



# CORONA POLICE DEPARTMENT

730 PUBLIC SAFETY WAY  
CORONA, CALIFORNIA 92880-2002  
CA0331500

2016 MAR 21 AM 6 45

Initial  
 Supplemental

<input checked="" type="checkbox"/> Arrest	<input type="checkbox"/> Additional Person/Vehicle	<b>CR# 16-3353</b>
<input type="checkbox"/> Suspect	<input checked="" type="checkbox"/> Narrative	
<input type="checkbox"/> Unknown Suspect	<input type="checkbox"/> 293(a) PC Advisement	Related Report(s)
<input checked="" type="checkbox"/> Property/Evidence		---

<b>CASE SUMMARY</b>	Primary Code Section/Description <b>69 PC- Resist Police Officer by Force</b>	BCS Code(s) <b>260 700</b>	Counts <b>01</b>
	Other Code Section/Description <b>11550(a) HS- Under the Influence of a Controlled Substance</b>	BCS Code(s) <b>180105</b>	Counts <b>01</b>
	Other Code Section/Description ---	BCS Code(s)	Counts
	Supplemental Code <input type="checkbox"/> Modify <input type="checkbox"/> New <input checked="" type="checkbox"/> Same <input type="checkbox"/> Add	BCS Code(s)	Counts
Location <b>805 S. Merrill St. #D, Corona</b>		Business Name <input type="checkbox"/> Victim <input type="checkbox"/> N/A	
Occurrence On/Between Date/Time <b>03-18-16 / 1913</b> Date/Time ---		Reported Date/Time <b>03-18-16 / 1913</b>	
Case Status: <b>P</b>	If Cleared - Code: <b>E</b>	Officer Injured? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes # <b>2</b>	Officer Killed? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes #

VM = Victim RP = Reporting Party / Informant WT = Witness OT = Other SU = Suspect

**RP01**

---	Name (L, F, M) ---		DOB/Age ---	Occupation ---	Residential Phone ( ) ---		
Residence Address ---			City	Zip	Cellular Phone ( ) ---		
Business <input type="checkbox"/> Same as Residence		City	Zip	Business Phone ( ) ---			
Sex ---	Race ---	Height ---	Weight ---	Build ---	Hair ---	Eyes ---	
Social Security # ---				ID/Driver's License # & State ---			
Clothing: ---				Additional Information: ---			
Vehicle Description				<input type="checkbox"/> Victim's Vehicle		<input type="checkbox"/> Suspect's Vehicle	
License ---	State ---	Year ---	Make ---	Model ---	Body Style ---	Color ---	
<input type="checkbox"/> Unique Characteristics			<input type="checkbox"/> Description of Damage		<input type="checkbox"/> N/A		

**Summary / Narrative:**  
 RP01 called 911 and said that SU01 had hit him. SU01 opened the door and a fight ensued. SU01 was arrested for 11550(A) HS and 69 PC.

Property Loss <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes / Value \$	Property Damage <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes / Describe:
Officer ID# / Name <b>002536 / Hungerford</b>	Reviewed ID# / Name <b>MORRIS # 001067</b>
CPD Form # 04-001 (2013.12.04)	Copies: <input type="checkbox"/> Det <input type="checkbox"/> Prop <input checked="" type="checkbox"/> DA <input checked="" type="checkbox"/> CPD <input type="checkbox"/> Officer: <input type="checkbox"/> CA <input checked="" type="checkbox"/> Other: P&T
RMS Entry CLETS/NCIC	Routed By: <b>[Signature]</b>
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# CORONA POLICE DEPARTMENT

730 PUBLIC SAFETY WAY  
P.O. BOX 940  
CORONA, CALIFORNIA 92878-0940  
CA0331500

Suspect

Arrest

@1913

AR # (Booking#) <b>16-1265</b>		Gang Information: <input type="checkbox"/> Known <input type="checkbox"/> Suspected		Re Other Reports		CR# <b>16-3353</b>	
Name (Last, First, Middle) <b>Rios, Edgar</b>				Age <b>29</b>	D.O.B. <b>11-18-88</b>	Occupation <b>Mover</b>	
AKA's <b>"Ivan Rios" "Edgar Correa"</b>				Tattoos / Scars <b>R/Arm "Eileen" L/Arm "silvia"</b>			
Residence Address <b>805 S.Merrill St</b>			Apt#	City / State <b>Corona CA 92882</b>		Zip Code	Phone # <b>9512545091</b>
Business Name / Address <b>JSP Moving</b>				City / State		Zip Code	Phone #
Sex <b>M</b>	Race <b>H</b>	Height <b>508</b>	Weight <b>150</b>	Build <b>Med</b>	Hair <b>BLACK</b>	Eyes <b>BRO</b>	Clothing <b>WHT SHIRT, BLK SHORTS</b>
Driver's License # [REDACTED]		State [REDACTED]	SSN# <b>Unk</b>		Place of Birth <b>Mexico</b>		Consular Notified <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Vehicle License # ---		State ---	Year ---	Make ---	Model ---	Body Style ---	Color(s) ---
Disposition of vehicle <input type="checkbox"/> Left parked at scene <input checked="" type="checkbox"/> N/A			Release at scene to: <input checked="" type="checkbox"/> N/A		Impounded/stored at: <input type="checkbox"/> Other <input type="checkbox"/> C.City <input type="checkbox"/> Specialty <input type="checkbox"/> Hamner <input checked="" type="checkbox"/> N/A		
Date / Time of Arrest <b>03/18/16/ 1930</b>			Arresting Officer (Name / ID) <b>Hungerford#002536</b>			Location of Arrest <b>805 S.Merrill St #D, Corona</b>	
Date / Time / Booking Officer				Date / Time / Searching Officer			
<input type="checkbox"/> Address Book <input type="checkbox"/> Credit Cards <input type="checkbox"/> Purse <input type="checkbox"/> Belt <input type="checkbox"/> Keys <input type="checkbox"/> Shoes <input type="checkbox"/> Billfold <input type="checkbox"/> Knife <input type="checkbox"/> Wallet <input type="checkbox"/> Brush <input type="checkbox"/> Lighter <input type="checkbox"/> Additional Prop (Prop Report) <input type="checkbox"/> Cigarette <input type="checkbox"/> Make-up <input type="checkbox"/> Money/Amount \$ <input type="checkbox"/> Comb <input type="checkbox"/> Medicine <input type="checkbox"/> Armory <input type="checkbox"/> Yes <input type="checkbox"/> No				Jewelry / Other Property:			
Property Inventory By		Verified By		Prop Loc	Cell #	Prisoner's Signature Property OK	
Code Violation	M/F	Cts.	Description / Warrant #			Bail Amount	BCS Code #
<b>169 PC</b>	<b>F</b>	<b>01</b>	<b>Resist PO by force</b>			<b>\$5,000</b>	<b>260502</b>
<b>2.11550(a) HS</b>	<b>M</b>	<b>01</b>	<b>UTI</b>			<b>--</b>	<b>180305</b>
3.							
4.							
5.							
6.							
<input checked="" type="checkbox"/> Booked at CPD		<input checked="" type="checkbox"/> RCJ		<input type="checkbox"/> Bailed		<input type="checkbox"/> 853.6 PC <input type="checkbox"/> Cite # / Date	
<input type="checkbox"/> Juvenile Petition		<input type="checkbox"/> 849(b)(____) PC		<input type="checkbox"/> Other			
Prisoner Released By: Date / Time:				Property Released By: Date / Time:			
WC's Remarks for Prisoner's Release:				WC's Signature Date / Time			
Received of Chief of Police and Jailer all property and money belonging to me. (Prisoner's Signature)							
Signature of Arresting Officer / ID # <b>Hungerford#002536</b>			Reviewed by Name / ID #			Case Status	If Cleared - Code
CPD70-007 (9/14)	Copies: <input type="checkbox"/> DET <input type="checkbox"/> Traf. <input type="checkbox"/> Prop <input type="checkbox"/> Officer: _____ <input type="checkbox"/> DA <input type="checkbox"/> DOJ <input type="checkbox"/> Crime Prev <input type="checkbox"/> Other: _____			Routed By	RMS _____ Clet/NCIC _____	Page <b>3</b> of <b>10</b>	
White - Officer Copy		Green - Records		Pink - Prisoner		Blue - Record Spindle	

Hair Length		Facial Hair		Teeth		Modus Operandi	
1 <input type="checkbox"/> Bald	Q20	1 <input checked="" type="checkbox"/> Beard - scraggly	Q25	1 <input type="checkbox"/> Braces	Q30	Suspect pretends to be: Q34	
2 <input type="checkbox"/> Collar		2 <input type="checkbox"/> Beard - short		2 <input type="checkbox"/> Bucked		1 <input type="checkbox"/> Taking a survey	
3 <input type="checkbox"/> Receding		3 <input type="checkbox"/> Beard - full		3 <input type="checkbox"/> Chipped		2 <input type="checkbox"/> Customer/client	
4 <input type="checkbox"/> Shaved		4 <input type="checkbox"/> Clean shaven		4 <input type="checkbox"/> Crooked		3 <input type="checkbox"/> Delivery person	
5 <input checked="" type="checkbox"/> Short		5 <input type="checkbox"/> Fumanchu		5 <input type="checkbox"/> Gaps between		4 <input type="checkbox"/> Stranded motorist	
6 <input type="checkbox"/> Shoulder		6 <input type="checkbox"/> Goatee		6 <input type="checkbox"/> Gold/Silver capped		5 <input type="checkbox"/> Intoxicated	
7 <input type="checkbox"/> Other:		7 <input type="checkbox"/> Mustache - thin		7 <input type="checkbox"/> Jewel studded		6 <input type="checkbox"/> Employee/employer	
<b>Hair Type</b>		8 <input type="checkbox"/> Mustache - thick		8 <input type="checkbox"/> Missing		7 <input type="checkbox"/> Friend/relative	
1 <input type="checkbox"/> Coarse	Q21	9 <input type="checkbox"/> Sideburns		9 <input type="checkbox"/> Retainer		8 <input type="checkbox"/> Ill/injured	
2 <input type="checkbox"/> Fine		10 <input type="checkbox"/> Unshaven		10 <input checked="" type="checkbox"/> Stained/decayed		9 <input type="checkbox"/> Needed telephone	
3 <input checked="" type="checkbox"/> Thick		11 <input type="checkbox"/> Other:		11 <input type="checkbox"/> Other:		10 <input type="checkbox"/> Police/law official	
4 <input type="checkbox"/> Thinning		<b>Complexion</b>		<b>Unique Clothing</b>		11 <input type="checkbox"/> Renter	
5 <input type="checkbox"/> Wig		1 <input type="checkbox"/> Acne	Q26	1 <input type="checkbox"/> Baseball cap	Q31	12 <input type="checkbox"/> Repair man	
6 <input type="checkbox"/> Wiry		2 <input type="checkbox"/> Pocked marked		2 <input type="checkbox"/> Cowboy hat		13 <input type="checkbox"/> Sales - lawful goods	
7 <input type="checkbox"/> Other:		3 <input type="checkbox"/> Albino		3 <input type="checkbox"/> Leather hat		14 <input type="checkbox"/> Sales - unlawful goods	
<b>Hair Condition</b>		4 <input type="checkbox"/> Dark		4 <input checked="" type="checkbox"/> Other hat		15 <input type="checkbox"/> Seeking assistance	
1 <input type="checkbox"/> Clean	Q22	5 <input type="checkbox"/> Freckled		5 <input type="checkbox"/> Ski mask		16 <input type="checkbox"/> Seeking directions	
2 <input type="checkbox"/> Dirty		6 <input type="checkbox"/> Light/fair		6 <input type="checkbox"/> Nylon mask		17 <input type="checkbox"/> Seeking someone	
3 <input checked="" type="checkbox"/> Greasy		7 <input checked="" type="checkbox"/> Medium		7 <input type="checkbox"/> Gloves		<b>Suspect's Actions</b>	
4 <input type="checkbox"/> Matted		8 <input type="checkbox"/> Olive		8 <input type="checkbox"/> Military jacket		1 <input type="checkbox"/> Climaxed	Q35
5 <input type="checkbox"/> Odor		9 <input type="checkbox"/> Pale/shallow		9 <input type="checkbox"/> Bandana		2 <input type="checkbox"/> Unknown if climaxed	
6 <input type="checkbox"/> Other:		10 <input type="checkbox"/> Ruddy		10 <input type="checkbox"/> Ski/down jacket		3 <input type="checkbox"/> Ties or binds victim	
<b>Hair Style</b>		11 <input type="checkbox"/> Tanned		11 <input type="checkbox"/> Vest		4 <input type="checkbox"/> Covers victim's face	
1 <input checked="" type="checkbox"/> Afro/natural	Q23	12 <input type="checkbox"/> Weathered		12 <input type="checkbox"/> Levi/denim jacket		5 <input type="checkbox"/> Photographs victim	
2 <input type="checkbox"/> Braided		13 <input type="checkbox"/> Wrinkled		13 <input type="checkbox"/> Windbreaker		6 <input type="checkbox"/> Forces oral copulation	
3 <input type="checkbox"/> Bushy		14 <input type="checkbox"/> Other:		14 <input type="checkbox"/> Leather jacket		7 <input checked="" type="checkbox"/> Orally copulates victim	
4 <input type="checkbox"/> Butch		<b>Glasses/Lenses</b>		15 <input type="checkbox"/> Gang attire		8 <input type="checkbox"/> Rapes with foreign object	
5 <input type="checkbox"/> Combed back		1 <input checked="" type="checkbox"/> Yes - unknown type	Q27	16 <input type="checkbox"/> Other:		9 <input type="checkbox"/> Sodomized victim	
6 <input type="checkbox"/> Corn-row		2 <input type="checkbox"/> Prescription glasses		<b>Weapon</b>		10 <input type="checkbox"/> Suggested lewd act	
7 <input type="checkbox"/> Curlers		3 <input type="checkbox"/> Sun glasses		1 <input type="checkbox"/> Club	Q32	11 <input type="checkbox"/> Inserted finger	
8 <input type="checkbox"/> Curly		4 <input type="checkbox"/> Wire frames		2 <input type="checkbox"/> Hand gun		12 <input type="checkbox"/> Forced to fondle	
9 <input type="checkbox"/> Flattop		5 <input type="checkbox"/> Plastic frames		3 <input type="checkbox"/> Other unknown gun		13 <input type="checkbox"/> Masturbated self	
10 <input type="checkbox"/> Military		6 <input type="checkbox"/> Lens ornamentation		4 <input type="checkbox"/> Rifle		14 <input type="checkbox"/> Rapes more than once	
11 <input type="checkbox"/> Mohawk		7 <input type="checkbox"/> Contact lenses		5 <input type="checkbox"/> Shot gun		15 <input type="checkbox"/> Forces to disrobe	
12 <input type="checkbox"/> Ponytail		8 <input type="checkbox"/> Frame - gold		6 <input type="checkbox"/> Toy gun		16 <input type="checkbox"/> Follows victim	
13 <input type="checkbox"/> Punk		9 <input type="checkbox"/> Frame - silver		7 <input type="checkbox"/> Simulated		17 <input type="checkbox"/> Forces vehicle off the road	
14 <input type="checkbox"/> Straight		10 <input type="checkbox"/> Frame - black		8 <input type="checkbox"/> Pocket knife		18 <input type="checkbox"/> Strikes victim	
15 <input type="checkbox"/> Styles		11 <input type="checkbox"/> Other frame color		9 <input type="checkbox"/> Butcher knife		19 <input type="checkbox"/> Stabs victim	
16 <input type="checkbox"/> Center parted		12 <input type="checkbox"/> Other:		10 <input type="checkbox"/> Other cutting instrument		20 <input type="checkbox"/> Shoots victim	
17 <input type="checkbox"/> Left parted		<b>RT / LT Handed</b>		11 <input type="checkbox"/> Hands/feet		21 <input type="checkbox"/> Fires weapon	
18 <input type="checkbox"/> Right parted		0 <input type="checkbox"/> Unknown	Q28	12 <input type="checkbox"/> Bodily force		22 <input type="checkbox"/> Uses demand note	
19 <input checked="" type="checkbox"/> Unkempt		1 <input checked="" type="checkbox"/> Right-handed		13 <input type="checkbox"/> Strangulation		23 <input type="checkbox"/> Wears gloves	
20 <input type="checkbox"/> Wavy		2 <input type="checkbox"/> Left-handed		14 <input type="checkbox"/> Tire iron		24 <input type="checkbox"/> Hides in bushes	
21 <input type="checkbox"/> Widows peak		<b>Speech / Voice</b>		15 <input type="checkbox"/> Vehicle		25 <input type="checkbox"/> Has accomplice(s)	
22 <input type="checkbox"/> Other:		0 <input type="checkbox"/> None	Q29	16 <input type="checkbox"/> Explosive device		26 <input type="checkbox"/> Claims an accomplice	
<b>Distinct Feature</b>		1 <input type="checkbox"/> Eastern US accent		17 <input type="checkbox"/> Other:		27 <input type="checkbox"/> Snatches victim's purse	
1 <input type="checkbox"/> Amputation	Q24	2 <input type="checkbox"/> Southern US accent		<b>Tattoos / Marks / Scars</b>		28 <input checked="" type="checkbox"/> Under the influence	
2 <input type="checkbox"/> Artificial limb		3 <input checked="" type="checkbox"/> Foreign accent		1 <input checked="" type="checkbox"/> Face	Q33	29 <input type="checkbox"/> Demands/steals vehicle	
3 <input type="checkbox"/> Crane/crutch		4 <input type="checkbox"/> Deep		2 <input type="checkbox"/> Neck		30 <input type="checkbox"/> Demands narcotics	
4 <input type="checkbox"/> Cast - arm/leg		5 <input type="checkbox"/> Disguised		3 <input type="checkbox"/> Arms		31 <input type="checkbox"/> Blindfolds victim	
5 <input checked="" type="checkbox"/> Crippled		6 <input type="checkbox"/> High		4 <input type="checkbox"/> Hands		32 <input type="checkbox"/> Forces to lie down	
6 <input type="checkbox"/> Deformed		7 <input type="checkbox"/> Slurred		5 <input type="checkbox"/> Legs		33 <input type="checkbox"/> Forces to rear of store	
7 <input type="checkbox"/> Growth/mole		8 <input type="checkbox"/> Soft		6 <input type="checkbox"/> Shoulders		34 <input type="checkbox"/> Locks in room/office	
8 <input type="checkbox"/> Hearing aid		9 <input type="checkbox"/> Speech impediment		7 <input type="checkbox"/> Chest		35 <input type="checkbox"/> Kidnaps victim	
9 <input type="checkbox"/> Limp		10 <input type="checkbox"/> Other:		8 <input type="checkbox"/> Back		36 <input type="checkbox"/> Makes victim count	
10 <input type="checkbox"/> Skin discolored				9 <input type="checkbox"/> Scar feature		37 <input type="checkbox"/> Handcuffs victim	
11 <input type="checkbox"/> Spastic movements				10 <input type="checkbox"/> Mark feature		38 <input type="checkbox"/> Tortures victim	
12 <input checked="" type="checkbox"/> Earring/left ear				11 <input type="checkbox"/> Other:		39 <input type="checkbox"/> Other:	
13 <input type="checkbox"/> Earring/right ear							
14 <input type="checkbox"/> Other:							

