

PART I CRIMES (ACTUAL OFFENSES)  
MAY 2015

	MAY		Percent Change	Year to Date		Percent Change
	2014	2015		2014	2015	
Homicide	0	0	0	0	1	100%
Rape	8	8	0%	25	19	-24%
Robbery	11	6	-45%	44	51	16%
Aggravated Assault	29	39	34%	146	124	-15%
Burglary	44	34	-23%	171	210	23%
Larceny	244	171	-30%	1132	1082	-4%
Auto Theft	31	22	-29%	106	118	11%
Arson	3	1	-67%	13	16	23%
Totals:	370	281	-24%	1637	1621	-1%

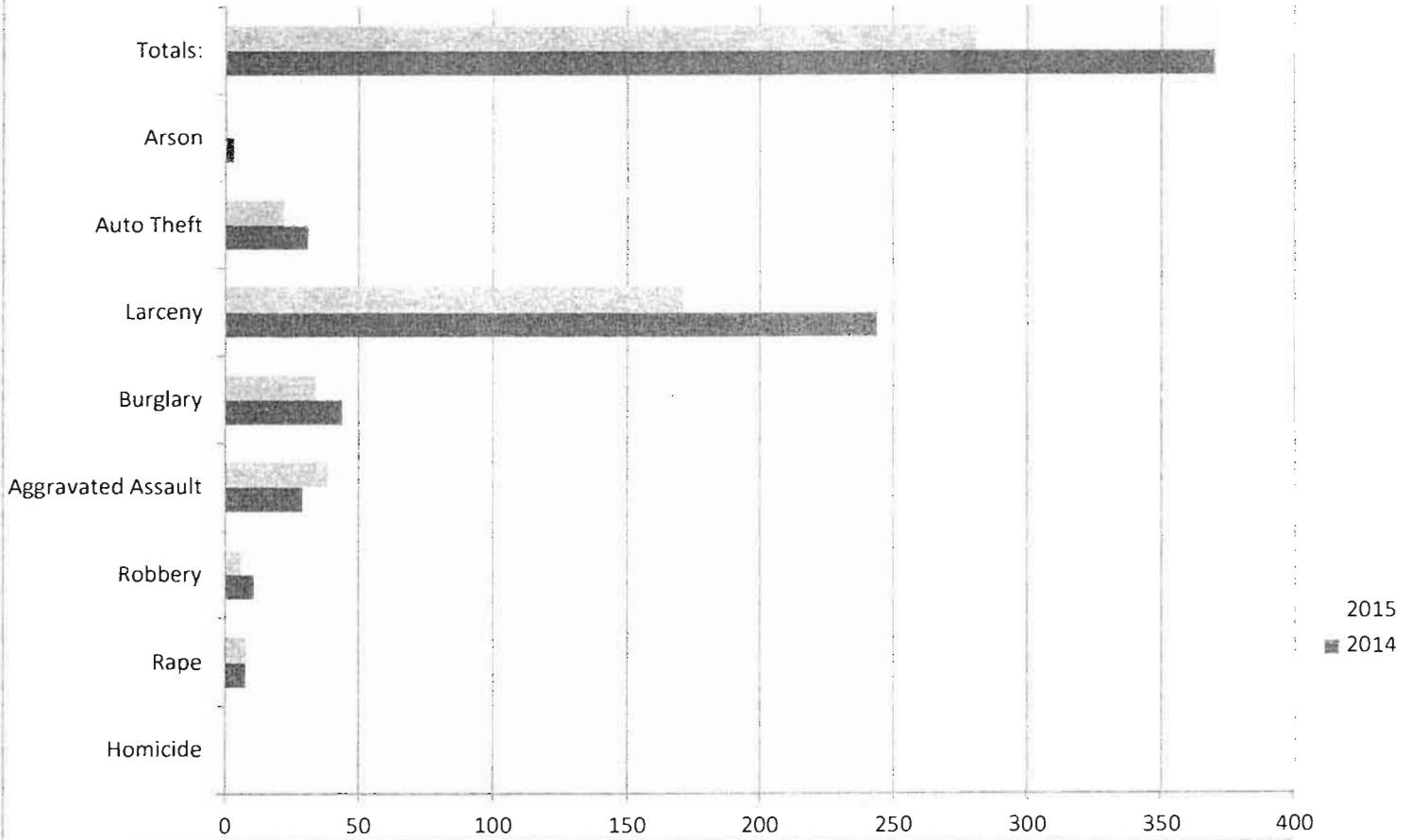
PART I CRIMES - TWO YEAR COMPARISON

	JAN 13	JAN 14	FEB 13	FEB 14	MAR 13	MAR 14	APR 13	APR 14	MAY 13	MAY 14	JUN 13	JUN 14
Homicide	0	0	0	0	0	0	0	1	0	0	0	0
Forcible Rape	3	5	3	0	8	3	3	3	8	8	4	0
Robbery	9	20	4	5	8	9	12	11	11	6	5	0
Aggravated Assault	21	27	20	21	39	13	37	24	29	39	34	0
Burglary	29	46	24	49	39	46	35	35	44	34	39	0
Larceny	221	278	210	182	259	244	198	207	244	171	213	0
Auto Theft	26	37	11	14	19	19	19	26	31	22	27	0
Arson	0	2	2	0	6	2	2	0	3	1	1	0
TOTALS:	309	415	274	271	378	336	306	307	370	281	323	0

	JUL 13	JUL 14	AUG 13	AUG 14	SEP 13	SEP 14	OCT 13	OCT 14	NOV 13	NOV 14	DEC 13	DEC 14
Homicide	1	0	0	0	0	0	0	0	0	0	0	0
Forcible Rape	4	0	3	0	6	0	8	0	10	0	3	0
Robbery	6	0	15	0	10	0	8	0	7	0	14	0
Assault	35	0	21	0	25	0	35	0	35	0	20	0
Burglary	29	0	29	0	33	0	22	0	44	0	53	0
Larceny	220	0	182	0	196	0	200	0	215	0	244	0
Auto Theft	33	0	15	0	27	0	15	0	13	0	14	0
Arson	4	0	1	0	0	0	2	0	2	0	0	0
TOTALS:	332	0	266	0	297	0	290	0	326	0	348	0

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

## PART I CRIMES COMPARISON CHART MAY 2014 - MAY 2015



	Homicide	Rape	Robbery	Aggravated Assault	Burglary	Larceny	Auto Theft	Arson	Totals:
2015	0	8	6	39	34	171	22	1	281
2014	0	8	11	29	44	244	31	3	370

**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.

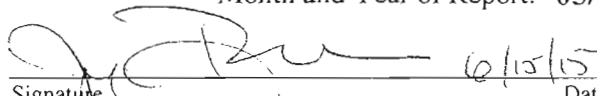
1 Classification of Offenses	2 Offenses Reported or Known to Police	3 Unfounded, i.e., False or Baseless Complaints	4 Number of Actual	5 Total Offenses Cleared by Arrest or Exceptional Means	6 Number of Clearances Involving Only Persons Under
<b>1. CRIMINAL HOMICIDE</b>					
a. Murder and Non-negligent Homicide	11				
b. Manslaughter by Negligence	12				
<b>2. FORCIBLE RAPE TOTAL</b>					
a. Rape by Force	21	5	5	1	
b. Attempts to Commit Forcible Rape	22	3	3	3	
<b>3. ROBBERY TOTAL</b>					
a. Firearm	31	1	1	1	
b. Knife or Cutting Instrument	32	2	2	2	
c. Other Dangerous Weapon	33				
d. Strong-Arm (Hands, Fists, Feet, etc.)	34	3	3	1	
<b>4. ASSAULT TOTAL</b>					
a. Firearm	41	1	1	1	1
b. Knife or Cutting Instrument	42	3	3	1	
c. Other Dangerous Weapon	43	7	7	1	
d. Strong-Arm (Hands, Fists, Feet, etc.)	44	28	28	20	
e. Other Assaults - Simple	45	34	34	11	
<b>5. BURGLARY TOTAL</b>					
a. Forcible Entry	51	15	15	3	
b. Unlawful Entry - No Force	52	19	19		1
c. Attempted Forcible Entry	53				
<b>6. LARCENY - THEFT TOTAL</b>					
	60	171	171	27	
<b>7. MOTOR VEHICLE THEFT TOTAL</b>					
a. Autos	70	22	22	2	
b. Trucks and Buses	71	16	16	1	
c. Other Vehicles	72	4	4	1	
	73	2	2		
<b>GRAND TOTAL</b>	77	<b>314</b>	<b>314</b>	74	2

Checking any of the appropriate blocks below will eliminate your need to submit reports when the values are zero.

