

COMPLAINANT'S NAME
Last, First Middle
Living, Rochelle Middle

Shreveport Police Department
VICTIM SUPPLEMENT

2020013005
Offense Number

Address
5842 LINE AV SHREVEPORT, LA 71106

Date of Occurrence
06/02/2020

District
05

Time/Date of Supplement Report
06/02/2020 09:51

Phone: (Home)
(318) 865-0017

Victim # 2 (Last, First, Middle)
Eye Care

Address: (Bus.)

D.L.

Phone: (Home)
(318) 865-0017

Phone: (Bus.)

5842 LINE AV SHREVEPORT, LA 71106

TYPE OF VICTIM: (Check Only One)

INDIVIDUAL GOVERNMENT OTHER

BUSINESS RELIGIOUS JUVENILE

FINANCIAL SOCIETY/PUBLIC L.E. OFFICER

RACE: W WHITE
B BLACK
A INDIAN
U ASIAN
U UNKNOWN

SEX: M MALE
F FEMALE
U UNKNOWN

AGE: 00

DOB:

VICTIM CONNECTED TO OFFENSE 1 2 3 4 5 6

RESIDENT STATUS: FOR VICTIM: R RESIDENT
N NONRESIDENT
U UNKNOWN

ETHNICITY: H HISPANIC
N NON-HISPANIC
U UNKNOWN

NEGLIGENT HOMICIDE

30 Child Playing w/ Weapon

31 Gun Cleaning Accident

32 Hunting Accident

33 Other Negligent Weapons Handling

34 Other Negligent Killing

40 Child Abuse

AGGRAVATED ASSAULT/HOMICIDE CIRCUMSTANCES: (Check up to Two)

01 ARGUMENT

02 ASSAULT ON OFFICER

03 DRUG DEALING

04 GANGLAND

05 JUVENILE GANG

CHILD ABUSE

40 CHILD ABUSE

If law enforcement officer assaulted, mark box 2. If law enforcement officer is killed, mark any box except 2

ADDITIONAL JUSTIFIED HOMICIDE CIRCUMSTANCES (Check only on code)

A Criminal Attached Officer, Officer Killed Criminal

B Criminal Attached Officer, Other Officer Killed Criminal

C Criminal Attempted Flight from a Crime

D Criminal Killed in the Commission of a Crime

E Criminal Resisted Arrest

F Unable to Determine/Not Enough Information

LEOKA in line of duty: Type of Activity (Mark one box)

12 TWO-OFFICER VEHICLE

13 ONE-OFFICER VEHICLE

14 ONE-OFFICER VEHICLE ASSISTED

15 DETECTIVE OR SPECIAL ASSIGNMENT ALONE

16 OTHER ASSISTED

17 OTHER ALONE

18 OTHER ASSISTED

RELATIONSHIP OF VICTIM TO OFFENDER:

SC STEPCHILD

SS STEP SIBLING

ER EMPLOYER

EE EMPLOYEE

OK OTHER FAMILY

AC ACQUAINTANCE

FR FRIEND

ST STRANGER

RU RELATIONSHIP UNKNOWN

NE NEIGHBOR

NI NON-MARRIED LIVE IN

BE BABYSITTEE (baby)

VO VICTIM WAS OFFENDER

BG BOY/GIRL FRIEND

ES VICTIM WAS ESTRANGED SPOUSE

CF CHILD OF "BG" ABOVE

HR HOMOSEXUAL REL.

XB EX BOY/GIRL FRIEND

RACE: W WHITE
B BLACK
A INDIAN
U ASIAN
U UNKNOWN

SEX: M MALE
F FEMALE
U UNKNOWN

AGE: 00

DOB:

LEOKA in line of duty: Type of Activity (Mark one box)

K RESPONDING TO "DISTURBANCE CALLS"

L BURGALARIES IN PROGRESS OR PURSUING BURGULARY SUSPECTS

M ROBBERIES IN PROGRESS OR PURSUING ROBBERY SUSPECTS

N ATTEMPTING OTHER ARRESTS

O CIVIL DISORDER

P HANDLING, TRANSPORTING, CUSTODY OF PRISONERS

Q INVESTIGATING SUSPICIOUS PERSONS OR CIRCUMSTANCES

R AMBUSH - NO WARNING

S MENTALLY DERANGED

T TRAFFIC PURSUITS AND STOPS

U ALL OTHER

TYPE OF VICTIM: (Check Only One)