Narrative:

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**Corona Police Department  
Continuation Sheet**

**CR #16-3353**

1 **ASSISTING PERSONNEL:**

2	Sgt. Morris	Corona Police Department
3	Cpl. Deruyter	Corona Police Department
4	Ofcr. Tarrant	Corona Police Department
5	Ofcr. Brazeal	Corona Police Department
6	Ofcr. M. Placencia	Corona Police Department
7	Ofcr. S. Slane	Corona Police Department
8	Ofcr. Heath	Corona Police Department
9	Engine 2	Corona Fire Department
10	Ambulance 344	American Medical Response
11	Phlebotomist Ayala	American Forensic Nurses

12  
13 **SCENE:**

14 805 S. Merrill St. #D, Corona is a small apartment located on the second floor of the building.  
15 There is a small living room directly inside the doorway with a couch and small entertainment  
16 center.

17  
18 **EVIDENCE:**

19 The following evidence was logged into Corona PD property, see attached property sheet.  
20 • CD with photos of SU01, SU01's consent to search statement, and RP01's statement  
21 • CD with photos of the scene

22  
23 **INJURIES:**

24 SU01 sustained bruising to his right eye, an approximately 4" cut to his right leg, one taser dart  
25 puncture to his left arm, and two taser dart punctures on his lower back.

26  
27 **DETAILS:**

28 On 03-18-16, I was employed as a Peace Officer for the City of Corona; County of Riverside and  
29 was wearing a full police uniform and driving a marked black and white police car (unit #79222).  
30 The police car is equipped with a dash camera and the event may or may not have been  
31 captured.

32  
33 At approximately 1913 hours, I and other officers were dispatched to 805 S. Merrill St. #D,  
34 Corona reference a 911 call. (RP01) [REDACTED] called 911 and said that his brother, (SU01)  
35 Edgar Rios was under the influence and had battered him. [REDACTED] told 911 dispatchers that  
36 Edgar is known to use PCP and that it was taking too long for police to respond, the phone line  
37 then disconnected. I recognized Edgar's name as someone that frequently fights with police  
38 and family members. Upon my arrival I asked dispatch to call [REDACTED] to have him step out of the

**Corona Police Department  
Continuation Sheet**

**CR #16-3353**

1 house to meet me. Dispatchers attempted to call [REDACTED] twice but he did not answer. Based on  
2 [REDACTED] telling dispatchers that Edgar had battered him and that it was taking a long time for the  
3 police response I decided to go to the apartment to conduct a welfare check on [REDACTED]  
4

5 Cpl. Deruyter, Officer Tarrant, Officer Brazeal and I walked up to the front door of the  
6 apartment. I knocked on the door and Edgar answered the door. Edgar was sweating profusely  
7 and appeared to be out of breath. Fearing that Edgar had been in a fight with [REDACTED] I grabbed a  
8 hold of Edgar's right arm to detain him so we could check on [REDACTED] welfare. As I grabbed onto  
9 Edgar's right arm Cpl. Deruyter announced that Edgar had a knife in his pocket. I told Edgar to  
10 place his hands behind his back and Edgar pulled his arm away from me as he began to step  
11 backwards. Fearing that Edgar might be trying to arm himself with the knife in his pocket I  
12 ordered him to lie on the ground. Edgar continued to walk backward while trying to pull his  
13 right arm from my grasp and began to kick towards my legs.  
14

15 Edgar backed into a couch in the living room. Officer Tarrant had control of Edgar's left arm  
16 and I still had control of his right arm. I again ordered Edgar to lie on the ground and told him  
17 he was under arrest. Edgar pushed off of the couch as he attempted to pull his arm from my  
18 grasp. As Officer Tarrant and I were attempting to take Edgar to the ground we collided into a  
19 TV on the wall, and a small desk. Officer Tarrant and I were able to force Edgar to the ground  
20 and Officer S. Slane began to assist us with arresting Edgar. Edgar was able to free himself from  
21 my grasp and get off the floor and began to exit the front door. Officer Brazeal was able to gain  
22 control of one of Edgar's feet and was holding him on the ground. Edgar was continuing to  
23 attempt to get out of our control. I deployed my X26P Taser (SN: X120033TW, Cartridge:  
24 C4102RNAT). I saw one dart strike Edgar's left arm (unknown if the second dart made contact  
25 with Edgar) and I drive stunned the taser into Edgar's waist while the cycle was running, but the  
26 taser did not have an effect and I re-holstered my taser.  
27

28 Edgar continued to struggle with officers as he went down the stairs towards the street.  
29 Assisting officers were able to get Edgar onto the ground where I restrained his legs. As I was  
30 attempting to restrain Edgar's legs he attempted to kick me several times. Officers were able to  
31 handcuff Edgar, but Edgar was continuing to kick towards me. Officer Brazeal and I were able  
32 to apply the TARP (Total Appendage Restraint Procedure) at 1932 hours. During the struggle  
33 with Edgar several pieces of hard plastic and glass broke from items inside the house, which  
34 caused Edgar to sustain an approximately 4" cut on his right leg. Due to Edgar's extremely  
35 excited state he Corona Fire and AMR was requested to the scene. Corona Fire Engine 2 and  
36 AMR Ambulance 344 responded and assessed Edgar. AMR Paramedics transported Edgar to  
37 Corona Regional Medical Center (CRMC) for treatment.  
38

39 While at the scene I contacted (RP01) [REDACTED] the following is a summary of his statement.

Corona Police Department  
Continuation Sheet

CR #16-3353

1  
2 █████ said he called 911 because Edgar was under the influence and was not letting him  
3 leave the apartment. █████ said he was eventually able to push Edgar out of his way to  
4 leave the apartment. █████ would not elaborate further if Edgar hit him. █████ would  
5 not provide further information. █████ did not want Edgar arrested for not letting him  
6 leave or for hitting him.  
7

8 The TARP was removed from Edgar at approximately 2012 hours while he was at CRMC. While  
9 at CRMC Edgar said he had "two bumps of cocaine". While dealing with Edgar I observed the  
10 listed objective symptoms of being under the influence of a controlled substance; eyelid flutter,  
11 dry mouth, and being combative. Based on Edgar's statements, actions, and objective  
12 symptoms I arrested him for 11550(a) HS. Phlebotomist Ayala responded to CRMC and  
13 obtained a sample of blood from Edgar, which I witnessed. I later placed the vial of blood into  
14 the secured BioTox analysis box in the CPD Jail. While at CRMC Officer M. Placencia took  
15 photos of Edgar. CRMC treated Edgar and issued an ok to book.  
16

17 Officer M. Placencia, Sgt. Morris and I began to escort Edgar out of the hospital towards my  
18 police car to transport him to RCJ. As we exited the hospital Edgar would not walk anymore  
19 and began to pull away from us. Based on Edgar's behavior I applied the TARP to Edgar again at  
20 approximately 2305 hours, with the assistance of Officer M. Placencia. After a brief struggle we  
21 were able to seat Edgar in the back seat of my police car and seatbelt him. I drove Edgar to RCJ  
22 where he was booked.  
23

24 I later placed the photos of Edgar, Edgar's consent to search his blood statement, and █████  
25 audio recorded statement onto a CD, which I logged in as evidence. Officer Heath provided me  
26 with photos he took of the scene, which I logged in as evidence. Sgt. Stofila later downloaded  
27 the taser data, see attached print out. Refer to the additional supplemental reports for further  
28 details.  
29

30 **NOTE:**

31 It should be noted during the fight with Edgar several pieces of glass and hard plastic were  
32 broken in the house. During the altercation I received an approximate 8" scratch to my right  
33 elbow and was exposed to Edgar's blood. Police Supervision was notified and the blood  
34 exposure-process was completed. Edgar signed the attached consent to search form for his  
35 blood. Officer M. Placencia also obtained audio of Edgar consenting to a search of his blood,  
36 which he provided to me.  
37

38 **DISPOSITION:**

39 Closed by arrest; refer to the DA for filing.




**CORONA POLICE DEPARTMENT**

730 Public Safety Way  
Corona CA 92880

**PROPERTY REPORT**

CASE NO. : 16-3353
DATE OF OFFENSE: 03/19/2016
SUSPECT LAST NAME: SUSPECT FIRST NAME: <input type="checkbox"/> JUVENILE <input type="checkbox"/> SEARCH WARRANT
VICTIM: ,
ASSOCIATED CASES

COLLECTED BY HUNGERFORD, STEVEN (002536)		DATE/TIME COLLECTED 03/18/2016	LOCATION COLLECTED	COLLECTED ADDRESS
ITEM # SH1	TYPE Evidence	BRAND	SERIAL NO.	TOTAL VALUE
QTY. 2	MEASURE	PRESUMPTIVE DRUG	COLOR	
CALIBER	BRL LENGTH	GUN TYPE CODE	GUN CAT CODE	
BIKE SPEED	<input type="checkbox"/> BOYS	<input type="checkbox"/> GIRLS	MODEL	
 201602555		DESCRIPTION AUDIO/VIDEO (CASS/CD/DVD/TAPE) - 1 CD WITH PHOTOS AND AUDIO, 1 CD WITH SCENE PHOTOS		
OWNER: ,		ADDRESS:		
REPORTING OFFICER HUNGERFORD, STEVEN (002536)	ID#	DATE 03/19/2016		





**Corona Police Department**  
 730 Public Safety Way  
 Corona, Ca. 92880  
 951-736-2330



**CONSENT TO SEARCH**

Date: 03-18-16 Location: CRMC

I, EDGAR FIOS, having been informed of my Constitutional right not to have a search made of the premises and/or vehicle mentioned herein without a search warrant and my right to refuse consent to such a search. However, I hereby authorize: Corona Police Department Personnel and \_\_\_\_\_ of the City of CORONA, State of California, to conduct a complete search of BLOOD

This written permission is given by me to the above-named officers/detectives voluntarily and without promises, threats or duress of any kind. I understand that I may ask for and receive a receipt for all things taken as a result of said search.

