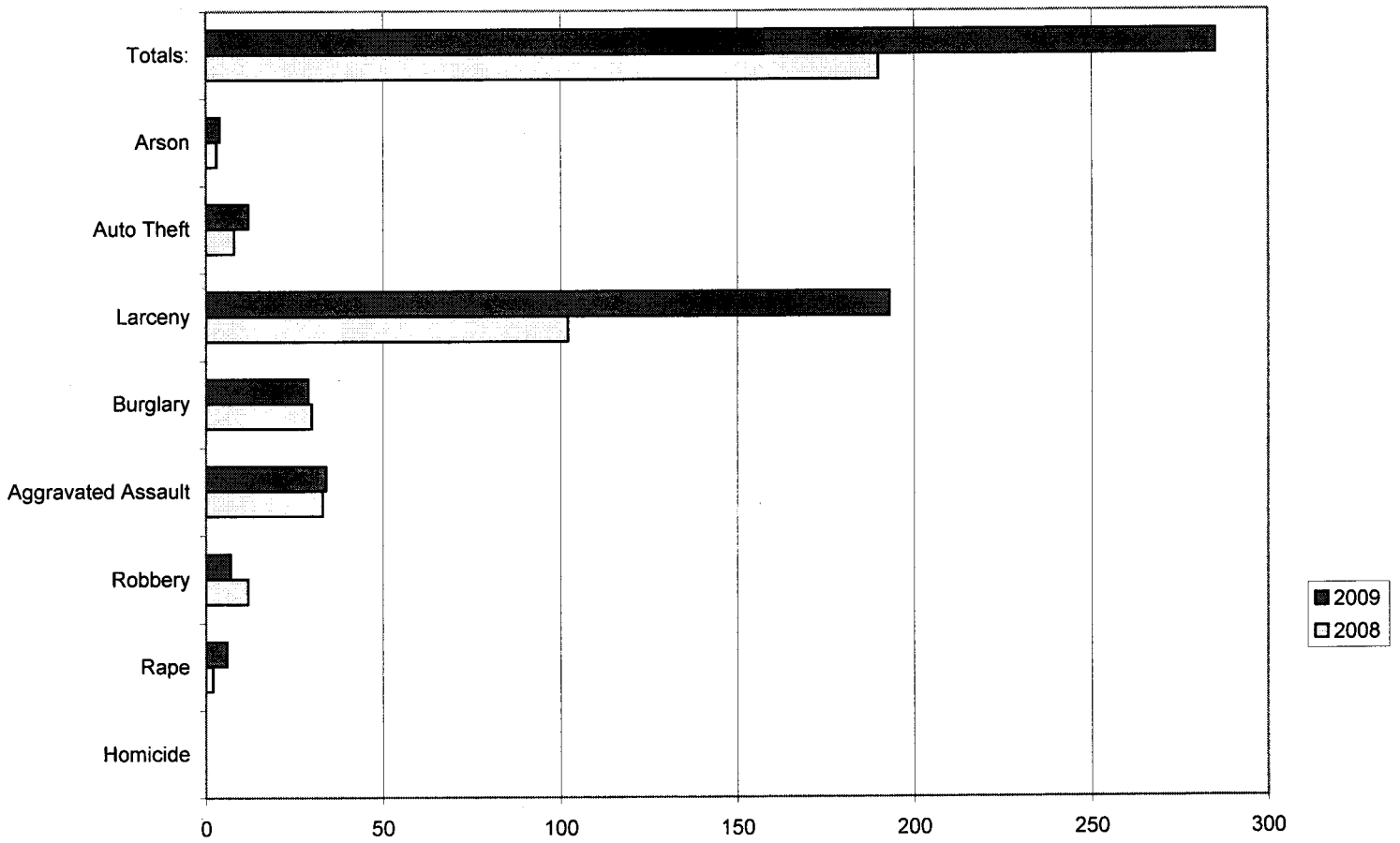
PART I CRIMES - TWO YEAR COMPARISON

	JAN 08	JAN 09	FEB 08	FEB 09	MAR 08	MAR 09	APR 08	APR 09	MAY 08	MAY 09	JUN 08	JUN 09
Homicide	0	1	0	0	0	0	0	0	0	0	0	0
Forcible Rape	3	2	0	3	1	2	2	6	2	0	4	0
Robbery	9	6	5	6	19	6	12	7	8	0	2	0
Aggravated Assault	9	36	25	25	22	17	33	34	35	0	33	0
Burglary	27	40	40	30	31	41	30	29	26	0	32	0
Larceny	113	232	105	155	112	197	102	193	132	0	132	0
Auto Theft	10	13	7	15	11	16	8	12	15	0	17	0
Arson	2	1	1	1	1	1	3	4	2	0	2	0
TOTALS:	173	331	183	235	197	280	190	285	220	0	222	0

