

**Los Angeles Police Department
INVESTIGATIVE REPORT**

Page 1 of 1 70-03.01 00 (Rev. 08/08)

COMBINED EVID. REPORT
 MULTIPLE DR# ON THIS REPORT

CASE SCREENING FACTOR(S) <input type="checkbox"/> SUSPECT / VEHICLE NOT SEEN <input type="checkbox"/> PRINTS OR OTHER EVIDENCE NOT PRESENT <input type="checkbox"/> MO NOT DISTINCT <input type="checkbox"/> PROPERTY LOSS LESS THAN \$3000 <input type="checkbox"/> NO SERIOUS INJURY TO VICTIM <input type="checkbox"/> ONLY ONE VICTIM INVOLVED		REPORT OF: <u>STEPHEN (SA)</u> INCIDENT NO: <u>NR114</u> INC # <u>151664500466</u> DR # <u>2615</u>
PREMISES (SPECIFIC TYPE) <input type="checkbox"/> ATM <u>STREET</u>		VICTIM LAST NAME, FIRST, MIDDLE (FROM IF BUSINESS): <u>STEPHENS, KARIN ANTONIA</u> SEX: <u>F</u> RACE: <u>BLK</u> HT: <u>53</u> WT: <u>120</u> AGE: <u>27</u> ADDRESS: <u>797</u> PHONE: <u></u> DR. LIC. NO. (IF NONE, OTHER ID # AND NO.): <u></u> FOREIGN LANGUAGE SPOKEN (IF APPLICABLE): <u></u> OCCUPATION: <u>WRITER</u>
ENTRY 4888FV POINT OF ENTRY POINT OF EXIT <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> SIDE <input type="checkbox"/> ROOF <input type="checkbox"/> FLOOR <input type="checkbox"/> OTHER	LOCATION OF OCCURRENCE <input type="checkbox"/> SAME AS V# <input type="checkbox"/> RES. <input type="checkbox"/> BUS. R.D. <u></u> <u>CANALONCA BL / BARTMAN BL</u> DATE & TIME OF OCCURRENCE: <u>6-5-08</u> DATE & TIME REPORTED TO PD: <u>6-5-08 / 0416 HRS</u> TYPE PROPERTY <input type="checkbox"/> STOLEN <input type="checkbox"/> LOST <input type="checkbox"/> DAMAGED <input type="checkbox"/> \$3,000 GIVEN <input type="checkbox"/> STOLEN/LOST \$ <u></u> RECOVERED \$ <u></u> SET DAMAGED \$ <u></u>	PRINTS BY PHIL. INV. ATTEMPT OBTAINED <input type="checkbox"/> Y <input type="checkbox"/> N VICTIM'S VEH. (IF INVOLVED) YEAR, MAKE, TYPE, COLOR, LIC. NO. <u></u> NOTIFICATION(S) (PERSON & DIVISION) <u></u> CONNECTED REPORT(S) (TYPE & DR) <u></u>
MO IF LONG FORM, LIST UNIQUE ACTIONS. IF SHORT FORM, DESCRIBE SUSPECT'S ACTIONS IN BRIEF PHRASES, INCLUDING WEAPON USED. DO NOT REPEAT ABOVE INFO, BUT CLARIFY REPORT AS NECESSARY. IF ANY OF THE MISSING ITEMS ARE POTENTIALLY IDENTIFIABLE, ITEMIZE AND DESCRIBE ALL ITEMS MISSING IN THIS INCIDENT IN THE NARRATIVE. <u>STEP AND NOT INVOLVED IN A VERBAL UMPIRE, STEP BECAME ENRAGED AND RAN OVER VICTIM RIGHT FOOT W/ WHEEL AS HE WAS PULLING ALYNS</u>		
HATE CRIME / INCIDENT <input type="checkbox"/> DOMESTIC VIOLENCE <input type="checkbox"/> INITIALS, LAST NAME, PERM. NO., DIV. / DETAIL, PERSON REPORTING, SIGNATURE, OR RECEIVED BY, PHONE, EMPLOYEE(S) <u>AC, GARCIA</u> <u>38133</u> <u>NR114</u> <u>NR114</u> <u>NR114</u> <u>NR114</u> <u>RV, VILLALBA</u> <u>38076</u> <u>NR114</u> <u>NR114</u> <u>NR114</u> <u>NR114</u>		

THIS REPORT DOES NOT CONSTITUTE VALID IDENTIFICATION
 KEEP THIS REPORT FOR REFERENCE. INSTRUCCIONES EN ESPAÑOL AL REVERSO.