*[Handwritten Signature]*

Signature of Consent Party

805 S. MERRILL ST #D, CORONA, CA  
 Address, city, state and phone number

Owner, renter, lessee, etc

*[Handwritten Signature]*  
 Signature of Witness OFFICER. HUNVEFORD



**TASER Information**

**Serial** X120033TW  
**Model** TASER X26P  
**Firmware Version** Rev. 04.010  
**Application Version** 2.9.2  
**Health** Good

**Offline Report**

**Local Timezone** Pacific Standard Time (UTC -07:00)  
**Generated On** 19 Mar 2016 19:04:17

**Dates from : Fri Mar 18 00:00:00 2016 to : Sun Mar 20 00:00:00 2016**

**Device (X26P)**

Seq #	Local Time [DD:MM:YYYY hh:mm:ss]	Event [Event Type]	Duration [Seconds]	Temp [Degrees Celcius]	Batt Remaining [%]
98	18 Mar 2016 19:24:14	Armed		26	97
99	18 Mar 2016 19:24:15	Trigger	5		97
100	18 Mar 2016 19:24:24	Safe	10	27	97
101	19 Mar 2016 00:15:24	Armed		27	97
102	19 Mar 2016 00:15:25	Safe	1	27	97
103	19 Mar 2016 05:09:25	USB Connected			
104	19 Mar 2016 19:03:05	Time Sync	19 Mar 2016 18:58:55 to 19 Mar 2016 19:03:05		
105	19 Mar 2016 19:03:20	Time Sync	19 Mar 2016 19:03:19 to 19 Mar 2016 19:03:20		

# AMERICAN FORENSIC NURSES

## REQUEST FOR SERVICE

No.: **059771**

### Field Technician

Name:

M. M. M. M.

ID #:

1075

Time of Contact:

1055

Arrival Time:

1020

Signature:

*[Signature]*

### Witnessing Officer

Name:

H. M. M. M.

ID #:

007-331

Agency:

San Diego PD

Signature:

*[Signature]*

Incorporated  Unincorporated

City of Incorporation:

San Diego

### Subject and Service Data

Date:

3-18-16

Case #:

16-3553

Name:

K. M. S. E. D. O. W.

ETA:

on site

Location:

San Diego Regional Hospital

Puncture Site:

Right Arm

Offense Code:

11550

Time Service Completed:

2078

Blood Alcohol

Urine Alcohol

Blood Drug

Urine Drug

DNA

Taser Removal

Suspect Kit (FEER)

Reference Kit

Dry Run

Other

Comments:

*White & Yellow copy to AFN / Pink copy to Employee / Gold copy to Officer*



# CORONA POLICE DEPARTMENT

730 PUBLIC SAFETY WAY  
CORONA, CALIFORNIA 92880-2002  
CA0331500

Initial  
 Supplemental

2016 MAR 21 AM 6:46

<input type="checkbox"/> Arrest <input type="checkbox"/> Suspect <input type="checkbox"/> Unknown Suspect <input type="checkbox"/> Property/Evidence		<input type="checkbox"/> Additional Person/Vehicle <input checked="" type="checkbox"/> Narrative <input type="checkbox"/> 293(a) PC Advisement		<b>CR# 16-3353</b> Related Report(s)		
<b>CASE SUMMARY</b>	Primary Code Section/Description			BCS Code(s)		Counts
	Other Code Section/Description			BCS Code(s)		Counts
	Other Code Section/Description			BCS Code(s)		Counts
	Supplemental Code <input type="checkbox"/> Modify <input type="checkbox"/> New <input checked="" type="checkbox"/> Same <input type="checkbox"/> Add			BCS Code(s)		Counts
	Location <b>805 S. Merrill St. #D, Corona</b>			Business Name <input type="checkbox"/> Victim <input checked="" type="checkbox"/> N/A		
Occurrence On/Between Date/Time <b>03/18/2016 1910</b> Date/Time			Reported Date/Time <b>03/18/2016 1913</b>			
Case Status:		If Cleared - Code:		Officer Injured? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes # <b>2</b>		Officer Killed? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes #
VM = Victim    RP = Reporting Party / Informant    WT = Witness    OT = Other    SU = Suspect						
Name (L, F, M)		DOB/Age	Occupation		Residential Phone ( )	
Residence Address			City		Zip	
Business <input type="checkbox"/> Same as Residence			City		Zip	
Sex		Race	Height	Weight	Build	Hair
Eyes		Social Security #		ID/Driver's License # & State		
Clothing:			Additional Information:			
Name (L, F, M)		DOB/Age	Occupation		Residential Phone ( )	
Residence Address			City		Zip	
Business <input type="checkbox"/> Same as Residence			City		Zip	
Sex		Race	Height	Weight	Build	Hair
Eyes		Social Security #		ID/Driver's License # & State		
Clothing:			Additional Information:			
<input type="checkbox"/> Victim's Vehicle <input type="checkbox"/> Suspect's Vehicle						
License	State	Year	Make	Model	Body Style	Color
VIN						
<input type="checkbox"/> Unique Characteristics			<input type="checkbox"/> Description of Damage			<input type="checkbox"/> N/A
<b>Summary / Narrative:</b> <b>Refer to continuation sheet.</b>						
Property Loss <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes / Value \$			Property Damage <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes / Describe:			
Officer ID# / Name <b>Morris #001067</b>			Reviewed ID# / Name <i>10840 P. S. [Signature]</i>		RMS Entry _____ CLETS/NCIC _____	
CPD Form # 04-001 (2015.11.24)	Copies: <input type="checkbox"/> Det	<input type="checkbox"/> Prop	<input checked="" type="checkbox"/> ADA	<input checked="" type="checkbox"/> PD	<input type="checkbox"/> Officer	Routed By: <i>[Signature]</i>
	<input type="checkbox"/> Vic/Wit	<input type="checkbox"/> Risk Mgmt	<input type="checkbox"/> CPS	<input type="checkbox"/> CA	<input checked="" type="checkbox"/> Other: <i>PET</i>	Page: 1 of 4

Premises Q 1	Point of Entry Q 2	Property Taken Q 4	Evidence Q 7	Special Crimes Q 10
<b>Business</b> <input type="checkbox"/> 1 Financial Institution <input type="checkbox"/> 2 Bar <input type="checkbox"/> 3 Cleaners/Laundry <input type="checkbox"/> 4 Construction Site <input type="checkbox"/> 5 Theater <input type="checkbox"/> 6 Fast Foods <input type="checkbox"/> 7 Gas Station <input type="checkbox"/> 8 Hotel/Motel <input type="checkbox"/> 9 Dept/Disc Store <input type="checkbox"/> 10 Drug/Pharmacy <input type="checkbox"/> 11 Gun/Sport Store <input type="checkbox"/> 12 Jewelry Store <input type="checkbox"/> 13 Liquor Store <input type="checkbox"/> 14 Convenience Store <input type="checkbox"/> 15 Tire Store <input type="checkbox"/> 16 Restaurant <input type="checkbox"/> 17 Supermarket <input type="checkbox"/> 18 Video/TV/Radio <input type="checkbox"/> 19 Auto Parts <input type="checkbox"/> 20 Bicycle Parts <input type="checkbox"/> 21 Clothing Store <input type="checkbox"/> 22 Hardware <input type="checkbox"/> 23 Medical <input type="checkbox"/> 24 Office Building <input type="checkbox"/> 25 Shoe Store <input type="checkbox"/> 26 Warehouse <input type="checkbox"/> 27 Entertainment <input type="checkbox"/> 28 Storage Facility <input type="checkbox"/> 29 Other  <b>Residence</b> <input checked="" type="checkbox"/> 30 Apartment <input type="checkbox"/> 31 Condo/Townhouse <input type="checkbox"/> 32 Duplex/Fourplex <input type="checkbox"/> 33 Garage (Attached) <input type="checkbox"/> 34 Garage (Detached) <input type="checkbox"/> 35 House <input type="checkbox"/> 36 Mobile Home <input type="checkbox"/> 37 Retirement Home <input type="checkbox"/> 38 Other  <b>Public</b> <input type="checkbox"/> 39 Church <input type="checkbox"/> 40 Hospital <input type="checkbox"/> 41 Park/Playground <input type="checkbox"/> 42 Public Building <input type="checkbox"/> 43 School <input type="checkbox"/> 44 To/From School <input type="checkbox"/> 45 Shopping Center <input type="checkbox"/> 46 Street/Highway/Fwy <input type="checkbox"/> 47 Other	<input type="checkbox"/> 1 Front <input type="checkbox"/> 2 Rear <input type="checkbox"/> 3 Side <input type="checkbox"/> 4 North <input type="checkbox"/> 5 South <input type="checkbox"/> 6 East <input type="checkbox"/> 7 West <input type="checkbox"/> 8 Window <input type="checkbox"/> 9 Door <input type="checkbox"/> 10 Sliding Glass Door <input type="checkbox"/> 11 Basement <input type="checkbox"/> 12 Roof <input type="checkbox"/> 13 Floor <input type="checkbox"/> 14 Wall <input type="checkbox"/> 15 Duct/Vent <input type="checkbox"/> 16 Garage <input type="checkbox"/> 17 Adjacent Building <input type="checkbox"/> 18 Ground Level <input type="checkbox"/> 19 Upper Level <input type="checkbox"/> 20 Other  <b>Method of Entry</b> <input type="checkbox"/> 1 Open/Unlocked <input type="checkbox"/> 2 Attempt Only <input type="checkbox"/> 3 Bodily Force <input type="checkbox"/> 4 Bolt Cutters <input type="checkbox"/> 5 Pliers/Wrench <input type="checkbox"/> 6 Saw/Drill/Burn <input type="checkbox"/> 7 Screwdriver <input type="checkbox"/> 8 Tire Iron <input type="checkbox"/> 9 Unknown Pry Bar <input type="checkbox"/> 10 Coat Hanger/Wire <input type="checkbox"/> 11 Key <input type="checkbox"/> 12 Punch <input type="checkbox"/> 13 Remove Louvers <input type="checkbox"/> 14 Window Smash <input type="checkbox"/> 15 Window Forced <input type="checkbox"/> 16 Brick/Rock <input type="checkbox"/> 17 Hid in Building <input type="checkbox"/> 18 Lock Box <input type="checkbox"/> 19 Door/Lock Forced <input type="checkbox"/> 20 Trunk Forced <input type="checkbox"/> 21 Other	<input type="checkbox"/> 1 Cash/Notes <input type="checkbox"/> 2 Jewelry/Metals <input type="checkbox"/> 3 Clothing/Furs <input type="checkbox"/> 4 Office Equip. <input type="checkbox"/> 5 TV/Camera/Stereo <input type="checkbox"/> 6 Firearms <input type="checkbox"/> 7 Household Goods <input type="checkbox"/> 8 Consumable Goods <input type="checkbox"/> 9 Livestock <input type="checkbox"/> 10 Miscellaneous <input type="checkbox"/> 11 Car Radio/Speakers <input type="checkbox"/> 12 Narcotics/Drugs <input type="checkbox"/> 13 Tools <input type="checkbox"/> 14 Checks <input type="checkbox"/> 15 ID Documents <input type="checkbox"/> 16 Other  <b>Victim Rel/Susp</b> <input type="checkbox"/> 1 Husband <input type="checkbox"/> 2 Wife <input type="checkbox"/> 3 Mother <input type="checkbox"/> 4 Father <input type="checkbox"/> 5 Step <input type="checkbox"/> 6 Daughter <input type="checkbox"/> 7 Son <input type="checkbox"/> 8 Brother <input type="checkbox"/> 9 Sister <input type="checkbox"/> 10 Other Family Member <input type="checkbox"/> 11 Acquaintance <input type="checkbox"/> 12 Friend <input type="checkbox"/> 13 Boyfriend <input type="checkbox"/> 14 Girlfriend <input type="checkbox"/> 15 Neighbor <input type="checkbox"/> 16 Business Associate <input type="checkbox"/> 17 Student <input type="checkbox"/> 18 Teacher <input type="checkbox"/> 19 Stranger <input type="checkbox"/> 20 Other  <b>Victim Condition</b> <input type="checkbox"/> 1 Under Influence <input type="checkbox"/> 2 Sick/Injured <input type="checkbox"/> 3 Senior Citizen <input type="checkbox"/> 4 Blind <input type="checkbox"/> 5 Handicapped <input type="checkbox"/> 6 Deaf <input type="checkbox"/> 7 Mute <input type="checkbox"/> 8 Mentally Impaired <input type="checkbox"/> 9 Other	<input type="checkbox"/> 1 Blood <input type="checkbox"/> 2 Bullet Casings <input type="checkbox"/> 3 Clothes <input type="checkbox"/> 4 Fingerprints <input type="checkbox"/> 5 Footprints <input type="checkbox"/> 6 Hair/Fibers <input type="checkbox"/> 7 Other Prints <input type="checkbox"/> 8 Paint <input type="checkbox"/> 9 Photographs <input type="checkbox"/> 10 Rape Kit <input type="checkbox"/> 11 Semen <input type="checkbox"/> 12 Stains <input type="checkbox"/> 13 Tools <input type="checkbox"/> 14 Tool Marks <input type="checkbox"/> 15 Vehicle <input type="checkbox"/> 16 Weapon(s) <input type="checkbox"/> 17 Urine <input type="checkbox"/> 18 Breath <input type="checkbox"/> 19 Other  <b>Solvability Factors</b> <input type="checkbox"/> 1 Will Not Prosecute <input type="checkbox"/> 2 There is a Witness <input checked="" type="checkbox"/> 3 Suspect Arrested <input type="checkbox"/> 4 Suspect Named <input type="checkbox"/> 5 Suspect Described <input type="checkbox"/> 6 Suspect Can Be ID'd <input type="checkbox"/> 7 Susp Can be Found <input type="checkbox"/> 8 Susp Veh Can Be ID'd <input type="checkbox"/> 9 Identifiable 496 PC <input type="checkbox"/> 10 Good Physical Evidence <input type="checkbox"/> 11 Significant MO <input type="checkbox"/> 12 Other  <b>Vehicle Type</b> <input type="checkbox"/> 1 Passenger Car <input type="checkbox"/> 2 Motorcycle/Moped <input type="checkbox"/> 3 Pickup Truck <input type="checkbox"/> 4 Trailer <input type="checkbox"/> 5 Truck <input type="checkbox"/> 6 Van <input type="checkbox"/> 7 Camper <input type="checkbox"/> 8 Motor Home <input type="checkbox"/> 9 Other	<input type="checkbox"/> 1 Gang Related 777777 <input type="checkbox"/> 2 Hate Crime 888888  <b>Gang Information</b> Q 18 <input type="checkbox"/> Suspect # <b>Gang Affiliation:</b> <input type="checkbox"/> 1 Unknown <input type="checkbox"/> 2 Not Asked <input type="checkbox"/> 3 Yes/Gang Name:  <input type="checkbox"/> 4 Moniker/AKA:  <b>Identified by:</b> <input type="checkbox"/> 5 Self Admit <input type="checkbox"/> 6 Gang Hand Signs <input type="checkbox"/> 7 Gang Dress <input type="checkbox"/> 8 Arrested w/ Gang Members <input type="checkbox"/> 9 Affiliates w/ Gang Members <input type="checkbox"/> 10 Jail Admit <input type="checkbox"/> 11 Gang Tattoos <input type="checkbox"/> 12 Other  <b>Tattoos/Scars/Marks</b> Q 19 <input type="checkbox"/> Suspect # <input type="checkbox"/> 1 Head: <input type="checkbox"/> 2 Face: <input type="checkbox"/> 3 Neck: <input type="checkbox"/> 4 Back: <input type="checkbox"/> 5 Chest: <input type="checkbox"/> 6 Stomach: <input type="checkbox"/> 7 Right Arm: <input type="checkbox"/> 8 Left Arm: <input type="checkbox"/> 9 Right Leg: <input type="checkbox"/> 10 Left Leg: <input type="checkbox"/> 11 Right Hand: <input type="checkbox"/> 12 Left Hand: <input type="checkbox"/> 13 Other:

Summary / Narrative (Continued):

**Corona Police Department Continuation Form CR# 16-3353**

1 **Use of Force:**

2 During the physical altercation with SU01 Edgar Rios, I applied the carotid  
3 restraint for approximately 5-6 seconds. As a result of the application of the  
4 carotid restraint, SU Rios lost consciousness. After the release of the carotid  
5 restraint, SU Rios regained consciousness after a period of approximately 3-4  
6 seconds. Officers were able to handcuff SU Rios during this timeframe.