	JUL 08	JUL 09	AUG 08	AUG 09	SEP 08	SEP 09	OCT 08	OCT 09	NOV 08	NOV 09	DEC 08	DEC 09
Homicide	0	0	0	0	1	0	1	0	0	0	0	0
Forcible Rape	1	0	5	0	1	0	0	0	1	0	2	0
Robbery	9	0	8	0	11	0	8	0	6	0	6	0
Assault	28	0	27	0	30	0	19	0	30	0	22	0
Burglary	29	0	41	0	27	0	36	0	30	0	63	0
Larceny	136	0	145	0	154	0	124	0	132	0	147	0
Auto Theft	9	0	17	0	11	0	12	0	17	0	11	0
Arson	1	0	3	0	3	0	2	0	1	0	3	0
TOTALS:	213	0	246	0	238	0	202	0	217	0	254	0

YEAR TO DATE TOTALS ARE NOT FINALIZED UNTIL THE END OF THE CALENDAR YEAR

PART I CRIMES COMPARISON CHART APRIL 2008 - APRIL 2009



	Homicide	Rape	Robbery	Aggravated Assault	Burglary	Larceny	Auto Theft	Arson	Totals:
■ 2009	0	6	7	34	29	193	12	4	285
□ 2008	0	2	12	33	30	102	8	3	190

MONTHLY REPORT OF OFFENSES KNOWN TO THE POLICE:

RETURN A

This report is authorized by law Title 28, Section 534, U.S. Code. While you are not required to report, your cooperation in forwarding this report by the seventh day after the close of the month to Uniform Crime Reports, Federal Bureau of Investigation, Washington, D.C. 20535, will assist in compiling comprehensive, accurate national crime figures on a timely basis.

1 Classification of Offenses	2 Offenses Reported or Known to Police	3 Unfounded, i.e., False or Baseless Complaints	4 Number of Actual Offenses	5 Total Offenses Cleared by Arrest or Exceptional Means	6 Number of Clearances Involving Only Persons Under 18 Years of Age
1. CRIMINAL HOMICIDE					
a. Murder and Non-negligent Homicide	11				
b. Manslaughter by Negligence	12				
2. FORCIBLE RAPE TOTAL	20	6	6		
a. Rape by Force	21	2	2		
b. Attempts to Commit Forcible Rape	22	4	4		
3. ROBBERY TOTAL	30	7	7	1	
a. Firearm	31	1	1		
b. Knife or Cutting Instrument	32	1	1	1	
c. Other Dangerous Weapon	33	1	1		
d. Strong-Arm (Hands, Fists, Feet, etc.)	34	4	4		
4. ASSAULT TOTAL	40	82	82	43	4
a. Firearm	41				
b. Knife or Cutting Instrument	42	4	4	3	3
c. Other Dangerous Weapon	43	14	14	4	
d. Strong-Arm (Hands, Fists, Feet, etc.)	44	16	16	12	1
e. Other Assaults - Simple	45	48	48	24	
5. BURGLARY TOTAL	50	29	29	5	
a. Forcible Entry	51	4	4	2	
b. Unlawful Entry - No Force	52	25	25	3	
c. Attempted Forcible Entry	53				
6. LARCENY - THEFT TOTAL	60	193	193	33	5
7. MOTOR VEHICLE THEFT TOTAL	70	12	12		
a. Autos	71	8	8		
b. Trucks and Buses	72				
c. Other Vehicles	73	4	4		
GRAND TOTAL	77	329	329	82	9

Checking any of the appropriate blocks below will eliminate your need to submit reports when the values are zero. This will also aid the national program in its quality control efforts.

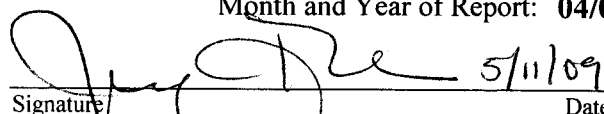
- | | |
|---|--|
| <input checked="" type="checkbox"/> No Supplementary Homicide Report Submitted. | <input type="checkbox"/> No Persons Under 18 Arrested. |
| <input type="checkbox"/> No Supplement to Return A Submitted. | <input type="checkbox"/> No Persons 18 or Over Arrested. |
| <input type="checkbox"/> No Law Enforcement Officers Killed or Assaulted. | <input type="checkbox"/> No Arson Offenses Occurred. |
| <input type="checkbox"/> No Violent Crimes Against Seniors. | <input type="checkbox"/> No Domestic Violence-Related Calls. |
| <input checked="" type="checkbox"/> No Hate Crimes. | <input type="checkbox"/> No Anti-Reproduction Rights Crimes. |