1 INDIVIDUAL GOVERNMENT OTHER

2 BUSINESS RELIGIOUS JUVENILE

3 FINANCIAL SOCIETY/PUBLIC L.E. OFFICER

RACE: W WHITE
B BLACK
A INDIAN
U ASIAN
U UNKNOWN

SEX: M MALE
F FEMALE
U UNKNOWN

AGE:

DOB:

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AC ACQUAINTANCE

FR FRIEND

ST STRANGER

RU RELATIONSHIP UNKNOWN

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NI NON-MARRIED LIVE IN

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RU RELATIONSHIP UNKNOWN

NE NEIGHBOR

NI NON-MARRIED LIVE IN

BE BABYSITTEE (baby)

VO VICTIM WAS OFFENDER

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R AMBUSH - NO WARNING

S MENTALLY DERANGED

T TRAFFIC PURSUITS AND STOPS

U ALL OTHER

OFFICER'S NAME Clanton, S D

BADGE #63

DATE 06/02/2020

SUPERVISOR

ADDRESS: (Street, City, State, Zip)

ADDRESS: (Bus.)

SEX: M MALE
F FEMALE
U UNKNOWN

AGE:

DOB:

NEGLIGENT HOMICIDE

30 Child Playing w/ Weapon

31 Gun Cleaning Accident

32 Hunting Accident

33 Other Negligent Weapons Handling

34 Other Negligent Killing

40 Child Abuse

Shreveport Police Department OFFENSE REPORT

Report Received By

- 1 Phone 4 Mail
 2 911 5 Person
 3 Teletype 6 Other

CAD # 20088408

OFFENSE # 2020013005

- Felony Misdemeanor Incident

OFFICER'S NAME Clanton, S D BADGE # 363 SUPERVISOR'S NAME _____ BADGE # _____

DATE REPORTED 06/02/2020 TIME REPORTED 09:51 OCCURRENCE DATE 06/02/2020

OCCURRENCE TIME 09:45/ 09:51 DAY TUESDAY OFFENSE AS REPORTED _____

LOCATION OF INCIDENT 5842 LINE AV SHREVEPORT, LA DISTRICT 05

Numerical Street Name

DID VICTIM RECEIVE VINE INFO WAS AFFIDAVIT SUBMITTED WAS DOMESTIC VIOLENCE INVOLVED (RECORDS USE ONLY) REVIEWERS BADGE # 260

OFFENSE	OFFENSE	LRS#	UCR	ATT/COM	LOCATION ENTER CODE	WEAPON ENTER CODE	ENTER 'A' AUTOMATIC	CRIMINAL ACTIVITY ENTER UP TO 3 CODES	INCIDENT STATUS: <input type="checkbox"/> UNFOUNDED <input type="checkbox"/> CLEARED BY ARREST <input checked="" type="checkbox"/> PENDING <input type="checkbox"/> CLEARED EXCEPTIONALLY A <input type="checkbox"/> DEATH OF OFFENDER B <input type="checkbox"/> PROSECUTION DECLINED C <input type="checkbox"/> EXTRADITION DECLINED D <input type="checkbox"/> REFUSED TO COOPERATE E <input type="checkbox"/> JUVENILE NO CUSTODY O <input type="checkbox"/> OTHER N <input type="checkbox"/> NOT APPLICABLE
	BATTERY SIMPLE	14:35	BS	<input type="checkbox"/> ATT <input checked="" type="checkbox"/> COM	09	40	,	X	
ENTRY/REMAIN/FORBIDDEN	14:63.3	TRES	<input type="checkbox"/> ATT <input checked="" type="checkbox"/> COM	09	40	,	X		
PROFANE/LANGUAGE	50-155	CO	<input type="checkbox"/> ATT <input checked="" type="checkbox"/> COM	06	40	,	X		
			<input type="checkbox"/> ATT <input type="checkbox"/> COM						
			<input type="checkbox"/> ATT <input type="checkbox"/> COM						