7  
8 **Details:**

9 On 3/18/2016, at approximately 1913, I was dispatched to assist officers at a  
10 disturbance occurring at 805 S. Merrill St. #D, Corona. While I was en route to  
11 the call, one of the officers on scene screamed "11-11 additional units" (ights  
12 and sirens response). I responded lights and siren from Main and 3<sup>rd</sup> St, I  
13 arrived at approximately 1929 hrs.

14  
15 As I approached the residence, I could see five officers on the front porch  
16 attempting to hold down and handcuff a combative individual who was  
17 screaming (later identified as SU01 Edgar Rios). Rios was on his stomach as  
18 officers were attempting to hold him down. Officers had his right hand behind his  
19 back with one cuff attached to his right wrist. Officers were attempting to  
20 restrain his left hand; however, Rios was thrashing around, (bucking, kicking and  
21 attempting to roll) officers were unable to control his left hand.

22  
23 Based on his violent behavior, the fact that the it appeared the Taser (I could  
24 see Taser wires and Corporal Deruyter was attempting to reholster his Taser)  
25 had been deployed and had not worked properly on SU Rios, the close quarters  
26 of the porch limiting room for officers to use leverage to bring SU Rios' left arm  
27 behind his back, I was concerned not only for the safety of the officers  
28 attempting to subdue SU Rios, but for SU Rios' safety as well. Due to his  
29 extremely high level of agitation, the presence of what appeared to be blood on  
30 him, and 5 officers compressing him, I was concerned for excited delirium and  
31 believed the only remaining reasonable force option was the carotid restraint.

32  
33 Taking a kneeling position on his left side, I placed my right arm under his chin,  
34 ensuring I avoided pressure on the trachea. I joined my right hand to my left  
35 hand and utilized the standard locking carotid restraint squeezing my shoulder  
36 blades together.

37  
38 The 5-6 second application of the carotid restraint rendered SU Rios unconscious  
39 and officers were able to safely apply the handcuffs. SU Rios regained  
40 consciousness after approximately 3-4 seconds and resumed his attempts to  
41 resist officers, despite being handcuffed. As a result, the TARP was applied and  
42 SU Rios was able to be safely removed from the porch for medical evaluation by  
43 the waiting firefighters. Being that he was being evaluated by a paramedic, I did  
44 not check SU Rios for his pulse or any other information to determine his

**Corona Police Department Continuation Form CR# 16-3353**

1 consciousness. After being quickly evaluated on scene, SU Rios was transported  
2 to Corona Regional Medical Center via AMR ambulance for additional medical  
3 treatment. SU Rios was placed on his side in the ambulance and restrained to  
4 the gurney by appropriate safety restraints.

5  
6 For additional details regarding this incident, to include injuries, the time the  
7 TARP was applied, removed, later reapplied and removed, refer to the initial  
8 report and related supplemental reports.

9  
10 **Disposition:**  
11 Refer to the initial report.

12  
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# CORONA POLICE DEPARTMENT

730 PUBLIC SAFETY WAY  
CORONA, CALIFORNIA 92880-2002  
CA0331500

Initial  
 Supplemental

2016 MAR 21 AM 6:46

<input type="checkbox"/> Arrest <input type="checkbox"/> Suspect <input type="checkbox"/> Unknown Suspect <input type="checkbox"/> Property/Evidence		<input type="checkbox"/> Additional Person/Vehicle <input checked="" type="checkbox"/> Narrative <input type="checkbox"/> 293(a) PC Advisement		<b>CR# 16-3353</b> Related Report(s)				
<b>CASE SUMMARY</b>	Primary Code Section/Description			BCS Code(s) Counts				
	Other Code Section/Description			BCS Code(s) Counts				
	Other Code Section/Description			BCS Code(s) Counts				
	Supplemental Code <input type="checkbox"/> Modify <input type="checkbox"/> New <input checked="" type="checkbox"/> Same <input type="checkbox"/> Add			BCS Code(s) Counts				
	Location <b>805 S. Merrill St. #D, Corona</b>			Business Name <input type="checkbox"/> Victim <input checked="" type="checkbox"/> N/A				
	Occurrence On/Between Date/Time <b>03-18-2016 1910hrs.</b> Date/Time <b>03-18-2016 1913hrs.</b>			Reported Date/Time <b>03-18-2016 1913hrs.</b>				
Case Status:		If Cleared - Code:		Officer Injured? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes # <b>2</b>	Officer Killed? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes #			
VM = Victim    RP = Reporting Party / Informant    WT = Witness    OT = Other    SU = Suspect								
Name (L,F,M)		DOB/Age	Occupation		Residential Phone ( )			
Residence Address		City		Zip	Cellular Phone ( )			
Business <input type="checkbox"/> Same as Residence		City		Zip	Business Phone ( )			
Sex	Race	Height	Weight	Build	Hair	Eyes	Social Security #	ID/Driver's License # & State
Clothing:				Additional Information:				
Name (L, F, M)		DOB/Age	Occupation		Residential Phone ( )			
Residence Address		City		Zip	Cellular Phone ( )			
Business <input type="checkbox"/> Same as Residence		City		Zip	Business Phone ( )			
Sex	Race	Height	Weight	Build	Hair	Eyes	Social Security #	ID/Driver's License # & State
Clothing:				Additional Information:				
Vehicle Description			<input type="checkbox"/> Victim's Vehicle		<input type="checkbox"/> Suspect's Vehicle			
License	State	Year	Make	Model	Body Style	Color	VIN	
<input type="checkbox"/> Unique Characteristics			<input type="checkbox"/> Description of Damage			<input type="checkbox"/> N/A		
<b>Summary / Narrative:</b>								
Property Loss <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes / Value \$			Property Damage <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes / Describe:					
Officer ID# / Name <b>Brazeal 003224</b>				Reviewed ID# / Name <b>MORRIS #001067</b>			RMS Entry CLETS/NCIC	
CPD Form#04-001 (2013.12.04)	Copies: <input type="checkbox"/> Det <input type="checkbox"/> Prop <input checked="" type="checkbox"/> DA <input checked="" type="checkbox"/> CPD <input type="checkbox"/> Officer	<input type="checkbox"/> Vic/Wit <input type="checkbox"/> Risk Mgmt <input type="checkbox"/> CPS <input type="checkbox"/> CA <input type="checkbox"/> Other: <b>RET</b>	Routed By: <b>RET</b>	Page: <b>1</b> of <b>3</b>				



**Corona Police Department**      **CR# 16-3353**  
**Continuation Sheet**

1    **Supplemental Report:**

2    Refer to Officer S. Hungerford's initial report for further details.  
3

4    **Details:**

5    On 03-18-2016, at approximately 1913 hours, Corona PD Officers were  
6    dispatched to 805 S. Merrill St. #D. in the City of Corona, regarding a disturbance  
7    between two brothers.  
8

9    Prior to officers arrival CPD dispatch advised one of the involved parties (SU01  
10    Edgar Rios) was known to use PCP.  
11

12    CPD Officers went to the above listed address which was located on the second  
13    story up approximate twenty to twenty five sets of stairs. Due to the stairway  
14    being approximately four feet in width each officer stood behind the other prior to  
15    making contact at the residence.  
16

17    Officer Hungerford knocked on the door and made contact with SU01 Rios. Due  
18    to where I was standing and other CPD Officers in front of me I was unable to  
19    see Rios. As Officer Hungerford was talking to Rios, Cpl. M. DeRuyter yelled "he  
20    has a knife". CPD Officers in front of me quickly followed Officer Hungerford into  
21    Rios' apartment. Rios immediately began to flail his arms and legs while  
22    screaming. At one point CPD officers were able to take Rios to the ground.  
23

24    Once on the ground Rios continued to kick and swing at officers. Cpl. DeRuyter  
25    deployed his taser striking Rios in the back however it had no effect. Rios was  
26    able to push multiple officers off of him allowing himself to get out of the  
27    apartment to the top of the stairwell. Officer Hungerford deployed his taser  
28    striking Rios however it had no effect.  
29

30    Rios quickly stood up and was face to face with me at the top step of the  
31    stairwell. Based on the stairwell being an approximate twenty to twenty five foot  
32    drop and Rios showing "super human" type strength I feared if I tried to physically  
33    take Rios down at our current position the potential for me to fall down the  
34    stairwell causing great bodily injury to myself was probable so I front kicked Rios  
35    in the stomach/chest area with my right foot. Rios was knocked backwards and  
36    fell approximately four to five steps down. Rios immediately showed no effects to  
37    my kick quickly getting back to his feet and facing me.  
38

39    Still fifteen plus stairs up, I kicked Rios again in the stomach/chest area using my  
40    right foot. Rios again fell four or five more stairs landing on his back. Rios  
41    showed no effects to the second kick quickly getting to his feet and facing me  
42    while screaming and taking what I felt was a fighting posture.  
43

44    Determining the kicks were not having any effect on Rios and still being  
45    approximately ten to fifteen stairs up, I punched Rio's with a closed right fist

*Corona Police Department*      *CR# 16-3353*  
*Continuation Sheet*

1 striking him in the nose and chin area of his face. My strike caused Rios to fall  
2 backwards landing on his back approximately four or five steps down. Rios  
3 immediately got back to his feet facing me and screaming with what I again felt  
4 was an aggressive posture.

5

6 I punched Rios again with a right closed fist striking him in the left eye and nose  
7 area of his face. The strike caused Rios to fall down the remainder of the stairs  
8 and land face down on the bottom of the stairwell.

9

10 I quickly got to the bottom of the stairs and was able to get on Rios' back while  
11 other officers assisted me in trying to get him into handcuffs. Rios continued to  
12 kick at officers even after being handcuffed. Out of fear Rios' kicks would injure  
13 me or other assisting officers I placed my department issued Tarp around his  
14 legs secured it to his handcuffs.

15

16 **Case Status:**

17 Refer to initial report for further details.



**CORONA POLICE DEPARTMENT**  
 730 PUBLIC SAFETY WAY  
 CORONA, CALIFORNIA 92880-2002  
 CA0331500

Initial  
 Supplemental

2016 MAR 21 AM 6:46

<input type="checkbox"/> Arrest	<input type="checkbox"/> Additional Person/Vehicle	CR# 16-3353
<input type="checkbox"/> Suspect	<input checked="" type="checkbox"/> Narrative	
<input type="checkbox"/> Unknown Suspect	<input type="checkbox"/> 293(a) PC Advisement	Related Report(s)
<input checked="" type="checkbox"/> Property/Evidence		
Primary Code Section/Description		BCS Code(s) Counts
Other Code Section/Description		BCS Code(s) Counts
Other Code Section/Description		BCS Code(s) Counts
Supplemental Code <input type="checkbox"/> Modify <input type="checkbox"/> New <input checked="" type="checkbox"/> Same <input type="checkbox"/> Add		BCS Code(s) Counts
Location 805 S. MERRILL ST # D, CORONA		Business Name <input type="checkbox"/> Victim <input checked="" type="checkbox"/> N/A
Occurrence On/Between Date/Time 03-18-16 Date/Time 1913 HRS.		Reported Date/Time 03-18-16 / 1913 HRS
Case Status:	If Cleared - Code:	Officer Injured? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes # Officer Killed? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes #

VM = victim RP = reporting party / informant WT = witness OT = other SU = suspect

WTD1

WTD2

Vehicle Description							<input type="checkbox"/> Victim's Vehicle	<input type="checkbox"/> Suspect's Vehicle
License	State	Year	Make	Model	Body Style	Color	VIN	
<input type="checkbox"/> Unique Characteristics				<input type="checkbox"/> Description of Damage				<input checked="" type="checkbox"/> N/A

Summary/Narrative:  
 SEE ATTACHED DETAILS

Property Loss <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes / Value \$	Property Damage <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes / Describe:	
Officer ID# / Name 002279 / R. SLANE	Reviewed ID# / Name MORRIS # 001067	RMS Entry
CPD Form# 04-007 (2013.12.04)	Copies: <input type="checkbox"/> Det <input type="checkbox"/> Prop <input type="checkbox"/> DA <input type="checkbox"/> PD <input type="checkbox"/> Officer <input type="checkbox"/> Vic/Wit <input type="checkbox"/> Risk Mgmt <input type="checkbox"/> CPS <input type="checkbox"/> CA <input checked="" type="checkbox"/> Other: JX	Routed By: <i>JX</i>
		CLETS/NCIC
		Page: 1 of 4