SANTA CRUZ PD
155 CENTER ST
SANTA CRUZ, CA 95060
Agency and State

CA0440200
Agency ID

56,000
Population

Month and Year of Report: 04/09

Signature:  Date: 5/11/09
Jacquie Drechsler
Report Prepared by: Records Supervisor Title
Howard Skerry
Chief

**MONTHLY REPORT OF OFFENSES KNOWN TO THE POLICE:
SUPPLEMENT TO RETURN A**

PROPERTY STOLEN BY CLASSIFICATION

CLASSIFICATION		ACTUAL OFFENSES (Column 4, Return A)	VALUE OF PROPERTY STOLEN
1. Murder/Nonnegligent Manslaughter	12		
2. Forcible Rape (Total)	20	6	
3. Robbery			
(a) Highway (Streets, Alleys, etc.)	31		
(b) Commercial House (Except c, d, f)	32		
(c) Gas or Service Station	33		
(d) Convenience Store	34		
(e) Residence (Anywhere on the Premises)	35	2	\$11,260
(f) Bank	36		
(g) Miscellaneous	37	5	\$358
TOTAL ROBBERY	30	7	\$11,618
4. Assault (Not Applicable)			
5. Burglary - Breaking or Entering			
(a) Residence (Dwelling)			
(1) Night (6 P.M. - 6 A.M.)	51	9	\$13,254
(2) Day (6 A.M. - 6 P.M.)	52	12	\$26,230
(3) Unknown	53	4	\$8,577
(b) Non-Residence (Store, Office, etc.)			
(1) Night (6 P.M. - 6 A.M.)	54	1	
(2) Day (6 A.M. - 6 P.M.)	55	3	\$2,493
(3) Unknown	56		
TOTAL BURGLARY	50	29	\$50,554
6. Larceny - Theft (Except Motor Vehicle Theft)			
(a) Over \$400	64	48	\$87,388
(b) \$200 to \$400	61	45	\$12,119
(c) \$50 to \$199	62	40	\$4,712
(d) Under \$50	63	60	\$799
TOTAL LARCENY (Same as Item 6X)	60	193	\$105,018
7. Motor Vehicle Theft (Include Alleged Joy Ride)	70	12	\$56,500
GRAND TOTAL - All Items	77		\$223,690
Additional Analysis of Larceny and Motor Vehicle Theft			
6X. Nature of Larcenies Under Item 6			
(a) Pocket-Picking	81		
(b) Purse-Snatching	82	5	\$1,835
(c) Shoplifting	83	35	\$999
(d) From Motor Vehicles (Except e)	84	67	\$36,728
(e) Motor Vehicle Parts and Accessories	85	10	\$1,450
(f) Bicycles	86	21	\$9,455
(g) From Buildings (Except c and h)	87	27	\$42,275
(h) From Any Coin-Operated Machine (Parking Meters, etc.)	88		
(i) All Other	89	28	\$12,276
TOTAL LARCENIES (Same as Item 6)	80	193	\$105,018
7X. Motor Vehicles Recovered			
(a) Stolen Locally and Recovered Locally	91	10	
(b) Stolen Locally and Recovered by Other Jurisdictions	92	2	
(c) Total Locally Stolen Motor Vehicles Recovered	90	12	
(d) Stolen Out of Town, Recovered Locally	93	3	

**MONTHLY REPORT OF OFFENSES KNOWN TO THE POLICE:
SUPPLEMENT TO RETURN A**

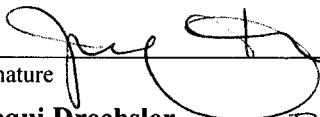
PROPERTY BY TYPE AND VALUE

Type of Property		Value of Property Stolen and Recovered In Your Jurisdiction	
		Stolen	Recovered
(A) Currency, Notes, etc.	01	\$13,896	\$20
(B) Jewelry and Precious Metals	02	\$5,670	
(C) Clothing and Furs	03	\$5,692	\$730
(D) Locally Stolen Motor Vehicles	04	\$56,500	\$54,000
(E) Office Equipment	05	\$41,579	\$3,038
(F) Televisions, Radios, Stereos, etc.	06	\$47,911	
(G) Firearms	07	\$1,900	
(H) Household Goods	08		
(I) Consumable Goods	09	\$5,417	\$94
(J) Livestock	10		
(K) Miscellaneous	11	\$45,125	\$5,428
TOTAL	00	\$223,690	\$63,310

NOTE: Total of column (2) should agree with grand total (DATA ENTRY 77) shown on page 2. In column (3) include all property recovered even though stolen in prior months. The above is an accounting for only that property stolen in your jurisdiction. This will include property recovered for you by other jurisdictions but not property you recover for them.