LOCATION OF OFFENSE	TYPE OF WEAPON/FORCE INVOLVED:	TYPE CRIMINAL ACTIVITY:
01 AIR/BUS/TRAIN TERMINAL 02 BANK/SAVINGS & LOAN 03 BAR/NIGHT CLUB 04 CHURCH/SYNAGOGUE/TEMPLE 05 COMMERCIAL/OFFICE BUILDING 06 CONSTRUCTION SITE 07 CONVENIENCE STORE 08 DEPARTMENT/DISCOUNT STORE 09 DRUG STORE/DR'S OFFICE/HOSPITAL 10 FIELD/WOODS 11 GOVERNMENT/PUBLIC BUILDINGS 12 GROCERY/SUPERMARKET 13 HIGHWAY/ROAD/ALLEY 14 HOTEL/MOTEL/ETC. 15 JAIL/PRISON 16 LAKE/WATERWAY 17 LIQUOR STORE 18 PARKING LOT/GARAGE 19 RENTAL STORAGE/FACILITY 20 RESIDENCE/HOME 21 RESTAURANT 22 SCHOOL/COLLEGE 23 SERVICE/GAS STATION 24 SPECIALTY STORE (TV,FUR,ETC) 25 OTHER/UNKNOWN 40 CASINO LAND BASED 41 CASINO RIVER BOAT	11 FIREARM (type not stated) 12 HANDGUN 13 RIFLE 14 SHOTGUN 15 OTHER FIREARM 20 KNIFE/CUTTING INSTRUMENT 30 BLUNT OBJECT 35 MOTOR VEHICLE 40 PERSONAL WEAPONS 50 POISON 60 EXPLOSIVES 65 FIRE/INCENDIARY 70 NARCOTICS/DRUGS 85 ASPHYXIATION 90 OTHER 95 UNKNOWN 99 NONE	B BUYING/RECEIVING C CULTIVATION/ MANUFACTURING/PUBLISHING D DISTRIBUTION/SELLING E EXPLOITING CHILDREN O OPERATING/PROMOTING/ ASSISTING P POSSESSING/CONCEALING T TRANSPORTING/TRANSMITTING IMPORTING U USING/CONSUMING I POSSESSION W/ INTENT TO DIST. X OTHER

BRIEF NARRATIVE

SHREVEPORT CITY COUNCILMAN FORCED HIS WAY INTO A BUSINESS THAT WAS OPEN BY APPOINTMENT ONLY. HE SHOVED AN EMPLOYEE WHO ADVISED HIM THAT HE COULD NOT ENTER THE BUILDING AND REFUSED TO LEAVE AFTER BEING ORDERED TO DO SO BY SEVERAL STAFF MEMBERS. HE SHOUTED PROFANITIES AT THE STAFF UNTIL HE WAS GIVEN A PRIVATE AUDIENCE WITH THE OWNER OF THE BUSINESS.

REPORTING PERSON CLASS CODE: JUVENILE WITNESS INTERVIEWED

REPORTING PERSON:
Irving, Rochelle SEX F RACE W DOB 08/26/1969
 Last First Middle

ADDRESS 5842 LINE AV SHREVEPORT, LA 71106 HOME PHONE (318) 865-0017 BUSINESS PHONE _____
 Numerical Street Name City/Town State Zip

(For Burglary Only) POINT OF ENTRY: _____
 TOOL/EVIDENCE USED: _____
 NUMBER OF PREMISES ENTERED: _____
 METHOD OF ENTRY: FORCIBLE NO FORCE

INVESTIGATIVE FACTORS			
Info Element	Wgt	Info Element	Wgt
Est. time lapse between crime and the initial investigation		On view report of offense	1 <input checked="" type="checkbox"/>
Less than 1 hour	5 <input checked="" type="checkbox"/>	Usable fingerprints	7 <input type="checkbox"/>
1 to 12 hours	1 <input type="checkbox"/>	Suspect name	9 <input checked="" type="checkbox"/>
More than 12 hours	0 <input type="checkbox"/>	Suspect description	5 <input type="checkbox"/>
Witness report of offense	7 <input checked="" type="checkbox"/>	Vehicle description	2 <input type="checkbox"/>
		Vehicle license number	5 <input type="checkbox"/>
Total Score:			22