Premises	Point of Entry	Property Taken	Evidence	Special Crimes
<b>Business</b> <span style="float:right">Q 1</span> <input type="checkbox"/> 1 Financial Institution <input type="checkbox"/> 2 Bar <input type="checkbox"/> 3 Cleaners/Laundry <input type="checkbox"/> 4 Construction Site <input type="checkbox"/> 5 Theater <input type="checkbox"/> 6 Fast Foods <input type="checkbox"/> 7 Gas Station <input type="checkbox"/> 8 Hotel/Motel <input type="checkbox"/> 9 Dept/Disc Store <input type="checkbox"/> 10 Drug/Pharmacy <input type="checkbox"/> 11 Gun/Sport Store <input type="checkbox"/> 12 Jewelry Store <input type="checkbox"/> 13 Liquor Store <input type="checkbox"/> 14 Convenience Store <input type="checkbox"/> 15 Tire Store <input type="checkbox"/> 16 Restaurant <input type="checkbox"/> 17 Supermarket <input type="checkbox"/> 18 Video/TV/Radio <input type="checkbox"/> 19 Auto Parts <input type="checkbox"/> 20 Bicycle Parts <input type="checkbox"/> 21 Clothing Store <input type="checkbox"/> 22 Hardware <input type="checkbox"/> 23 Medical <input type="checkbox"/> 24 Office Building <input type="checkbox"/> 25 Shoe Store <input type="checkbox"/> 26 Warehouse <input type="checkbox"/> 27 Entertainment <input type="checkbox"/> 28 Storage Facility <input type="checkbox"/> 29 Other  <b>Residence</b> <input checked="" type="checkbox"/> 30 Apartment <input type="checkbox"/> 31 Condo/Townhouse <input type="checkbox"/> 32 Duplex/Fourplex <input type="checkbox"/> 33 Garage (Attached) <input type="checkbox"/> 34 Garage (Detached) <input type="checkbox"/> 35 House <input type="checkbox"/> 36 Mobile Home <input type="checkbox"/> 37 Retirement Home <input type="checkbox"/> 38 Other  <b>Public</b> <input type="checkbox"/> 39 Church <input type="checkbox"/> 40 Hospital <input type="checkbox"/> 41 Park/Playground <input type="checkbox"/> 42 Public Building <input type="checkbox"/> 43 School <input type="checkbox"/> 44 To/From School <input type="checkbox"/> 45 Shopping Center <input type="checkbox"/> 46 Street/Highway/Fwy <input type="checkbox"/> 47 Other	<span style="float:right">Q 2</span> <input type="checkbox"/> 1 Front <input type="checkbox"/> 2 Rear <input type="checkbox"/> 3 Side <input type="checkbox"/> 4 North <input type="checkbox"/> 5 South <input type="checkbox"/> 6 East <input type="checkbox"/> 7 West <input type="checkbox"/> 8 Window <input type="checkbox"/> 9 Door <input type="checkbox"/> 10 Sliding Glass Door <input type="checkbox"/> 11 Basement <input type="checkbox"/> 12 Roof <input type="checkbox"/> 13 Floor <input type="checkbox"/> 14 Wall <input type="checkbox"/> 15 Duct/Vent <input type="checkbox"/> 16 Garage <input type="checkbox"/> 17 Adjacent Building <input type="checkbox"/> 18 Ground Level <input type="checkbox"/> 19 Upper Level <input type="checkbox"/> 20 Other  <b>Method of Entry</b> <span style="float:right">Q 3</span> <input type="checkbox"/> 1 Open/Unlocked <input type="checkbox"/> 2 Attempt Only <input type="checkbox"/> 3 Bodily Force <input type="checkbox"/> 4 Bolt Cutters <input type="checkbox"/> 5 Pliers/Wrench <input type="checkbox"/> 6 Saw/Drill/Burn <input type="checkbox"/> 7 Screwdriver <input type="checkbox"/> 8 Tire Iron <input type="checkbox"/> 9 Unknown Pry Bar <input type="checkbox"/> 10 Coat Hanger/Wire <input type="checkbox"/> 11 Key <input type="checkbox"/> 12 Punch <input type="checkbox"/> 13 Remove Louvers <input type="checkbox"/> 14 Window Smash <input type="checkbox"/> 15 Window Forced <input type="checkbox"/> 16 Brick/Rock <input type="checkbox"/> 17 Hid in Building <input type="checkbox"/> 18 Lock Box <input type="checkbox"/> 19 Door/Lock Forced <input type="checkbox"/> 20 Trunk Forced <input type="checkbox"/> 21 Other	<span style="float:right">Q 4</span> <input type="checkbox"/> 1 Cash/Notes <input type="checkbox"/> 2 Jewelry/Metals <input type="checkbox"/> 3 Clothing/Furs <input type="checkbox"/> 4 Office Equip <input type="checkbox"/> 5 TV/Camera/Stereo <input type="checkbox"/> 6 Firearms <input type="checkbox"/> 7 Household Goods <input type="checkbox"/> 8 Consumable Goods <input type="checkbox"/> 9 Livestock <input type="checkbox"/> 10 Miscellaneous <input type="checkbox"/> 11 Car Radio/Speakers <input type="checkbox"/> 12 Narcotics/Drugs <input type="checkbox"/> 13 Tools <input type="checkbox"/> 14 Checks <input type="checkbox"/> 15 ID Documents <input type="checkbox"/> 16 Other  <b>Victim Rel/Susp</b> <span style="float:right">Q 5</span> <input type="checkbox"/> 1 Husband <input type="checkbox"/> 2 Wife <input type="checkbox"/> 3 Mother <input type="checkbox"/> 4 Father <input type="checkbox"/> 5 Step <input type="checkbox"/> 6 Daughter <input type="checkbox"/> 7 Son <input type="checkbox"/> 8 Brother <input type="checkbox"/> 9 Sister <input type="checkbox"/> 10 Other Family Member <input type="checkbox"/> 11 Acquaintance <input type="checkbox"/> 12 Friend <input type="checkbox"/> 13 Boyfriend <input type="checkbox"/> 14 Girlfriend <input type="checkbox"/> 15 Neighbor <input type="checkbox"/> 16 Business Associate <input type="checkbox"/> 17 Student <input type="checkbox"/> 18 Teacher <input type="checkbox"/> 19 Stranger <input type="checkbox"/> 20 Other  <b>Victim Condition</b> <span style="float:right">Q 6</span> <input type="checkbox"/> 1 Under Influence <input type="checkbox"/> 2 Sick/Injured <input type="checkbox"/> 3 Senior Citizen <input type="checkbox"/> 4 Blind <input type="checkbox"/> 5 Handicapped <input type="checkbox"/> 6 Deaf <input type="checkbox"/> 7 Mute <input type="checkbox"/> 8 Mentally Impaired <input type="checkbox"/> 9 Other	<span style="float:right">Q 7</span> <input type="checkbox"/> 1 Blood <input type="checkbox"/> 2 Bullet Casings <input type="checkbox"/> 3 Clothes <input type="checkbox"/> 4 Fingerprints <input type="checkbox"/> 5 Footprints <input type="checkbox"/> 6 Hair/Fibers <input type="checkbox"/> 7 Other Prints <input type="checkbox"/> 8 Paint <input type="checkbox"/> 9 Photographs <input type="checkbox"/> 10 Rape Kit <input type="checkbox"/> 11 Semen <input type="checkbox"/> 12 Stains <input type="checkbox"/> 13 Tools <input type="checkbox"/> 14 Tool Marks <input type="checkbox"/> 15 Vehicle <input type="checkbox"/> 16 Weapon(s) <input type="checkbox"/> 17 Urine <input type="checkbox"/> 18 Breath <input checked="" type="checkbox"/> 19 Other <b>Audio</b>  <b>Solvability Factors</b> <span style="float:right">Q 8</span> <input type="checkbox"/> 1 Will Not Prosecute <input type="checkbox"/> 2 There is a Witness <input type="checkbox"/> 3 Suspect Arrested <input type="checkbox"/> 4 Suspect Named <input type="checkbox"/> 5 Suspect Described <input type="checkbox"/> 6 Suspect Can Be ID'd <input type="checkbox"/> 7 Susp Can be Found <input type="checkbox"/> 8 Susp Veh Can Be ID'd <input type="checkbox"/> 9 Identifiable 496 PC <input type="checkbox"/> 10 Good Physical Evidence <input type="checkbox"/> 11 Significant MO <input type="checkbox"/> 12 Other  <b>Vehicle Type</b> <span style="float:right">Q 9</span> <input type="checkbox"/> 1 Passenger Car <input type="checkbox"/> 2 Motorcycle/Moped <input type="checkbox"/> 3 Pickup/Truck <input type="checkbox"/> 4 Trailer <input type="checkbox"/> 5 Truck <input type="checkbox"/> 6 Van <input type="checkbox"/> 7 Camper <input type="checkbox"/> 8 Motor Home <input type="checkbox"/> 9 Other	<span style="float:right">Q 10</span> <input type="checkbox"/> 1 Gang Related 77777 <input type="checkbox"/> 2 Hate Crime 888888  <b>Gang Information</b> <span style="float:right">Q 18</span> <input type="checkbox"/> Suspect # <b>Gang Affiliation:</b> <input type="checkbox"/> 1 Unknown <input type="checkbox"/> 2 Not Asked <input type="checkbox"/> 3 Yes/Gang Name:  <input type="checkbox"/> 4 Moniker/AKA  <b>Identified by:</b> <input type="checkbox"/> 5 Self Admit <input type="checkbox"/> 6 Gang Hand Signs <input type="checkbox"/> 7 Gang Dress <input type="checkbox"/> 8 Arrested With Gang Members <input type="checkbox"/> 9 Affiliates With Gang Members <input type="checkbox"/> 10 Jail Admit <input type="checkbox"/> 11 Gang Tattoos <input type="checkbox"/> 12 Other  <b>Tattoos/Scars/Marks</b> <span style="float:right">Q 19</span> <input type="checkbox"/> Suspect # <input type="checkbox"/> 1 Head: <input type="checkbox"/> 2 Face: <input type="checkbox"/> 3 Neck: <input type="checkbox"/> 4 Back: <input type="checkbox"/> 5 Chest: <input type="checkbox"/> 6 Stomach: <input type="checkbox"/> 7 Right Arm: <input type="checkbox"/> 8 Left Arm: <input type="checkbox"/> 9 Right Leg: <input type="checkbox"/> 10 Left Leg: <input type="checkbox"/> 11 Right Hand: <input type="checkbox"/> 12 Left Hand: <input type="checkbox"/> 13 Other:

**Summary / Narrative (Continued):**

Page: 2 of 4

**Corona Police Department  
Continuation Sheet**

**CR# 16-3353**

1 **EVIDENCE:** See attached evidence sheet.  
2

3 **DETAILS:** On 03-18-16 at approximately 1930 hours, I responded to 805 S.  
4 Merrill Ave # D, Corona, CA to assist officers with a combative subject who was  
5 being arrested. I assisted Officer Hungerford by contacting (2) neighbors who  
6 reside at 805 S. Merrill Ave # C, Corona, CA. I contacted WT01 [REDACTED]  
7 and the following is a summary of his recorded statement.  
8

9 [REDACTED] stated he was inside his apartment when he heard commotion outside. [REDACTED]  
10 opened his door and saw Corona Police Officers at his cousin's apartment. [REDACTED]  
11 stated his cousin, Edgar, was inside his apartment and was resisting officers as  
12 they were trying to arrest him. [REDACTED] stated officers tazed Edgar while he was  
13 inside of his apartment, and eventually carried him down the stairs and outside to  
14 the front porch. [REDACTED] would not elaborate or provide further details.  
15

16 I then spoke to WT02 [REDACTED] and the following is a summary of her  
17 recorded statement.  
18

19 [REDACTED] stated she was inside her apartment when she heard Edgar screaming  
20 and yelling from his apartment. [REDACTED] opened her door and looked outside to  
21 see several officers at the apartment and in the hallway. [REDACTED] stated Edgar  
22 was "on something" and was resisting officers as they were trying to arrest him.  
23 Edgar was not following the officer's directions and was pushing officers with his  
24 elbows as they were trying to arrest him. [REDACTED] stated an officer tazed Edgar  
25 and she got scared and shut her door so she did not see any further.  
26

27 [REDACTED] stated the police were just doing their jobs and did not do anything  
28 wrong.  
29

30 While at the station, I transferred the audio recordings to a disc and logged them  
31 into CPD property as evidence.  
32

33 **DISPOSITION:** Refer to initial report




CORONA POLICE DEPARTMENT

730 Public Safety Way  
Corona CA 92880

CASE NO. : 16-3353
DATE OF OFFENSE: 03/18/2016
SUSPECT LAST NAME: RIOS SUSPECT FIRST NAME: EDGAR
<input type="checkbox"/> JUVENILE <input type="checkbox"/> SEARCH WARRANT
VICTIM: ,
ASSOCIATED CASES

PROPERTY REPORT

COLLECTED BY		DATE/TIME COLLECTED 03/18/2016 1913	LOCATION COLLECTED	COLLECTED ADDRESS 805 S. MERRILL ST, CORONA
ITEM # RS1	TYPE Evidence	BRAND	SERIAL NO.	TOTAL VALUE
QTY. 1	MEASURE	PRESUMPTIVE DRUG		COLOR
CALIBER	BRL LENGTH	GUN TYPE CODE	GUN CAT CODE	
BIKE SPEED	<input type="checkbox"/> BOYS	<input type="checkbox"/> GIRLS	MODEL	
 201602540		DESCRIPTION AUDIO/VIDEO (CASS/CD/DVD/TAPE) - CD WITH AUDIO RECORDED STATEMENTS		
OWNER: ,		ADDRESS:		
REPORTING OFFICER	ID#	DATE 03/19/2016		



