

CAD # 08195453

Shreveport Police Department OFFENSE REPORT

Report Received By

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

OFFENSE # 2008029920

☐ Felony☒ Misdemeanor☐ Incident

OFFICER'S NAME Pittman, L B

BADGE # 249

SUPERVISOR'S NAME Thompson, T D

BADGE # 424

DATE REPORTED 08/28/2008

TIME REPORTED 00:35

OCCURRENCE DATE 08/28/2008

OCCURRENCE TIME 00:00/ 00:35

DAY THURSDAY

OFFENSE AS REPORTED

Narrative

LRS#

LOCATION OF INCIDENT 1955 BAYOU SHREVEPORT, LA

Numerical

Street Name

DISTRICT 05

DID VICTIM

RECEIVE VINE INFO ☐

WAS AFFIDAVIT

SUBMITTED ☐

WAS DOMESTIC

VIOLENCE INVOLVED ☐

(RECORDS USE ONLY)

REVIEWERS BADGE # 248

OFFENSE	LRS#	UCR	ATT/COM	LOCATION ENTER CODE	WEAPON ENTER CODE	ENTER 'A' AUTOMATIC	CRIMINAL ACTIVITY ENTER UP TO 3 CODES	INCIDENT STATUS:
BATTERY SIMPLE	14:35	BS	<input type="checkbox"/> ATT <input checked="" type="checkbox"/> COM	13	40	,	X	<input type="checkbox"/> UNFOUNDED <input checked="" type="checkbox"/> CLEARED BY ARREST <input type="checkbox"/> PENDING <input type="checkbox"/> CLEARED EXCEPTIONALLY A <input type="checkbox"/> DEATH OF OFFENDER B <input type="checkbox"/> PROSECUTION DECLINED C <input type="checkbox"/> EXTRADITION DECLINED D <input type="checkbox"/> REFUSED TO COOPERATE E <input type="checkbox"/> JUVENILE NO CUSTODY O <input type="checkbox"/> OTHER N <input type="checkbox"/> NOT APPLICABLE
			<input type="checkbox"/> ATT <input type="checkbox"/> COM					
			<input type="checkbox"/> ATT <input type="checkbox"/> COM					
			<input type="checkbox"/> ATT <input type="checkbox"/> COM					
			<input type="checkbox"/> ATT <input type="checkbox"/> COM					

LOCATION OF OFFENSE

01 AIR/BUS/TRAIN TERMINAL	11 GOVERNMENT/PUBLIC BUILDINGS	19 RENTAL STORAGE/FACILITY
02 BANK/SAVINGS & LOAN	12 GROCERY/SUPERMARKET	20 RESIDENCE/HOME
03 BAR/NIGHT CLUB	13 HIGHWAY/ROAD/ALLEY	21 RESTAURANT
04 CHURCH/SYNAGOGUE/TEMPLE	14 HOTEL/MOTEL/ETC.	22 SCHOOL/COLLEGE
05 COMMERCIAL/OFFICE BUILDING	15 JAIL/PRISON	23 SERVICE/GAS STATION
06 CONSTRUCTION SITE	16 LAKE/WATERWAY	24 SPECIALTY STORE (TV,FUR,ETC)
07 CONVENIENCE STORE	17 LIQUOR STORE	25 OTHER/UNKNOWN
08 DEPARTMENT/DISCOUNT STORE	18 PARKING LOT/GARAGE	40 CASINO LAND BASED
09 DRUG STORE/DR'S OFFICE/HOSPITAL		41 CASINO RIVER BOAT
10 FIELD/WOODS		

TYPE OF WEAPON/FORCE INVOLVED:

11 FIREARM (type not stated)	40 PERSONAL WEAPONS
12 HANDGUN	50 POISON
13 RIFLE	60 EXPLOSIVES
14 SHOTGUN	65 FIRE/INCENDIARY
15 OTHER FIREARM	70 NARCOTICS/DRUGS
20 KNIFE/CUTTING INSTRUMENT	85 ASPHYXIATION
30 BLUNT OBJECT	90 OTHER
35 MOTOR VEHICLE	95 UNKNOWN
	99 NONE

TYPE CRIMINAL ACTIVITY:

B BUYING/RECEIVING
C CULTIVATION/
MANUFACTURING/PUBLISHING
D DISTRIBUTION/SELLING
E EXPLOITING CHILDREN
O OPERATING/PROMOTING/
ASSISTING
P POSSESSING/CONCEALING
T TRANSPORTING/TRANSMITTING
IMPORTING
U USING/CONSUMING
I POSSESSION W/ INTENT TO DIST.
X OTHER

BRIEF NARRATIVE

VICTIM WAS ASSAULTED BY HIS GIRLFRIEND. THE GIRL FRIEND WAS INTOXICATED AND THE VICTIM WAS ASSAULTED BY THE GIRLFRIEND AS HE WAS GOING TO TAKE HER HOME.