- |   |  |
|---|--|
| <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 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: 05/15

  
Signature \_\_\_\_\_ Date 6/15/15  
Jacquie Drechsler  
Report Prepared by \_\_\_\_\_ Title Records Supervisor  
Kevin Vogel  
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
<b>1. Murder/Nonnegligent Manslaughter</b>	12		
<b>2. Forcible Rape (Total)</b>	20	8	
<b>3. Robbery</b>			
(a) Highway (Streets, Alleys, etc.)	31	1	\$400
(b) Commercial House (Except c, d, f)	32	1	\$9
(c) Gas or Service Station	33		
(d) Convenience Store	34	1	\$40
(e) Residence (Anywhere on the Premises)	35	1	\$9
(f) Bank	36	1	\$70
(g) Miscellaneous	37	1	
<b>TOTAL ROBBERY</b>	30	6	\$528
<b>4. Assault (Not Applicable)</b>			
<b>5. Burglary - Breaking or Entering</b>			
(a) Residence (Dwelling)			
(1) Night (6 P.M. - 6 A.M.)	51	6	\$29,096
(2) Day (6 A.M. - 6 P.M.)	52	3	\$9,295
(3) Unknown	53	6	\$9,295
(b) Non-Residence (Store, Office, etc.)			
(1) Night (6 P.M. - 6 A.M.)	54	7	\$53,927
(2) Day (6 A.M. - 6 P.M.)	55	1	\$995
(3) Unknown	56	11	\$35,553
<b>TOTAL BURGLARY</b>	50	34	\$138,161
<b>6. Larceny - Theft (Except Motor Vehicle Theft)</b>			
(a) Over \$400	64	67	\$133,018
(b) \$200 to \$400	61	35	\$10,660
(c) \$50 to \$199	62	27	\$2,784
(d) Under \$50	63	42	\$564
<b>TOTAL LARCENY (Same as Item 6X)</b>	60	171	\$147,026
<b>7. Motor Vehicle Theft (Include Alleged Joy Ride)</b>	70	22	\$138,340
<b>GRAND TOTAL - All Items</b>	77		\$424,055
Additional Analysis of Larceny and Motor Vehicle Theft			
<b>6X. Nature of Larcenies Under Item 6</b>			
(a) Pocket-Picking	81	2	\$455
(b) Purse-Snatching	82	2	\$202
(c) Shoplifting	83	35	\$11,841
(d) From Motor Vehicles (Except e)	84	66	\$80,951
(e) Motor Vehicle Parts and Accessories	85	11	\$11,400
(f) Bicycles	86	21	\$17,525
(g) From Buildings (Except c and h)	87	7	\$14,379
(h) From Any Coin-Operated Machine (Parking Meters, etc.)	88	1	
(i) All Other	89	26	\$10,273
<b>TOTAL LARCENIES (Same as Item 6)</b>	80	171	\$147,026
<b>7X. Motor Vehicles Recovered</b>			
(a) Stolen Locally and Recovered Locally	91	15	
(b) Stolen Locally and Recovered by Other Jurisdictions	92	1	
(c) Total Locally Stolen Motor Vehicles Recovered	90	16	
(d) Stolen Out of Town, Recovered Locally	93	4	

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

**PROPERTY BY TYPE AND VALUE**

Type of Property		Value of Property Stolen and Recovered In Your Jurisdiction	
		Stolen	Recovered
(A) Currency, Notes, etc.	01	\$11,093	\$9
(B) Jewelry and Precious Metals	02	\$29,335	
(C) Clothing and Furs	03	\$20,134	\$1,228
(D) Locally Stolen Motor Vehicles	04	\$136,700	\$127,100
(E) Office Equipment	05	\$41,139	\$250
(F) Televisions, Radios, Stereos, etc.	06	\$11,568	\$200
(G) Firearms	07	\$570	\$570
(H) Household Goods	08		
(I) Consumable Goods	09	\$876	\$363
(J) Livestock	10		
(K) Miscellaneous	11	\$172,640	\$6,573
<b>TOTAL</b>	<b>00</b>	<b>\$424,055</b>	<b>\$136,293</b>