Premises	Point of Entry	Property Taken	Evidence	Special Crimes
<b>Business</b> <b>Q 1</b> <input type="checkbox"/> 1 Financial Institution <input type="checkbox"/> 2 Bar <input type="checkbox"/> 3 Cleaners/Laundry <input type="checkbox"/> 4 Construction Site <input type="checkbox"/> 5 Theater <input type="checkbox"/> 6 Fast Foods <input type="checkbox"/> 7 Gas Station <input type="checkbox"/> 8 Hotel/Motel <input type="checkbox"/> 9 Dept/Disc Store <input type="checkbox"/> 10 Drug/Pharmacy <input type="checkbox"/> 11 Gun/Sport Store <input type="checkbox"/> 12 Jewelry Store <input type="checkbox"/> 13 Liquor Store <input type="checkbox"/> 14 Convenience Store <input type="checkbox"/> 15 Tire Store <input type="checkbox"/> 16 Restaurant <input type="checkbox"/> 17 Supermarket <input type="checkbox"/> 18 Video/TV/Radio <input type="checkbox"/> 19 Auto Parts <input type="checkbox"/> 20 Bicycle Parts <input type="checkbox"/> 21 Clothing Store <input type="checkbox"/> 22 Hardware <input type="checkbox"/> 23 Medical <input type="checkbox"/> 24 Office Building <input type="checkbox"/> 25 Shoe Store <input type="checkbox"/> 26 Warehouse <input type="checkbox"/> 27 Entertainment <input type="checkbox"/> 28 Storage Facility <input type="checkbox"/> 29 Other  <b>Residence</b> <input type="checkbox"/> 30 Apartment <input type="checkbox"/> 31 Condo/Townhouse <input type="checkbox"/> 32 Duplex/Fourplex <input type="checkbox"/> 33 Garage (Attached) <input type="checkbox"/> 34 Garage (Detached) <input type="checkbox"/> 35 House <input type="checkbox"/> 36 Mobile Home <input type="checkbox"/> 37 Retirement Home <input type="checkbox"/> 38 Other  <b>Public</b> <input type="checkbox"/> 39 Church <input type="checkbox"/> 40 Hospital <input type="checkbox"/> 41 Park/Playground <input type="checkbox"/> 42 Public Building <input type="checkbox"/> 43 School <input type="checkbox"/> 44 To/From School <input type="checkbox"/> 45 Shopping Center <input type="checkbox"/> 46 Street/Highway/Fwy <input type="checkbox"/> 47 Other	<b>Q 2</b> <input type="checkbox"/> 1 Front <input type="checkbox"/> 2 Rear <input type="checkbox"/> 3 Side <input type="checkbox"/> 4 North <input type="checkbox"/> 5 South <input type="checkbox"/> 6 East <input type="checkbox"/> 7 West <input type="checkbox"/> 8 Window <input type="checkbox"/> 9 Door <input type="checkbox"/> 10 Sliding Glass Door <input type="checkbox"/> 11 Basement <input type="checkbox"/> 12 Roof <input type="checkbox"/> 13 Floor <input type="checkbox"/> 14 Wall <input type="checkbox"/> 15 Duct/Vent <input type="checkbox"/> 16 Garage <input type="checkbox"/> 17 Adjacent Building <input type="checkbox"/> 18 Ground Level <input type="checkbox"/> 19 Upper Level <input type="checkbox"/> 20 Other  <b>Method of Entry</b> <b>Q 3</b> <input type="checkbox"/> 1 Open/Unlocked <input type="checkbox"/> 2 Attempt Only <input type="checkbox"/> 3 Bodily Force <input type="checkbox"/> 4 Bolt Cutters <input type="checkbox"/> 5 Pliers/Wrench <input type="checkbox"/> 6 Saw/Drill/Burn <input 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Miscellaneous <input type="checkbox"/> 11 Car Radio/Speakers <input type="checkbox"/> 12 Narcotics/Drugs <input type="checkbox"/> 13 Tools <input type="checkbox"/> 14 Checks <input type="checkbox"/> 15 ID Documents <input type="checkbox"/> 16 Other  <b>Victim Rel/Susp</b> <b>Q 5</b> <input type="checkbox"/> 1 Husband <input type="checkbox"/> 2 Wife <input type="checkbox"/> 3 Mother <input type="checkbox"/> 4 Father <input type="checkbox"/> 5 Step <input type="checkbox"/> 6 Daughter <input type="checkbox"/> 7 Son <input type="checkbox"/> 8 Brother <input type="checkbox"/> 9 Sister <input type="checkbox"/> 10 Other Family Member <input type="checkbox"/> 11 Acquaintance <input type="checkbox"/> 12 Friend <input type="checkbox"/> 13 Boyfriend <input type="checkbox"/> 14 Girlfriend <input type="checkbox"/> 15 Neighbor <input type="checkbox"/> 16 Business Associate <input type="checkbox"/> 17 Student <input type="checkbox"/> 18 Teacher <input type="checkbox"/> 19 Stranger <input 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Weapon(s) <input type="checkbox"/> 17 Urine <input type="checkbox"/> 18 Breath <input type="checkbox"/> 19 Other  <b>Solvability Factors</b> <b>Q 8</b> <input type="checkbox"/> 1 Will Not Prosecute <input type="checkbox"/> 2 There is a Witness <input type="checkbox"/> 3 Suspect Arrested <input type="checkbox"/> 4 Suspect Named <input checked="" type="checkbox"/> 5 Suspect Described <input type="checkbox"/> 6 Suspect Can Be ID'd <input type="checkbox"/> 7 Susp Can be Found <input type="checkbox"/> 8 Susp Veh Can Be ID'd <input type="checkbox"/> 9 Identifiable 496 PC <input type="checkbox"/> 10 Good Physical Evidence <input type="checkbox"/> 11 Significant MO <input type="checkbox"/> 12 Other  <b>Vehicle Type</b> <b>Q 9</b> <input type="checkbox"/> 1 Passenger Car <input type="checkbox"/> 2 Motorcycle/Moped <input type="checkbox"/> 3 Pickup Truck <input type="checkbox"/> 4 Trailer <input type="checkbox"/> 5 Truck <input type="checkbox"/> 6 Van <input type="checkbox"/> 7 Camper <input type="checkbox"/> 8 Motor Home <input type="checkbox"/> 9 Other	<b>Q 10</b> <input type="checkbox"/> 1 Gang Related 777777 <input type="checkbox"/> 2 Hate Crime 888888  <b>Gang Information</b> <b>Q 18</b> <input type="checkbox"/> Suspect # <b>Gang Affiliation:</b> <input type="checkbox"/> 1 Unknown <input type="checkbox"/> 2 Not Asked <input type="checkbox"/> 3 Yes/Gang Name:  <input type="checkbox"/> 4 Moniker/AKA:  <b>Identified by:</b> <input type="checkbox"/> 5 Self Admit <input type="checkbox"/> 6 Gang Hand Signs <input type="checkbox"/> 7 Gang Dress <input type="checkbox"/> 8 Arrested With Gang Members <input type="checkbox"/> 9 Affiliates With Gang Members <input type="checkbox"/> 10 Jail Admit <input type="checkbox"/> 11 Gang Tattoos <input type="checkbox"/> 12 Other  <b>Tattoos/Scars/Marks</b> <b>Q 19</b> <input type="checkbox"/> Suspect # <input type="checkbox"/> 1 Head: <input type="checkbox"/> 2 Face: <input type="checkbox"/> 3 Neck: <input type="checkbox"/> 4 Back: <input type="checkbox"/> 5 Chest: <input type="checkbox"/> 6 Stomach: <input type="checkbox"/> 7 Right Arm: <input type="checkbox"/> 8 Left Arm: <input type="checkbox"/> 9 Right Leg: <input type="checkbox"/> 10 Left Leg: <input type="checkbox"/> 11 Right Hand: <input type="checkbox"/> 12 Left Hand: <input type="checkbox"/> 13 Other:

Summary / Narrative (Continued):



**Corona Police Department  
Continuation Sheet**

**CR# 16-3353**

1 **DETAILS:** On 03-18-16 at approx. 1944 hours, I responded to 805 S. Merrill St.  
2 Apt. #D in Corona to assist the assigned officers with a potentially very  
3 combative subject. (See Officer Hungerford's report for the initial broadcast  
4 information and initial contact.) The following is my account of this incident.  
5

6 Officer Hungerford knocked on the door of the listed apartment which was at the  
7 top of a narrow flight of stairs. Due to the landing in front of the door being very  
8 small, Officer Tarrant had to stand several steps below Officer Hungerford and I  
9 stood several steps below him. When the door opened, I saw (SU01) Edgar Rios  
10 standing just inside the doorway.  
11

12 Edgar appeared sweaty and agitated. As I looked at Edgar, I saw what I  
13 believed to be the blade of a knife sticking out of Edgar's right front shorts  
14 pocket. I told Officer Hungerford, who had grabbed a hold of Edgar's right wrist  
15 that Edgar had a knife in his pocket. Immediately after this, Edgar pulled away  
16 from Officer Hungerford, pulling Officer Hungerford back into the apartment. I  
17 briefly lost sight of both Edgar and Officer Hungerford. Officer Tarrant and I  
18 immediately followed them inside.  
19

20 When I got inside the very small apartment room, Officer Hungerford and Officer  
21 Tarrant were struggling to control Edgar's arms. Edgar had retreated to a couch  
22 on the south side of the room. Edgar was physically resisting Officer Hungerford  
23 and Officer Tarrant by kicking and flailing his arms. At this time, I did not know  
24 what had happened to the knife I had seen sticking out of his pocket. Fearing the  
25 someone may get seriously injured or possibly killed, I deployed my Taser into  
26 Edgar's back from approx. 2" away. To my surprise, the Taser appeared to have  
27 no effect on Edgar. Edgar was able to jump off of the couch and continued to be  
28 out of the control, kicking, screaming and flailing his arms.  
29

30 By this time, Officers Brazeal and S. Slane had also entered the very small  
31 apartment room.  
32

33 During the struggle, Edgar and several of the listed officers bumped into several  
34 pieces of furniture causing several glass object to fall and shatter on the ground.  
35 I attempted to use my Taser again (same cartridge #C4102AFX1) however I did  
36 not hear it cycle and saw that there was no effect. (I was unsure whether the  
37 wires were still connected due to all of the thrashing around Edgar was doing.)  
38

39 I dropped my Taser and attempted to assist the other involved officers with  
40 physically restraining Edgar who was now on the ground near the doorway.  
41 (By now I had noticed that there was a significant amount of blood on the ground  
42 and I did not know who was bleeding.)  
43

44 Edgar was somehow able to maneuver/slip his way out the door to the landing. I  
45 again briefly lost sight of Edgar and some of the pursuing officers. By the time I

**Corona Police Department**  
**Continuation Sheet**

**CR# 16-3353**

1 exited the apartment (which was immediately), Edgar was face down on the  
2 ground at the base of the stairs, again with several of the listed officer attempting  
3 to restrain him.

4  
5 During the struggle at the bottom of the stairs, I was able to get a hold of Edgar's  
6 right wrist. Officer Tarrant assisted me with maintaining control of Edgar's right  
7 arm and maneuvering it behind his back. I was then able to get my handcuffs on  
8 Edgar's right wrist.

9  
10 Edgar continued to resist. Edgar's left hand was still not in control of any of the  
11 officers and appeared to be under him. (At this time I felt something tugging on  
12 the right sleeve of my shirt. It was my belief (I could not see it) that Edgar was  
13 attempting to bite me.) Note: At this point, I still did not know where the knife I  
14 saw in Edgar's pocket was, and did not know if any of the other officers had been  
15 injured.

16  
17 As I continued to maintain control of Edgar's right arm, Sergeant Morris arrived  
18 on scene and applied the carotid restraint. Only after the carotid took effect were  
19 other officers able to gain enough control of Edgar's left arm to place it behind his  
20 back for me to apply the other handcuff to Edgar's left wrist.

21  
22 At this point I dis-engaged Edgar to retrieve my Taser from the apartment.  
23 (Edgar continued to struggle and the T.A.R.P. was applied by other officers.)

24  
25 While returning to the apartment, I located two sets of keys belonging to officers  
26 on the stairs. (I later discovered I had lost my WatchGuard dash camera  
27 microphone, which I later received back covered with blood. I believe Sergeant  
28 Morris had found it on the ground near the bottom of the stairs.) In the struggle  
29 my earpiece fell out of my ear as well.

30  
31 After I retrieved my Taser, I saw (RP01) [REDACTED] recording the incident with his  
32 cell phone camera. I had noticed [REDACTED] had been recording from not long after  
33 the incident had begun. (I later found out that [REDACTED] had been in Apt. #C across  
34 the hall when the incident began.) I asked [REDACTED] if could have the footage that he  
35 recorded and provided him with my department email address for him to email it  
36 to me. [REDACTED] was not sure if he wanted to provide me with the footage, and up to  
37 this point he has not yet emailed it to me. (I recorded some of my conversation  
38 with [REDACTED] and booked it into Evidence.)

39  
40 Shortly after the incident, I learned that a knife had not been recovered from  
41 Edgar. Nor did I see one in the apartment when I recovered my Taser. I asked  
42 [REDACTED] if I could look in the apartment for the knife. [REDACTED] said I could.

43  
44 On a small glass table, just inside the door, I located a utility tool that contained  
45 several bladed tools including a knife. The tool was open with shears exposed.

**Corona Police Department  
Continuation Sheet**

**CR# 16-3353**

1 (See the attached photos.) I believe this is what I saw in Edgar's right front shorts  
2 pocket (handle down and the metal shears portion exposed) however do not  
3 know how it ended up where I located it. I took the tool as evidence, and booked  
4 it into Property at the Corona Police Station. (As I was inside the apartment, I  
5 recorded my conversation with [REDACTED] and a woman that identified herself as  
6 Edgar's wife. I also booked this recording into Property at the Corona Police  
7 Station.)