(For Burglary Only) POINT OF ENTRY:

TOOL/EVIDENCE USED:

NUMBER OF PREMISES ENTERED:

METHOD OF ENTRY: ☐ FORCIBLE ☐ NO FORCE

INVESTIGATIVE FACTORS

Info Element	Wgt	Info Element	Wgt
Est. time lapse between crime and the initial investigation		On view report of offense	1 <input checked="" type="checkbox"/>
Less than 1 hour	5 <input checked="" type="checkbox"/>	Usable fingerprints	7 <input type="checkbox"/>
1 to 12 hours	1 <input type="checkbox"/>	Suspect name	9 <input checked="" type="checkbox"/>
More than 12 hours	0 <input type="checkbox"/>	Suspect description	5 <input checked="" type="checkbox"/>
Witness report of offense	7 <input type="checkbox"/>	Vehicle description	2 <input type="checkbox"/>
		Vehicle license number	5 <input type="checkbox"/>
		Total Score:	20

REPORTING PERSON CLASS CODE: JUVENILE ☐WITNESS ☐INTERVIEWED ☐

REPORTING PERSON:

Hatfield, Eric

Last

First

Middle

SEX M RACE W DOB 01/28/1972

ADDRESS 10489 PLUM CREEK SHREVEPORT, LA 71106

Numerical

Street Name

City/Town

State

Zip

HOME PHONE (318) 347-2443

BUSINESS PHONE

VICTIM INFORMATION	VICTIM # <u>1</u> (Last, First, Middle) Hatfield, Eric				D.L.		Phone: (Home) (318) 347-2443		Phone: (Bus.)								
	ADDRESS: (Street, City, State, Zip) 10489 PLUM CREEK SHREVEPORT, LA				ADDRESS: (Bus.)				VICTIM CONNECTED TO OFFENSE 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>								
	TYPE OF VICTIM: (Check Only One) I <input checked="" type="checkbox"/> INDIVIDUAL G <input type="checkbox"/> GOVERNMENT U <input type="checkbox"/> UNKNOWN B <input type="checkbox"/> BUSINESS R <input type="checkbox"/> RELIGIOUS J <input type="checkbox"/> JUVENILE F <input type="checkbox"/> FINANCIAL S <input type="checkbox"/> SOCIETY/PUBLIC L <input type="checkbox"/> L.E. OFFICER				RACE: W <input checked="" type="checkbox"/> WHITE B <input type="checkbox"/> BLACK I <input type="checkbox"/> INDIAN A <input type="checkbox"/> ASIAN U <input type="checkbox"/> UNKNOWN		SEX: M <input checked="" type="checkbox"/> MALE F <input type="checkbox"/> FEMALE U <input type="checkbox"/> UNKNOWN		AGE: 36 DOB: 01/28/1972								
	AGGRAVATED ASSAULT/HOMICIDE CIRCUMSTANCES: (Check up to Two) 01 <input type="checkbox"/> ARGUMENT 06 <input type="checkbox"/> LOVER'S QUARREL 40 <input type="checkbox"/> CHILD ABUSE 02 <input type="checkbox"/> ASSAULT ON OFFICER 07 <input type="checkbox"/> MERCY KILLING 03 <input type="checkbox"/> DRUG DEALING 08 <input type="checkbox"/> OTHER FELONY INVOLVED 04 <input type="checkbox"/> GANGLAND 09 <input type="checkbox"/> OTHER CIRCUMSTANCES 05 <input type="checkbox"/> JUVENILE GANG 10 <input type="checkbox"/> UNKNOWN CIRCUMSTANCES				ADDITIONAL JUSTIFIED HOMICIDE CIRCUMSTANCES (Check only one code) A <input type="checkbox"/> Criminal Attacked Officer, Officer Killed Criminal B <input type="checkbox"/> Criminal Attacked Officer, Other Officer Killed Criminal C <input type="checkbox"/> Criminal Attacked by Civilian D <input type="checkbox"/> Criminal Attempted Flight from a Crime E <input type="checkbox"/> Criminal Killed in the Commission of a Crime F <input type="checkbox"/> Criminal Resisted Arrest G <input type="checkbox"/> Unable to Determine/Not Enough Information		This Section is Filled Out if Victim is Law Enforcement Officer										