Your case will be assigned to a detective for follow-up investigation based upon specific facts obtained during the initial investigation. Studies have shown that the presence of these facts can predict whether a detailed follow-up investigation would likely result in the arrest and prosecution of the suspect(s) or the recovery of property, in a manner that is cost-effective to you, the taxpayer. Significant decreases in personnel have made it impossible for detectives to personally discuss each and every case with all crime victims. A detective will not routinely contact you, unless the detective requires additional information.

TO REPORT ADDITIONAL INFORMATION: If you have specific facts to provide which might assist in the investigation of your case, please contact the detective Monday through Friday, between 8:00 A.M. and 9:30 P.M., or between 2:30 P.M. and 4:00 P.M. at telephone number . If the detective is not available when you call, please leave a message and include the telephone number where you can be reached.

COPY OF REPORT: If the checkbox under your signature is checked, this copy is the complete report. If unchecked and you wish to purchase a copy of the complete report, phone (213) 485-4193 to obtain the purchase price. Send a check or money order payable to the Los Angeles Police Department to Records and Identification Division, Box 30158, Los Angeles, CA 90030. Include a copy of this report or the following information with your request: 1) Name and address of victims. 2) Type of report and DR number (if listed above) 3) Date and location of occurrence. NOTE: Requests not accompanied by proper payment will not be processed.

DR NUMBER. If not entered on this form, the DR number may be obtained by writing to Records and Identification Division and giving the information needed to obtain a copy of the report (see above paragraph). Specify that you only want the DR number. It will be forwarded without delay. There is no charge for this service.

CREDIT CARDS/CHECKS. Immediately notify concerned credit corporation or banks to avoid possibility of being liable for someone else using your stolen or lost credit card or check.

- HOW YOU CAN HELP THE INVESTIGATION OF YOUR CASE:**
- Keep this memo for reference.
 - If stolen items have serial numbers not available at time of report attempt to locate them and phone them to the detective at the listed number.
 - If you discover additional losses, complete and mail in the Supplemental Property Loss form given to you by the reporting employee.
 - Promptly report recovery of property.
 - Promptly report additional information such as a neighbor informing you of suspicious activity at time crime occurred.

VICTIM-WITNESS ASSISTANCE PROGRAM: The Los Angeles City and County Victim-Witness Assistance Program (VWAP) can help to determine if you qualify for Victim of Violent Crime compensation. If you qualify, they will assist with filing your claim application. If you are a victim or a witness to a crime and will be going to court, they will explain the court procedures to you. Their staff may also assist you with other problems created by the crime.

To find the program location nearest to you, call the Victim-Witness Assistance Program at the Los Angeles City Attorney's Office (213) 485-6976, or the Los Angeles County District Attorney's Office (213) 974-7499.

VICTIMS OF VIOLENT CRIME COMPENSATION: Refer to paragraph at bottom of reverse side.
www.LAPDOnline.org



OFFICE OF THE CITY ATTORNEY
ROCKARD J. DELGADILLO
CITY ATTORNEY

Susan K... .

1/06/2007

Darius Mc Crary

File No: H7HY00661

Dear Darius Mc Crary:

A complaint has been filed with this office stating you have violated Section P273.5A, Spousal battery, on 08/24/2007. The matter has been scheduled for a City Attorney office hearing on 11/28/2007 at 08:45 a.m.

Please appear at the City Attorney's Office, 312 South Hill St., 2nd Floor, Los Angeles, CA, 90013, on the above date and time. **WE DO NOT PROVIDE FREE PARKING.**

Please bring this notice and any documents, e.g. medical reports, photos, and receipts, or witnesses necessary to assist this office in reaching a decision in this matter. If you need the services of an interpreter in a language other than Spanish, or require other reasonable accommodations to attend this hearing, please call 213-485-6681 immediately. There is no charge for the interpreter.

WARNING: Failure to appear at the City Attorney hearing may result in the filing of a criminal complaint against you.