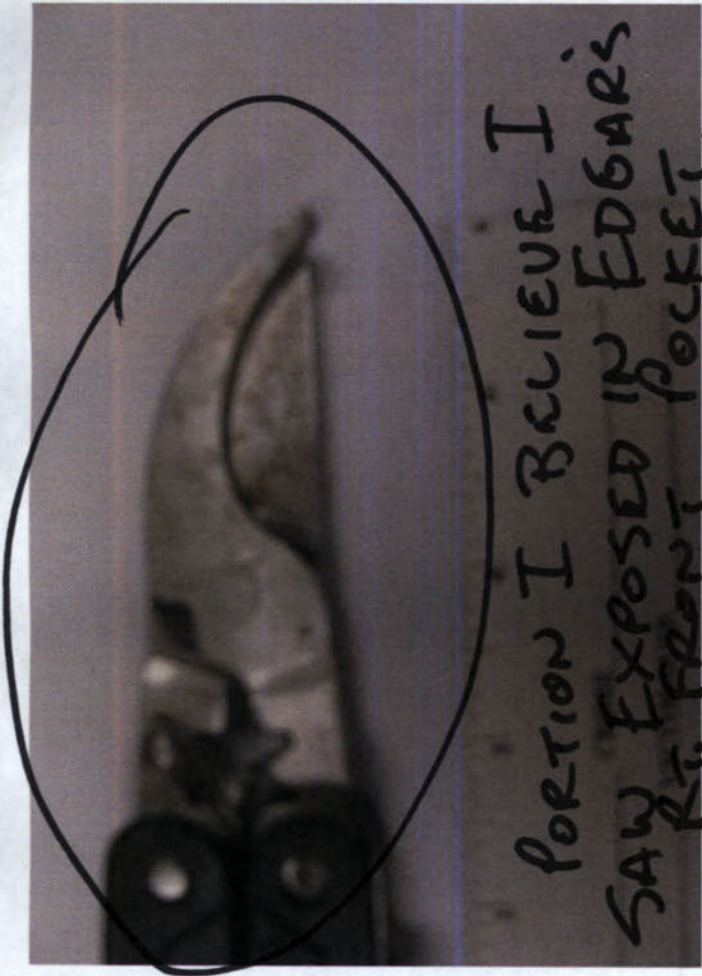
CORONA POLICE DEPARTMENT

730 Public Safety Way  
Corona CA 92880

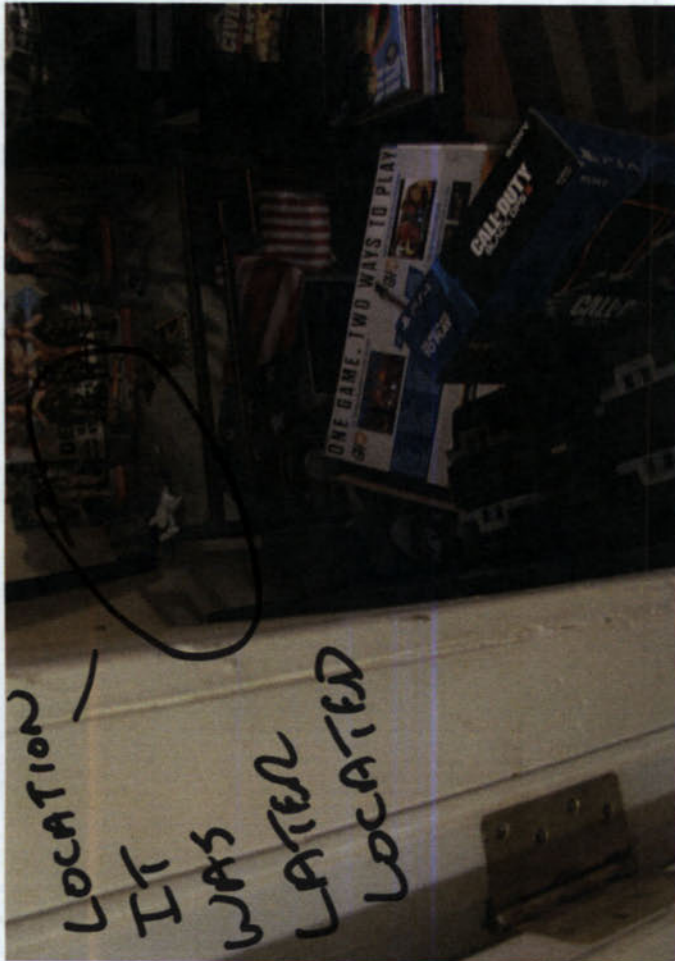
CASE NO. : 16-3353
DATE OF OFFENSE: 03/18/2016
SUSPECT LAST NAME: RIOS SUSPECT FIRST NAME: EDGAR
<input type="checkbox"/> JUVENILE <input type="checkbox"/> SEARCH WARRANT
VICTIM: ,
ASSOCIATED CASES

PROPERTY REPORT

COLLECTED BY DERUYTER, MARK (01546)		DATE/TIME COLLECTED 03/18/2016		LOCATION COLLECTED		COLLECTED ADDRESS 805 S. MERRILL ST. #D, CORO	
ITEM # MD1	TYPE Evidence	BRAND		SERIAL NO.		TOTAL VALUE	
QTY. 1	MEASURE	PRESUMPTIVE DRUG			COLOR		
CALIBER		BRL LENGTH		GUN TYPE CODE		GUN CAT CODE	
BIKE SPEED		<input type="checkbox"/> BOYS	<input type="checkbox"/> GIRLS	MODEL			
 201602534				DESCRIPTION AUDIO/VIDEO (CASS/CD/DVD/TAPE) - CD CONTAINS PHOTOS OF THE SCENE AND WEAPON RECOVERED			
OWNER: ,				ADDRESS:			
COLLECTED BY DERUYTER, MARK (01546)		DATE/TIME COLLECTED 03/18/2016 1913		LOCATION COLLECTED		COLLECTED ADDRESS 805 S. MERRILL ST. #D CORO	
ITEM # MD2	TYPE Evidence	BRAND		SERIAL NO.		TOTAL VALUE	
QTY. 1	MEASURE	PRESUMPTIVE DRUG			COLOR		
CALIBER		BRL LENGTH		GUN TYPE CODE		GUN CAT CODE	
BIKE SPEED		<input type="checkbox"/> BOYS	<input type="checkbox"/> GIRLS	MODEL			
 201602536				DESCRIPTION AUDIO/VIDEO (CASS/CD/DVD/TAPE) - CD CONTAINS AUDIO RECORDED BY DERUYTER CONVERSATIONS WITH [REDACTED] AND SU01'S WIFE.			
OWNER: ,				ADDRESS:			
COLLECTED BY DERUYTER, MARK (01546)		DATE/TIME COLLECTED 03/18/2016 1913		LOCATION COLLECTED SEEN IN SU01'S RIGHT FRONT PANT POCKET		COLLECTED ADDRESS 805 S. MERRILL ST, CORONA	
ITEM # MD3	TYPE Evidence	BRAND UNK.		SERIAL NO.		TOTAL VALUE	
QTY. 1	MEASURE	PRESUMPTIVE DRUG			COLOR		
CALIBER		BRL LENGTH		GUN TYPE CODE		GUN CAT CODE	
BIKE SPEED		<input type="checkbox"/> BOYS	<input type="checkbox"/> GIRLS	MODEL			
 201602537				DESCRIPTION BLADED WEAPONS - LARGE MULTIPURPOSE TOOL WITH GREEN HANDLE, CONTAINS SEVERAL BLADED TOOLS			
OWNER: ,				ADDRESS:			



PORTION I BELIEVE I  
SAW EXPOSED IN EDGAR'S  
Rt. FRONT POCKET.



LOCATION —  
IT  
WAS  
LATER  
LOCATED

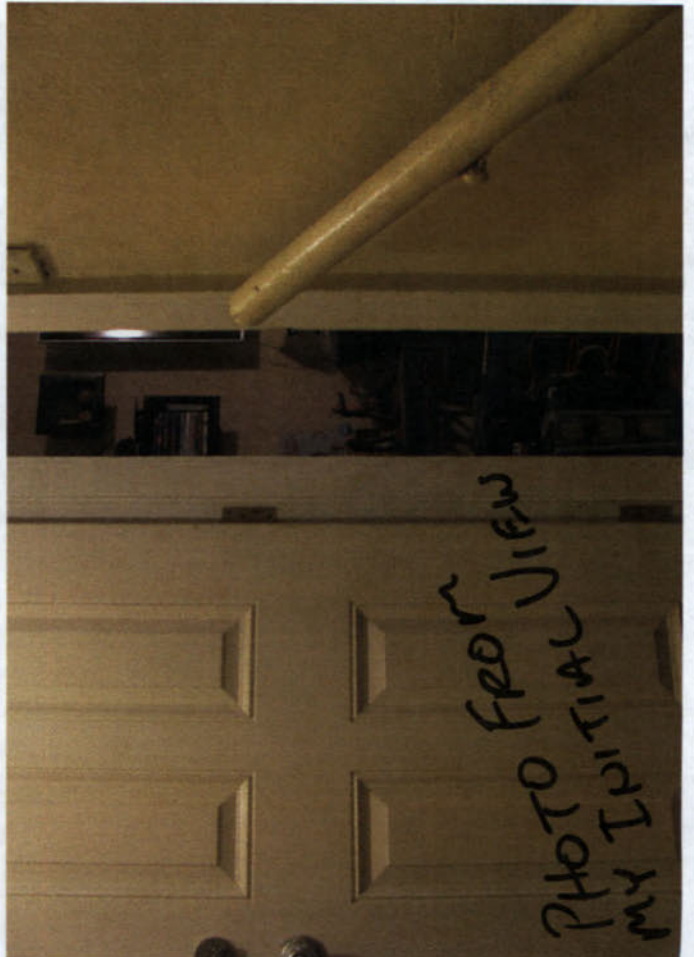


PHOTO FROM VIEW  
MY INITIAL VIEW





# CORONA POLICE DEPARTMENT

730 PUBLIC SAFETY WAY  
CORONA, CALIFORNIA 92880-2002  
CA0331500

Initial  
 Supplemental

2016 MAR 21 AM 6:46

<input type="checkbox"/> Arrest <input type="checkbox"/> Suspect <input type="checkbox"/> Unknown Suspect <input type="checkbox"/> Property/Evidence		<input type="checkbox"/> Additional Person/Vehicle <input checked="" type="checkbox"/> Narrative <input type="checkbox"/> 293(a) PC Advisement		<b>CR# 16-3353</b> Related Report(s)	
<b>CASE SUMMARY</b>	Primary Code Section/Description			BCS Code(s)	Counts
	Other Code Section/Description			BCS Code(s)	Counts
	Other Code Section/Description			BCS Code(s)	Counts
	Supplemental Code <input type="checkbox"/> Modify <input type="checkbox"/> New <input checked="" type="checkbox"/> Same <input type="checkbox"/> Add			BCS Code(s)	Counts
Location <b>805 S Merrill St # D, Corona CA</b>			Business Name <input type="checkbox"/> Victim <input checked="" type="checkbox"/> N/A		
Occurrence On/Between Date/Time <b>03-18-16 / 1913 Hours</b> Date/Time			Reported Date/Time <b>03-18-16 / 1913 Hours</b>		
Case Status:		If Cleared - Code:		Officer Injured? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes # <b>2</b>	Officer Killed? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes #
VM = Victim    RP = Reporting Party / Informant    WT = Witness    OT = Other    SU = Suspect					
<b>N/A</b>	Name (L, F, M)		DOB/Age	Occupation	
Residence Address			City	Zip	Residential Phone <b>(N/A)</b>
Business <input type="checkbox"/> Same as Residence			City	Zip	Cellular Phone <b>(N/A)</b>
Business <b>N/A</b>			City	Zip	Business Phone <b>(N/A)</b>
Sex	Race	Height	Weight	Build	Hair
--	--	--	--	--	--
Eyes			Social Security #		ID/Driver's License # & State
--			--		--
Clothing: <b>N/A</b>			Additional Information: <b>N/A</b>		
<b>N/A</b>	Name (L, F, M)		DOB/Age	Occupation	
Residence Address			City	Zip	Residential Phone ( )
Business <input type="checkbox"/> Same as Residence			City	Zip	Cellular Phone ( )
Business			City	Zip	Business Phone ( )
Sex	Race	Height	Weight	Build	Hair
--	--	--	--	--	--
Eyes			Social Security #		ID/Driver's License # & State
--			--		--
Clothing:			Additional Information:		
Vehicle Description <input type="checkbox"/> Victim's Vehicle <input type="checkbox"/> Suspect's Vehicle					
License	State	Year	Make	Model	Body Style
<b>N/A</b>	--	--	--	--	--
Color			VIN		
--			--		
<input type="checkbox"/> Unique Characteristics			<input type="checkbox"/> Description of Damage		<input checked="" type="checkbox"/> N/A
<b>Summary / Narrative:</b> <b>See attached narrative sheet.</b>					
Property Loss <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes / Value \$			Property Damage <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes / Describe:		
Officer ID# / Name <b>003128 / TARRANT</b>			Reviewed ID# / Name <b>MORRIS # 001067</b>		RMS Entry CLETS/NCIC
CPD. Form # 04-001 (2013.12.04)	Copies: <input type="checkbox"/> Det <input type="checkbox"/> Prop <input type="checkbox"/> VicWit <input type="checkbox"/> Risk Mgmt	<input checked="" type="checkbox"/> CDA <input checked="" type="checkbox"/> ARB <input type="checkbox"/> Officer:	<input type="checkbox"/> CPCS <input type="checkbox"/> CA <input checked="" type="checkbox"/> Other: P&T / DT	Reported By: <b>AV</b>	Page: 1 of <b>3</b>

**Corona Police Department**  
**Continuation Sheet**

**CR# 16-3353**

1 **DETAILS:**

2 On 03-18-16, I was employed as a Peace Officer for the City of Corona; County  
3 of Riverside and was wearing a full police uniform and driving a marked black  
4 and white police car (unit #79248). The police car is equipped with a dash  
5 camera and the event may or may not have been captured. At approximately  
6 1913 hours, I was dispatched to 805 S Merrill St #D, Corona CA reference a  
7 verbal argument between brothers and a battery.

8  
9 Upon my arrival I followed Officer Hungerford up the staircase, at the front of the  
10 house, that lead to apartment number D. The original reporting party [REDACTED]  
11 was not answering the phone he used to call the police. Concerned for his safety  
12 Officer Hungerford knocked on the front door. SU01 Edger Rios answered the  
13 door. As Officer Hungerford made contact with Edger, Edger immediately  
14 became aggressive. Corporal DeRuyter stated there was a knife in his pocket. I  
15 could see a black object in his left front pocket; however I was not able to  
16 positively identify what the object was.

17  
18 Edger began to walk backwards into the apartment. Officer Hungerford had a hold  
19 of Edger's right hand. I proceeded into the apartment and grabbed Edger's left  
20 hand. I told Edger to "Relax." I could feel Edger tensing his muscles and I could  
21 hear him screaming. I pushed Edger backwards until he ran into a couch. At this  
22 time, I was on Edger's left hand side facing him. I had a hold of his left hand.  
23 Edger was able to push forward towards the door. I began to then push Edger  
24 towards the wall with the TV on it (the wall to the left of the front door). Edger hit  
25 the TV, then continued to move towards the front door. I then pulled Edger to my  
26 left and the ground. I landed on the ground to Edger's left side. As Edger was on  
27 the ground he twisted his body, and kicked his legs violently. While on the ground  
28 Edger was flailing his arms. I was on top of Edger attempting to control his arms. I  
29 was unable to grab any portion of Edger. Edger spun to his right I was forced off  
30 of him.

31  
32 At this time, I stood up and voiced "11-11" over the police radio. It was clear that  
33 Edger was not complying with the commands he was given, and that we needed  
34 additional officers to safely detain him.

35  
36 After I made the broadcast I looked at Edger and realized he had gotten past the  
37 threshold of the front door and was now positioned on the second story landing.  
38 I could see Officer Brazeal holding one of Edger's feet. Edger was able to kick  
39 away from Officer Brazeal and make his way up to a standing position. I could  
40 see Officer Brazeal punching Edger, and it appeared as if Edger was attempting

**Corona Police Department**  
**Continuation Sheet**

**CR# 16-3353**

1 to punch back. Edgar and Officer Brazeal fought down the stairs until they  
2 reached the bottom of the landing.