	RELATIONSHIP OF VICTIM TO OFFENDER: (For multiple offender relationships enter offender number(s) in space) SE <input type="checkbox"/> SPOUSE SC <input type="checkbox"/> STEPCCHILD XS <input type="checkbox"/> EX-SPOUSE CS <input type="checkbox"/> COMMON-LAW SPOUSE OF <input type="checkbox"/> STEP SIBLING EE <input type="checkbox"/> EMPLOYEE PA <input type="checkbox"/> PARENT AQ <input type="checkbox"/> OTHER FAMILY ER <input type="checkbox"/> EMPLOYER SB <input type="checkbox"/> SIBLING FR <input type="checkbox"/> FRIEND OK <input type="checkbox"/> OTHERWISE KNOWN CH <input type="checkbox"/> CHILD NE <input type="checkbox"/> NEIGHBOR ST <input type="checkbox"/> STRANGER GP <input type="checkbox"/> GRANDPARENT BE <input type="checkbox"/> BABYSITTEE (baby) NM <input type="checkbox"/> NON-MARRIED LIVE IN GC <input type="checkbox"/> GRANDCHILD BG <input type="checkbox"/> BOY/GIRL FRIEND RU <input type="checkbox"/> RELATIONSHIP UNKNOWN IL <input type="checkbox"/> IN-LAW CF <input type="checkbox"/> CHILD OF "BG" ABOVE VO <input type="checkbox"/> VICTIM WAS OFFENDER SP <input type="checkbox"/> STEPPARENT HR <input type="checkbox"/> HOMOSEXUAL REL. ES <input type="checkbox"/> VICTIM WAS ESTRANGED SPOUSE XB <input type="checkbox"/> EX BOY/GIRL FRIEND				JUSTIFIABLE HOMICIDE (Check One) 20 <input type="checkbox"/> Criminal killed by citizen 21 <input type="checkbox"/> Criminal killed by police		LEOKA in line of duty. Type of Assignment (Mark one box) 12 <input type="checkbox"/> TWO-OFFICER VEHICLE 16 <input type="checkbox"/> DETECTIVE OR SPECIAL ASSIGNMENT ASSISTED 13 <input type="checkbox"/> ONE-OFFICER VEHICLE 14 <input type="checkbox"/> ONE-OFFICER VEHICLE ASSISTED 17 <input type="checkbox"/> OTHER ALONE 15 <input type="checkbox"/> DETECTIVE OR SPECIAL ASSIGNMENT ALONE 18 <input type="checkbox"/> OTHER ASSISTED										
					INJURY TYPE (Check all that apply) N <input checked="" type="checkbox"/> NONE M <input type="checkbox"/> MINOR INJURY B <input type="checkbox"/> BROKEN BONES O <input type="checkbox"/> MAJOR INJURY I <input type="checkbox"/> POSS. INTERNAL INJURY T <input type="checkbox"/> LOSS OF TEETH L <input type="checkbox"/> SEVERE LACERATION U <input type="checkbox"/> UNCONSCIOUSNESS		LEOKA in line of duty: Type of Activity (Mark one box.) K <input type="checkbox"/> RESPONDING TO "DISTURBANCE CALLS" L <input type="checkbox"/> BURGLARIES IN PROGRESS OR PURSUING BURGLARY SUSPECTS M <input type="checkbox"/> ROBBERIES IN PROGRESS OR PURSUING ROBBERY SUSPECTS N <input type="checkbox"/> ATTEMPTING OTHER ARRESTS D <input type="checkbox"/> CIVIL DISORDER P <input type="checkbox"/> HANDLING, TRANSPORTING, CUSTODY OF PRISONERS Q <input type="checkbox"/> INVESTIGATING SUSPICIOUS PERSONS OR CIRCUMSTANCES R <input type="checkbox"/> AMBUSH - NO WARNING S <input type="checkbox"/> MENTALLY DERANGED T <input type="checkbox"/> TRAFFIC PURSUITS AND STOPS U <input type="checkbox"/> ALL OTHER										
	OFFENDER/ARRESTEE																
	Class Code: # <u>1</u> NAME: Senn, Amy Leigh (RESTRICTED)				ADDRESS: (Street, City, State, Zip) 246 LEO SHREVEPORT, LA 71105												
	ALIASES:				HOME PHONE: (318) 779-0073		BUS. PHONE:		OFFENDER/ARRESTEE CONNECTED TO OFFENSE 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/>								