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Month and Year of Report: **04/09**

Signature  Date **5/11/09**
Jacquie Drechsler *Records Supervisor*
 Report Prepared by Title
Howard Skerry
 Chief

MONTHLY REPORT OF OFFENSES KNOWN TO THE POLICE:

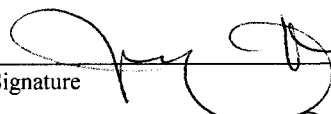
ARSON OFFENSES

This report is authorized by law Title 28, Section 534, United States Code, and the enactment of the fiscal year 1979, Department of Justice Authorization Bill S. 3151. While you are not required to respond, your cooperation in using this form to report all incidents of arson which become known to your department during the month will assist the FBI in compiling comprehensive, accurate data on a timely basis.

1 Property Classification	2 Offenses reported or known to police	3 Unfounded, i.e., false or baseless complaints	4 Number of actual offenses	5 Total offenses cleared by arrest or exceptional means	6 Number of clearances involving only persons under 18 years of age	7 Offenses where structures uninhabited, abandoned, or not normally in use	8 Estimated value of property damage
A. Single Occupancy Residential: Houses, Townhouses, Duplexes, etc.							
B. Other Residential: Apartments, Tenements, Flats, Hotels, Motels, Inns, Dormitories, Boarding Houses, etc.							
C. Storage: Barns, Garages, Warehouses, etc.							
D. Industrial/Manufacturing							
E. Other Commercial: Stores, Restaurants, Offices, etc.							
F. Community/Public: Churches, Jails, Schools, Colleges, Hospitals, etc.	2		2			1	\$1,001
G. All Other Structures: Out Buildings, Monuments, Buildings Under Construction, etc.							
TOTAL STRUCTURE	2		2			1	\$1,001
H. Motor Vehicles: Automobiles, Trucks, Buses, Motorcycles, etc. UCR Definition							
I. Other Mobile Property: Trailers, Recreational Vehicles, Airplanes, Boats, etc.							
TOTAL MOBILE							
J. Total Other: Crops, Timber, Fences, Signs, etc.	2		2				\$2
GRAND TOTAL	4		4			1	\$1003

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Signature:  Date: 5/11/09
 Jacquie Drechsler
 Report Prepared by Title
 Howard Skerry
 Chief

**MONTHLY REPORT OF OFFENSES KNOWN TO THE POLICE:
VIOLENT CRIMES COMMITTED AGAINST SENIOR CITIZENS**

In accordance with Senate concurrent resolution no. 64

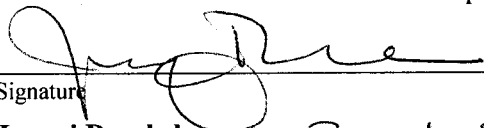
<u>TYPE OF VIOLENT CRIME</u>	<u>VICTIMS AGE 60 OR OVER</u>
1) HOMICIDE	
2) FORCIBLE RAPE	
3) ROBBERY	1
4) AGGRAVATED ASSAULT	4
<hr/>	
5) TOTAL	5

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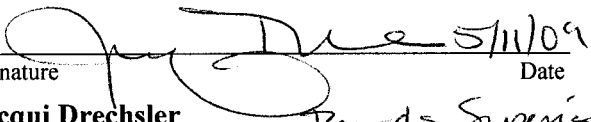

Signature _____ Date 5/11/09
Jacqui Drechsler Rewards Supervisor
Report Prepared by _____ Title
Howard Skerry
Chief

**MONTHLY REPORT OF OFFENSES KNOWN TO THE POLICE:
DOMESTIC VIOLENCE-RELATED CALLS FOR ASSISTANCE
California Penal Code (PC) Section 13730 (a)**

<u>TYPE OF DATA</u>	<u>NUMBER</u>
TOTAL DOMESTIC VIOLENCE CALLS RECEIVED	31
TOTAL CASES INVOLVING WEAPONS	2
<hr/>	
SUBTOTALS	
<hr/>	
FIREARM	
KNIFE OR CUTTING INSTRUMENT	1
OTHER DANGEROUS WEAPON	
PERSONAL WEAPON (HANDS, FIST, FEET, ETC.)	1

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Signature _____ Date **5/11/09**
Jacqui Drechsler _____
Report Prepared by _____ Title **Rounds Supervisor**
Howard Skerry _____
Chief

**MONTHLY REPORT OF OFFENSES KNOWN TO THE POLICE:
HATE CRIMES**


There were no "Hate Crimes" reported to this department for this month.