3

4 Edgar, Officer Brazeal and myself landed on the front porch area. I was able to  
5 grab Edgar's right hand and assisted Corporal DeRuyter in placing Edgar's right  
6 hand in handcuffs. I used a rear wristlock to control his hand and move it to the  
7 small of his back. I held his hand in this position until Officer Slane was able to  
8 maneuver his left hand behind his back. Sergeant Morris stated he was going to  
9 attempt a carotid restraint. I used my right hand to hold back Edgars head (while  
10 continuing to hold his right wrist in a wrist lock with my left) to assist Sergeant  
11 Morris in properly executing the carotid restraint. Sergeant Morris took position  
12 on Edgar's left side. I removed my hand and re-griped Edgar's right hand with  
13 both of my hands. Once Edgar's left hand was behind his back it was cuffed.

14

15 The officers on scene attempted to sit Edgar up so he could breathe easier,  
16 however he continued to kick and grab at officers' hands. It was decided the  
17 TARP was to be deployed. I controlled Edgar's head by placing my right hand on  
18 the back of his neck. The TARP was successfully placed on Edgar and he was  
19 moved to the front yard. AMR responded and provided medical treatment for  
20 Edgar.

21

22 I rode with Edgar and Officer Placencia in the AMR transport to Corona Regional  
23 hospital. Once at the hospital I was advised by Sergeant Morris that I was  
24 cleared to leave.

25

26 **CASE DISPOSITION:**

27 See Officer Hungerford's initial report.





Premises Q 1	Point of Entry Q 2	Property Taken Q 4	Evidence Q 7	Special Crimes Q 10
<b>Business</b> <input type="checkbox"/> 1 Financial Institution <input type="checkbox"/> 2 Bar <input type="checkbox"/> 3 Cleaners/Laundry <input type="checkbox"/> 4 Construction Site <input type="checkbox"/> 5 Theater <input type="checkbox"/> 6 Fast Foods <input type="checkbox"/> 7 Gas Station <input type="checkbox"/> 8 Hotel/Motel <input type="checkbox"/> 9 Dept/Disc Store <input type="checkbox"/> 10 Drug/Pharmacy <input type="checkbox"/> 11 Gun/Sport Store <input type="checkbox"/> 12 Jewelry Store <input type="checkbox"/> 13 Liquor Store <input type="checkbox"/> 14 Convenience Store <input type="checkbox"/> 15 Tire Store <input type="checkbox"/> 16 Restaurant <input type="checkbox"/> 17 Supermarket <input type="checkbox"/> 18 Video/TV/Radio <input type="checkbox"/> 19 Auto Parts <input type="checkbox"/> 20 Bicycle Parts <input type="checkbox"/> 21 Clothing Store <input type="checkbox"/> 22 Hardware <input type="checkbox"/> 23 Medical <input type="checkbox"/> 24 Office Building <input type="checkbox"/> 25 Shoe Store <input type="checkbox"/> 26 Warehouse <input type="checkbox"/> 27 Entertainment <input type="checkbox"/> 28 Storage Facility <input type="checkbox"/> 29 Other  <b>Residence</b> <input type="checkbox"/> 30 Apartment <input type="checkbox"/> 31 Condo/Townhouse <input type="checkbox"/> 32 Duplex/Fourplex <input type="checkbox"/> 33 Garage (Attached) <input type="checkbox"/> 34 Garage (Detached) <input type="checkbox"/> 35 House <input type="checkbox"/> 36 Mobile Home <input type="checkbox"/> 37 Retirement Home <input type="checkbox"/> 38 Other  <b>Public</b> <input type="checkbox"/> 39 Church <input type="checkbox"/> 40 Hospital <input type="checkbox"/> 41 Park/Playground <input type="checkbox"/> 42 Public Building <input type="checkbox"/> 43 School <input type="checkbox"/> 44 To/From School <input type="checkbox"/> 45 Shopping Center <input type="checkbox"/> 46 Street/Highway/Fwy <input type="checkbox"/> 47 Other	<input type="checkbox"/> 1 Front <input type="checkbox"/> 2 Rear <input type="checkbox"/> 3 Side <input type="checkbox"/> 4 North <input type="checkbox"/> 5 South <input type="checkbox"/> 6 East <input type="checkbox"/> 7 West <input type="checkbox"/> 8 Window <input type="checkbox"/> 9 Door <input type="checkbox"/> 10 Sliding Glass Door <input type="checkbox"/> 11 Basement <input type="checkbox"/> 12 Roof <input type="checkbox"/> 13 Floor <input type="checkbox"/> 14 Wall <input type="checkbox"/> 15 Duct/Vent <input type="checkbox"/> 16 Garage <input type="checkbox"/> 17 Adjacent Building <input type="checkbox"/> 18 Ground Level <input type="checkbox"/> 19 Upper Level <input type="checkbox"/> 20 Other  <b>Method of Entry</b> Q 3 <input type="checkbox"/> 1 Open/Unlocked <input type="checkbox"/> 2 Attempt Only <input type="checkbox"/> 3 Bodily Force <input type="checkbox"/> 4 Bolt Cutters <input type="checkbox"/> 5 Pliers/Wrench <input type="checkbox"/> 6 Saw/Drill/Burn <input type="checkbox"/> 7 Screwdriver <input type="checkbox"/> 8 Tire Iron <input type="checkbox"/> 9 Unknown Pry Bar <input type="checkbox"/> 10 Coat Hanger/Wire <input type="checkbox"/> 11 Key <input type="checkbox"/> 12 Punch <input type="checkbox"/> 13 Remove Louvers <input type="checkbox"/> 14 Window Smash <input type="checkbox"/> 15 Window Forced <input type="checkbox"/> 16 Brick/Rock <input type="checkbox"/> 17 Hid in Building <input type="checkbox"/> 18 Lock Box <input type="checkbox"/> 19 Door/Lock Forced <input type="checkbox"/> 20 Trunk Forced <input type="checkbox"/> 21 Other	<input type="checkbox"/> 1 Cash/Notes <input type="checkbox"/> 2 Jewelry/Metals <input type="checkbox"/> 3 Clothing/Furs <input type="checkbox"/> 4 Office Equip. <input type="checkbox"/> 5 TV/Camera/Stereo <input type="checkbox"/> 6 Firearms <input type="checkbox"/> 7 Household Goods <input type="checkbox"/> 8 Consumable Goods <input type="checkbox"/> 9 Livestock <input type="checkbox"/> 10 Miscellaneous <input type="checkbox"/> 11 Car Radio/Speakers <input type="checkbox"/> 12 Narcotics/Drugs <input type="checkbox"/> 13 Tools <input type="checkbox"/> 14 Checks <input type="checkbox"/> 15 ID Documents <input type="checkbox"/> 16 Other  <b>Victim Rel/Susp</b> Q 5 <input type="checkbox"/> 1 Husband <input type="checkbox"/> 2 Wife <input type="checkbox"/> 3 Mother <input type="checkbox"/> 4 Father <input type="checkbox"/> 5 Step <input type="checkbox"/> 6 Daughter <input type="checkbox"/> 7 Son <input type="checkbox"/> 8 Brother <input type="checkbox"/> 9 Sister <input type="checkbox"/> 10 Other Family Member <input type="checkbox"/> 11 Acquaintance <input type="checkbox"/> 12 Friend <input type="checkbox"/> 13 Boyfriend <input type="checkbox"/> 14 Girlfriend <input type="checkbox"/> 15 Neighbor <input type="checkbox"/> 16 Business Associate <input type="checkbox"/> 17 Student <input type="checkbox"/> 18 Teacher <input type="checkbox"/> 19 Stranger <input type="checkbox"/> 20 Other  <b>Victim Condition</b> Q 6 <input type="checkbox"/> 1 Under Influence <input type="checkbox"/> 2 Sick/Injured <input type="checkbox"/> 3 Senior Citizen <input type="checkbox"/> 4 Blind <input type="checkbox"/> 5 Handicapped <input type="checkbox"/> 6 Deaf <input type="checkbox"/> 7 Mute <input type="checkbox"/> 8 Mentally Impaired <input type="checkbox"/> 9 Other	<input type="checkbox"/> 1 Blood <input type="checkbox"/> 2 Bullet Casings <input type="checkbox"/> 3 Clothes <input type="checkbox"/> 4 Fingerprints <input type="checkbox"/> 5 Footprints <input type="checkbox"/> 6 Hair/Fibers <input type="checkbox"/> 7 Other Prints <input type="checkbox"/> 8 Paint <input type="checkbox"/> 9 Photographs <input type="checkbox"/> 10 Rape Kit <input type="checkbox"/> 11 Semen <input type="checkbox"/> 12 Stains <input type="checkbox"/> 13 Tools <input type="checkbox"/> 14 Tool Marks <input type="checkbox"/> 15 Vehicle <input type="checkbox"/> 16 Weapon(s) <input type="checkbox"/> 17 Urine <input type="checkbox"/> 18 Breath <input type="checkbox"/> 19 Other  <b>Solvability Factors</b> Q 8 <input type="checkbox"/> 1 Will Not Prosecute <input type="checkbox"/> 2 There is a Witness <input type="checkbox"/> 3 Suspect Arrested <input type="checkbox"/> 4 Suspect Named <input type="checkbox"/> 5 Suspect Described <input type="checkbox"/> 6 Suspect Can Be ID'd <input type="checkbox"/> 7 Susp Can be Found <input type="checkbox"/> 8 Susp Veh Can Be ID'd <input type="checkbox"/> 9 Identifiable 496 PC <input type="checkbox"/> 10 Good Physical Evidence <input type="checkbox"/> 11 Significant MO <input type="checkbox"/> 12 Other  <b>Vehicle Type</b> Q 9 <input type="checkbox"/> 1 Passenger Car <input type="checkbox"/> 2 Motorcycle/Moped <input type="checkbox"/> 3 Pickup Truck <input type="checkbox"/> 4 Trailer <input type="checkbox"/> 5 Truck <input type="checkbox"/> 6 Van <input type="checkbox"/> 7 Camper <input type="checkbox"/> 8 Motor Home <input type="checkbox"/> 9 Other	<input type="checkbox"/> 1 Gang Related 777777 <input type="checkbox"/> 2 Hate Crime 888888  <b>Gang Information</b> Q 18 <input type="checkbox"/> Suspect # <b>Gang Affiliation:</b> <input type="checkbox"/> 1 Unknown <input type="checkbox"/> 2 Not Asked <input type="checkbox"/> 3 Yes/Gang Name:  <input type="checkbox"/> 4 Moniker/AKA:  <b>Identified by:</b> <input type="checkbox"/> 5 Self Admit <input type="checkbox"/> 6 Gang Hand Signs <input type="checkbox"/> 7 Gang Dress <input type="checkbox"/> 8 Arrested With Gang Members <input type="checkbox"/> 9 Affiliates With Gang Members <input type="checkbox"/> 10 Jail Admit <input type="checkbox"/> 11 Gang Tattoos <input type="checkbox"/> 12 Other  <b>Tattoos/Scars/Marks</b> Q 19 <input type="checkbox"/> Suspect # <input type="checkbox"/> 1 Head: <input type="checkbox"/> 2 Face: <input type="checkbox"/> 3 Neck: <input type="checkbox"/> 4 Back: <input type="checkbox"/> 5 Chest: <input type="checkbox"/> 6 Stomach: <input type="checkbox"/> 7 Right Arm: <input type="checkbox"/> 8 Left Arm: <input type="checkbox"/> 9 Right Leg: <input type="checkbox"/> 10 Left Leg: <input type="checkbox"/> 11 Right Hand: <input type="checkbox"/> 12 Left Hand: <input type="checkbox"/> 13 Other:

Summary / Narrative (Continued):

Page: \_\_\_\_\_ of \_\_\_\_\_


**EVIDENCE SYNC**
**TASER Information**

**Serial** X00-676892  
**Model** TASER X26  
**Firmware Version** Rev. 22  
**Application Version** 2.9.2

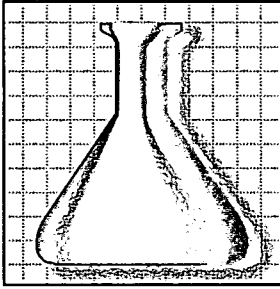
**Offline Report**

**Local Timezone** Pacific Standard Time (UTC -07:00)  
**Generated On** 19 Mar 2016 19:08:27

**Dates from : Fri Mar 18 00:00:00 2016 to : Sun Mar 20 00:00:00 2016**
**Device (X26)**

Seq #	Local Time [DD:MM:YYYYhh:mm:ss]	Event [Event Type]	Duration [Seconds]	Temp [Degrees Celcius]	Batt Remaining [%]
72	18 Mar 2016 19:52:25	Trigger	5	28	65
73	18 Mar 2016 19:52:36	Trigger	5	28	64
74	18 Mar 2016 22:29:28	Trigger	1	27	64
75	19 Mar 2016 19:05:45	Sync	19 Mar 2016 19:30:23 to 19 Mar 2016 19:05:45		

**BIO-TOX**



# Bio-Tox LABORATORIES



Laboratory Director  
Erin Crabtree, M.S., D-ABFT-FT

Technical Director  
Dale R. Somers, C.L.S.

Toxicologist  
Ola Bawardi, M.S.

Toxicologist  
Kristen Steward, M.S.

CORONA POLICE DEPARTMENT  
730 CORPORATION YARD  
CORONA, CA 92880

163353  
RIOS, EDGAR

PATIENT NAME		SEX	DATE OF BIRTH
-----		---	-----
RIOS, EDGAR		M	11/18/88
BTL NUMBER	REQUESTING AGENCY	REQUESTED BY	AGENCY NUMBER
-----	-----	-----	-----
6-15843-6	1004	HUNGERFORD	163353
SPECIMEN	DATE COLLECTED	TIME TAKEN	DATE RECEIVED
-----	-----	-----	-----
BLOOD	03/18/16	20:28	03/24/16
			03/28/16

EXPANDED IMMUNOASSAY DRUG SCREEN

BLOOD SCREENED FOR:  
AMPHETAMINES (METHAMPHETAMINE, AMPHETAMINE), BENZODIAZEPINES,  
CANNABINOIDS, COCAINE &/OR METABOLITE, OPIATES (MORPHINE, CODEINE),  
AND PHENCYCLIDINE (PCP)

DRUGS REPORTED AS DETECTED ARE PRESUMPTIVE POSITIVE UNLESS A MORE SPECIFIC  
CONFIRMATORY ANALYSIS (LC/MS/MS) IS COMPLETED. CONFIRMATION IS REQUIRED  
PRIOR TO COURT APPEARANCE BY A TOXICOLOGIST.

TEST	RESULTS
AMPHETAMINES	DETECTED
AMPHETAMINES BLOOD SCREEN	greater than 100 ng/mL
ANALYSIS BY: JORDAN CASPER	

2016 MAR 31 AM 9:08