	AGE: 20		SEX: M <input type="checkbox"/> MALE F <input checked="" type="checkbox"/> FEMALE U <input type="checkbox"/> UNKNOWN		RACE: W <input checked="" type="checkbox"/> WHITE B <input type="checkbox"/> BLACK I <input type="checkbox"/> INDIAN A <input type="checkbox"/> ASIAN U <input type="checkbox"/> UNKNOWN		OFFENDER USED/MOTIVE A <input type="checkbox"/> ALCOHOL C <input type="checkbox"/> COMPUTER EQUIPMENT D <input type="checkbox"/> DRUGS/NARCOTICS G <input type="checkbox"/> GAMING ACTIVITY MOTIVE		HEIGHT: 5'04"		WEIGHT: 115		EYES: BRO		HAIR: BRO		ETHNICITY: H <input type="checkbox"/> HISPANIC N <input type="checkbox"/> NON-HISPANIC U <input type="checkbox"/> UNKNOWN
HATE/BIAS		ANTI-RACIAL BIAS		ANTI-RELIGIOUS BIAS		ANTI-ETHNICITY/		ANTI-SEXUAL		OTHER BIAS		DISABILITY BIAS					
MOTIVATED: (Check One) 11 <input type="checkbox"/> WHITE 12 <input type="checkbox"/> BLACK 13 <input type="checkbox"/> AMERICAN INDIAN OR ALASKAN NATIVE 14 <input type="checkbox"/> ASIAN/PACIFIC ISLANDER 15 <input type="checkbox"/> MULTI-RACIAL GROUP		21 <input type="checkbox"/> JEWISH 22 <input type="checkbox"/> CATHOLIC 23 <input type="checkbox"/> PROTESTANT 24 <input type="checkbox"/> ISLAMIC (MUSLIM)		25 <input type="checkbox"/> OTHER RELIGION 26 <input type="checkbox"/> MULTI-RELIGIOUS GROUP 27 <input type="checkbox"/> ATHEISM/AGNOSTICISM		32 <input type="checkbox"/> HISPANIC 33 <input type="checkbox"/> OTHER ETHNICITY/NATIONAL ORIGIN		41 <input type="checkbox"/> MALE HOMOSEXUAL (GAY) 42 <input type="checkbox"/> FEMALE HOMOSEXUAL (LESBIAN) 43 <input type="checkbox"/> HOMOSEXUAL (GAY & LESBIAN) 44 <input type="checkbox"/> HETEROSEXUAL 45 <input type="checkbox"/> BISEXUAL		70 <input type="checkbox"/> AGE 71 <input type="checkbox"/> ANCESTRY 72 <input type="checkbox"/> CREED 73 <input type="checkbox"/> GENDER 74 <input type="checkbox"/> ORGANIZATIONAL AFFILIATION		51 <input type="checkbox"/> ANTI-PHYSICAL DISABILITY 52 <input type="checkbox"/> ANTI-MENTAL DISABILITY 88 <input type="checkbox"/> NONE 99 <input type="checkbox"/> UNKNOWN					
IF ARRESTED, COMPLETE SHADED AREA										MULTIPLE CLEARANCE INDICATOR: M <input type="checkbox"/> MULTIPLE C <input type="checkbox"/> COUNT ARRESTEE N <input type="checkbox"/> NOT APPLICABLE							
ARRESTEE WAS ARMED WITH: (Check all that apply) (Enter "A" in box if automatic) 01 <input type="checkbox"/> UNARMED 14 <input type="checkbox"/> SHOTGUN 11 <input type="checkbox"/> FIREARM (type not stated) 15 <input type="checkbox"/> OTHER FIREARM 12 <input type="checkbox"/> HANDGUN 16 <input type="checkbox"/> LETHAL CUTTING INSTRUMENT (e.g. Switchblades, Knife, etc.) 13 <input type="checkbox"/> RIFLE 17 <input type="checkbox"/> CLUB/BLACK JACK/BRASS KNUCKLES				TYPE OF ARREST: O <input type="checkbox"/> ON-VIEW S <input type="checkbox"/> SUMMONED/CITED T <input type="checkbox"/> TAKEN INTO CUSTODY		DISPOSITION OF ARREST UNDER 17: D <input type="checkbox"/> HANDLED WITHIN DEPARTMENT J <input type="checkbox"/> REFERRED TO JUVENILE COURT OR PROBATION DEPARTMENT W <input type="checkbox"/> REFERRED TO WELFARE AGENCY P <input type="checkbox"/> REFERRED TO OTHER POLICE AGENCY A <input type="checkbox"/> REFERRED TO CRIMINAL OR ADULT COURT				LRS # 1: _____ 2: _____ 3: _____ 4: _____ 5: _____		Connected to Offense # 1: _____ 2: _____ 3: _____ 4: _____ 5: _____					
1. ARRESTED 3. SUSPECT 5. WITNESS 7. BUSINESS 9. INTERVIEWED 11. TREAT AND RELEASE 13. DECEASED 2. MISSING 4. WANTED 6. JUVENILE 8. OTHER VICTIM 10. HOSPITAL 12. MEDICAL ATTENTION REFUSED 14. SUMMONS																	
WITNESS																	
NAME (Last, First, Middle)		DOB		SEX		RACE		ALIAS		HOME ADDRESS (Street, City, State, Zip)				Home Phone		Bus. Phone	