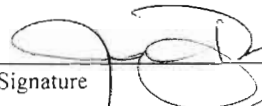
NOTE: Total of column (2) should agree with grand total (DATA ENTRY 77) shown on page 2. In column (3) include all property recovered even though stolen in prior months. The above is an accounting for only that property stolen in your jurisdiction. This will include property recovered for you by other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

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

CA0440200  
Agency ID

56,000  
Population

Month and Year of Report: 05/15

Signature  Date 05/15/15  
Report Prepared by Jacqui Drechsler Title Records Supervisor  
Kevin Vogel  
Chief

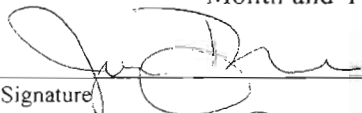
**MONTHLY REPORT OF OFFENSES KNOWN TO THE POLICE:**

**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

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,							
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,							
G. All Other Structures: Out Buildings, Monuments, Buildings Under Construction, etc.							
<b>TOTAL STRUCTURE</b>							
H. Motor Vehicles: Automobiles, Trucks, Buses, Motorcycles, etc.							
I. Other Mobile Property: Trailers, Recreational Vehicles, Airplanes, Boats, etc.							
<b>TOTAL MOBILE</b>							
J. Total Other: Crops, Timber, Fences, Signs, etc.	1		1				\$1
<b>GRAND TOTAL</b>	1		1				\$1

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 Signature \_\_\_\_\_ Date 05/15  
 Jacqui Drechsler Rewards Supervisor  
 Report Prepared by \_\_\_\_\_ Title  
 Kevin Vogel  
 Chief

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

**In accordance with Senate concurrent resolution no. 64**


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

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Month and Year of Report: **05/15**

  
Signature \_\_\_\_\_ Date 6/15/15  
**Jacqui Drechsler** *Kevin's Supervisor*  
Report Prepared by \_\_\_\_\_ Title \_\_\_\_\_  
**Kevin Vogel**  
Chief

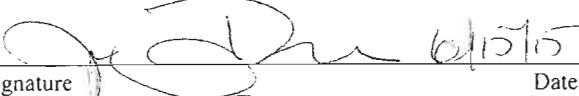
**MONTHLY REPORT OF OFFENSES KNOWN TO THE POLICE:  
 DOMESTIC VIOLENCE-RELATED CALLS FOR ASSISTANCE  
 California Penal Code (PC) Section 13730 (a)**

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TYPE OF DATA	NUMBER
TOTAL DOMESTIC VIOLENCE CALLS RECEIVED	28
TOTAL CASES INVOLVING WEAPONS	4
<b>SUBTOTALS</b>	
FIREARM	
KNIFE OR CUTTING INSTRUMENT	
OTHER DANGEROUS WEAPON	
PERSONAL WEAPON (HANDS, FIST, FEET, ETC.)	4

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 Signature \_\_\_\_\_ Date 05/15  
 Jacquie Drechsler  
 Report Prepared by \_\_\_\_\_ Title  
 Kevin Vogel  
 Chief



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

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There were 2 cases involving Hate Crimes for this compile period.

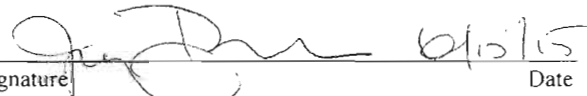
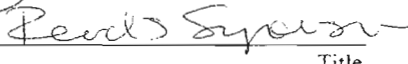
Case #s

15S-04312

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Jacquie Drechsler   
Report Prepared by \_\_\_\_\_ Title  
Kevin Vogel  
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

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

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

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Month and Year of Report: 05/15

Signature: *Jacqui Drechsler* Date: 6/15/15

Report Prepared by: *Kevin Vogel* Title: *Records Supervisor*

Chief

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

AGENCY <b>SANTA CRUZ PD</b>	
NCIC NUMBER <b>CA0440200</b>	REPORTING MONTH/YEAR <b>05/2015</b>
<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 <b>Jacqui Drechsler</b>	TELEPHONE NUMBER <b>(831) 420-5874</b>
SUBMIT THIS SUMMARY SHEET WITH THE ARRC DATA COLLECTION WORKSHEET(S), IF ANY, TO  State of California Department of Justice <b>CRIMINAL JUSTICE STATISTICS CENTER</b> P.O. Box 903427 Sacramento, CA 94203-4270  <b>ATTN: Anti-Reproductive Rights Crimes</b>	

**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.