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Month and Year of Report:


Signature _____ Date 5/11/09
Jacqui Drechsler Records Supervisor
Report Prepared by _____ Title _____
Howard Skerry
Chief

LAW ENFORCEMENT OFFICERS KILLED OR ASSAULTED

It is requested this report be completed and transmitted with monthly crime reports to: Director, Federal Bureau of Investigation, Uniform Crime Reports, Washington, D.C. 20535. This form should be used to report the number of your officers who were assaulted or killed in the line of duty during the month. Additional information concerning officers killed will be requested by a separate questionnaire.

OFFICERS KILLED

Number of your law enforcement officers killed in the line of duty this month

By felonious act _____

By accident or negligence _____

OFFICERS ASSAULTED (Do not include officers killed.)

Type of Activity	Type of Weapon					Type of Assignment								Police Assaults Cleared		
	Total Assaults by Weapon		Firearm	Knife	Other Dangerous Weapon	Hands, Fists, Feet, etc.	Two Officer Vehicle	One Officer Vehicle	Detective or Special Assign.		Other					
	A	B							C	D	E	F	G		H	I
1. Responding to "Disturbance"																
2. Burglaries in Progress																
3. Robberies in Progress																
4. Attempting Other Arrests																
5. Civil Disorder																
6. Handling Prisoners																
7. Suspicious Person/Circum.																
8. Ambush - No Warning																
9. Mentally Deranged																
10. Traffic Pursuits	1				1					1						1
11. All Other																
12. TOTAL (1-11)	1				1					1						1
13. Number With Personal Injury					1											
14. Number Without Personal Injury																
15. Time of Assaults	A.M.															1
	P.M.															

12:01 2:00 4:00 6:00 8:00 10:00 12:00

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Signature *Jacqui Drechsler* Date 5/11/09
 Report Prepared by Jacqui Drechsler Title Records Supervisor
Howard Skerry
 Chief

MONTHLY REPORT OF
ANTI-REPRODUCTIVE RIGHTS CRIMES (ARRC)
SUMMARY WORKSHEET

AGENCY SANTA CRUZ PD	
NCIC NUMBER CA0440200	REPORTING MONTH/YEAR 04/2009
<input checked="" type="checkbox"/> THERE WERE <u>1</u> ARRCs REPORTED TO THIS DEPARTMENT FOR THIS MONTH (Attach Data Collection Worksheets) <input type="checkbox"/> THERE WERE NO ARRCs REPORTED TO THIS DEPARTMENT FOR THIS MONTH	
PREPARER'S NAME Jacqui Drechsler	TELEPHONE NUMBER (831) 420-5874
SUBMIT THIS SUMMARY SHEET WITH THE ARRC DATA COLLECTION WORKSHEET(S), IF ANY, TO State of California Department of Justice CRIMINAL JUSTICE STATISTICS CENTER P.O. Box 903427 Sacramento, CA 94203-4270 ATTN: Anti-Reproductive Rights Crimes	

Purpose:

It is the intent of the Department of Justice to:

- * Collect data on all crimes relating to violations of the Reproductive Rights Law Enforcement Act.
- * Collect data on the threatened commission of anti-reproductive rights crimes and persons suspected of committing these crimes or making these threats.
- *Distinguish between crimes of violence and non-violence.

INSTRUCTIONS FOR COMPLETION:

SUBMIT ANTI-REPRODUCTIVE RIGHTS CRIMES (ARRC) AS DEFINED IN PENAL CODE SECTION 13776 (A). SEE REVERSE OF THIS FORM FOR PENAL CODE STATUTES TO BE USED WHEN COMPLETING THIS FORM.

NOTE: It is the purpose of this legislation to collect data on any crime committed partly or wholly because the victim is a reproductive health services client, provider, or assistant, or a crime that is partly or wholly intended to intimidate the victim, or any other person or entity, or any class of persons or entities from becoming or remaining a reproductive health services client, provider or assistant.

Requirement:

This form should be submitted monthly whether or not an ARRC occurred.

Frequency:

Submit monthly, by the 10th working day for the preceding month (for example, July data should be submitted by the 10th working day in August).

Reporting # of ARRCs:

If there are ARRCs to be reported by your agency, check the first box and enter the total number of ARRCs for the reporting month. Attach Data Collection Worksheets for each ARRC report.

If there were no ARRCs to report, check the second box and submit the Summary Worksheet only.