Very truly yours,

LaVerne Greenaway
Hearings Coordinator



CONTINUATION SHEET

Los Angeles Police Department

PAGE NO. 2		TYPE OF REPORT Domestic Battery				BOOKING NO.	DR NO. 07-11 21165
ITEM NO.	QU AN	ARTICLE	SERIAL NO	BRAND	MODEL NO.	MISC DESCRIPTION (EG. COLOR, SIZE, INSCRIPTIONS, CALIBRE, REVOLVER, ETC)	DOLLAR VALUE

Victim and Susp have been in a dating relationship for the past two months but have known each other for the past 7 years. Victim and Susp are living together with the victim's 9-year-old son (Wilson, Naiim) but have no children in common. There is no reported history of domestic violence. (All photos were taken in the presence of victim's fiancé's mother).

Victim: Desiree Stephens; Karin Antonia
 Witness: McCrary Donavan (will be referred to as Donavan in the report)
 Suspect: McCrary Darius Creston (will be referred to as McCrary in the report)

Source of Activity:

On 08/25/07 at approximately 0150 hrs my partner (Officer Nichols # 34726) and I (Officer Rivera # 38469) were assigned to Van Nuys division uniform patrol, unit 9A37. We were driving a marked black and white police vehicle when we responded to a radio call, "Domestic Violence investigation at 070825000565."

Investigation:

Upon arrival we were met by the victim-Stephens who stated the following. On 08/24/07 at approximately 2345 hrs, she and the suspect-McCrary were at a strip club (Cheetah), when she and McCrary began arguing about an exboyfriend of hers. McCrary was yelling and cursing at Stephens. At one point McCrary called Stephens an unknown derogatory name which infuriated her. This caused Stephens to charge at McCrary. McCrary, who is trained in Martial Arts (as stated by Stephens) grabbed Stephens, spun her around and placed her in a chokehold around her neck.

McCrary then began to squeeze Stephens's neck while at the same time stating, "Go to sleep bitch...go to sleep!" Stephens, in a panic, began to struggle in McCrary's hold, trying to cry out for help but could not. Stephens then passed out. Before passing out, Stephens stated that she could hear the suspect's brother, witness Donavan McCrary (who works at Cheetah's) saying, "Come on man, don't do that. Come on Darius, let her go."

Stephen says that she lost consciousness for an unknown period of time. When she awoke, Donavan was sitting on top of McCrary's vehicle. Stephen was groggy and slid off the trunk onto the ground. Stephen began to scream after regaining memory of what had occurred. Club manager "Tony" then called a cab for Stephen and had the cab driver take her home. When Stephens arrived home, she discovered she had bruises to her face, arms, legs and back. Stephens also noticed that McCrary had been at the house before her and moved all of his personal property out. Stephens was getting many calls from McCrary that night asking her to tell the police to leave. Stephens last call from McCrary was of him leaving California to his alternate home in

I observed bruising and scrapes to Stephens arms, knees, feet and face. I also observed she had both her lips split from the inside. Stephens stated she wanted an EPO against McCrary. I contacted Commissioner Johnson and he granted the EPO (T073517). The EPO will expire 08/31/07 at 5pm.

CONTINUATION SHEET

Los Angeles Police Department

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ITEM NO.	QU AN	ARTICLE	SERIAL NO	BRAND	MODEL NO.	MISC DESCRIPTION (EG. COLOR, SIZE, INSCRIPTIONS, CALIBER, REVOLVER, ETC)	DOLLAR VALUE

Injury/Medical Treatment:

Stephens had a 1 inch scrape on the top of her left foot, a 1 1/2 inch scrape to her left knee, (2) 1 inch bruises on her right arm, bruising and scrapes to her left cheek and both her lips were split from the inside. Stephens refused any medical attention, and stated she used to be a nurse and would treat her self.

Photographs:

My partner took (7) photos of Stephens's injuries on her face, arm and leg and attached them to this report. All photos were booked at Van Nuys property division.

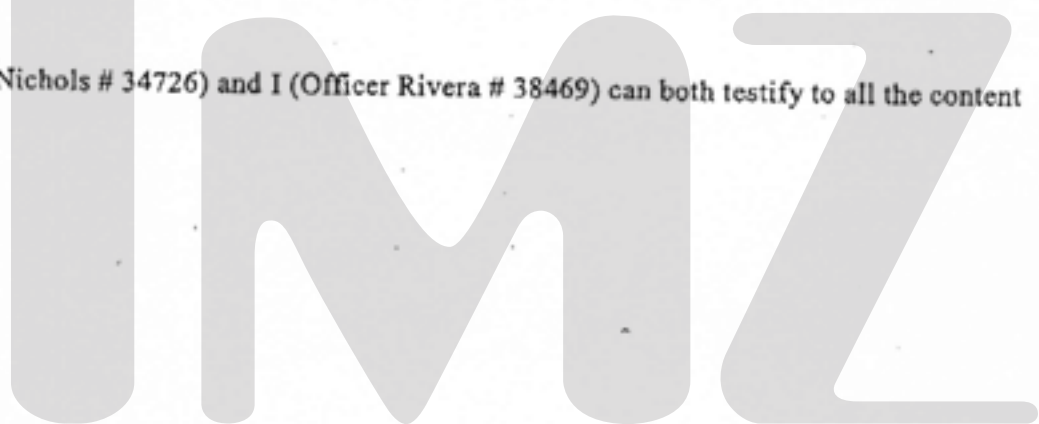
Evidence:

Additional:

Stephen stated that Mc Crary has training in martial arts and boxing. All of the events took place in Northeast Division LAPD.

Court Information:

My partner (Officer Nichols # 34726) and I (Officer Rivera # 38469) can both testify to all the content in this report.



DOMESTIC VIOLENCE SUPPLEMENTAL REPORT

VICTIM'S NAME (LAST, FIRST, MIDDLE) DESIREE STEPHENS, KARIN ANTONIA DATE OF BIRTH 01-24-78 DR # 07 11 21165

Table with 3 columns: VICTIM, SUSPECT, CRIME SCENE. Rows include symptoms like ANGRY, FEARFUL, CALM, etc., and crime scene details like PHONE DISABLED, FORCED ENTRY, etc.

RELATIONSHIP BETWEEN VICTIM AND SUSPECT. Mark all that apply. Includes fields for SPOUSE, FORMER SPOUSE, COHABITANTS, etc., and relationship duration.

RESTRAINING ORDERS: [X] Yes [] No. TYPE: [X] Emergency, [] Temporary, [] Permanent, [] Current, [] Expired. ORDER OR DOCKET NUMBER: T073S17

M.T. VICT SUSP NONE. WILL SEEK OWN DOCTOR. FIRST AID. PARAMEDICS. HOSPITAL. REFUSED MEDICAL AID. PREGNANT. PARAMEDICS AT SCENE: [] Yes [X] No.

VICTIM GIVEN: [X] DOMESTIC VIOLENCE VICTIMS MEMO, FORM 15.40.1 [] AREA DOMESTIC VIOLENCE UNIT PHONE NUMBER

REPORTING OFFICER: RIVERA. SERIAL NUMBER: 38469. DIV/DETAIL: VN45/9A77. REPORTING OFFICER: MICHOLES. SERIAL NUMBER: 74726. DIV/DETAIL: VN45/9A37. SUPERVISOR APPROVING: [Signature]. SERIAL NUMBER: 30883.

WITNESSES

WITNESSES PRESENT DURING DOMESTIC VIOLENCE? Yes No
 STATEMENT(S) TAKEN? Yes No
 CHILDREN PRESENT DURING DOMESTIC VIOLENCE? Yes No
 List names, ages and DOB of all children present on PIR or Arrest Report in the narrative of the report.
 STATEMENT(S) TAKEN? Yes No (include in narrative)
 Describe witness/children emotional state in narrative of report.

EVIDENCE

EVIDENCE COLLECTED: Mark all that apply
 FROM: Crime Scene Hospital Other: Explain
 PHOTOS Yes No Total Number of Photos 7
 TYPE: 35MM Polaroid Digital Image
 Photos of victim's injuries: Yes No
 Photos of suspect's injuries: Yes No
 TAKEN BY: Name OFFICER NICHOLS Serial No. 74726

WEAPONS: Mark all that apply
 Weapon used during incident: Yes No
 Weapon(s) booked: Yes No
 Firearm(s) booked for safety: Yes No
 Type of weapon(s):

Use these diagrams to mark any injuries or physical oddities observed. Explain all injuries, including "complained of" injuries, in the narrative portion of the report. (Diagrams are not gender specific)

VICTIM/SUSPECT

MINOR CUTS

BRUISE ?
SCRATCHES

HT. 507

WT. 120

BRUISE

SCRAPES

BRUISE
SCRATCHES

VICTIM/SUSPECT

HT. 603

WT. 200

TO ALL HEALTH CARE PROVIDERS:

Having been advised of my right to refuse, I hereby consent to the release of my medical records to law enforcement, the District Attorney's Office, and/or the City Attorney's Office.

Victim's Signature

Date