COMPLAINANT'S NAME

Last	First	Middle
Hatfield, Eric		
Address		
10489 PLUM CREEK SHREVEPORT, LA 71106		
Type Incident		
Misdemeanor		

**Shreveport Police Department
NARRATIVE SUPPLEMENT**08/28/2008
Date of Occurrence05
District2008029920
Offense Number
08/28/2008 00:35
Time/Date of Supplement Report**NARRATIVE**

ON 8/28/08 AT 0035 HOURS. I, CPL. .B. PITTMAN #249, RESPONDED TO A DRUNK PERSON CALL AT 1955 BAYOU. S.P.D. DISPATCH ADVISED THE COMPLAINANT/VICTIM, ERIC HATFIELD HAD CALLED IN REFERENCE TO A W/F, AMY SENN, WAS INTOXICATED AND STANDING IN THE MIDDLE OF THE STREET AT THIS LOCATION. WHILE ENROUTE TO 1955 BAYOU, DISPATCH ADVISED THE W/F HAD LEFT THE SCENE HEADED TOWARD 246 LEO STREET.

OFC. S. MASON AND I FOUND THE VICTIM, ERIC HATFIELD, PARKED IN FRONT OF 246 LEO. MR. HATFIELD ADVISED HIS GIRLFRIEND/SUSPECT, AMY SENN, HAD SENT HIM A TEXT MESSAGE ADVISING HIM SHE WAS AT 1955 BAYOU AND WAS INTOXICATED. MR. HATFIELD ADVISED HE WENT TO 1955 LEO TO PICK UP MS. SENN UP FROM THE LOCATION. MR. HATFIELD ADVISED WHILE AT 1955 BAYOU, MS. SENN STARTED TO ARGUE WITH HIM. MR. HATFIELD ADVISED HE MS. SENN'S CELL PHONE AT THE TIME AND SHE BEGAN TO GRAB HIM HAND WITH THE CELL PHONE THEN SHE STARTED TO GRAB HIM CONSTABLES FIREARM ON HIS SIDE. MR. HATFIELD ADVISED HE WENT TO HIS BLACK CHEVY TAHOE. MR. HATFIELD ADVISED MS. SENN THEN STARTED BANGING HER FIRST ON HIS VEHICLE, WHILE HE WAS INSIDE THE VEHICLE CALLING POLICE.

MR. HATFIELD ADVISED MS. SENN'S MOTHER CAME TO THE SCENE AT 1955 BAYOU AND TOOK MS. SENN TO 246 LEO. MR. HATFIELD HAD NO VISIBLE MARKS OR INJURY TO HIS PERSON.

MS. AMY SENN WAS CONTACTED AT 246 LEO STREET. MS. SENN WAS READ HER MIRANDA WARNINGS PRIOR TO ANY STATEMENT SHE MADE CONCERNING THIS INVESTIGATION. MS. SENN ADVISED SHE HAD SENT MR. HATFIELD A TEXT MESSAGE ADVISING HIM SHE WAS AT 1955 BAYOU. MS. SENN ADVISED SHE HAD CONSUMED A FEW BEERS BETWEEN 1700 HOURS AND 1930 HOURS. MS. SENN ADVISED MR. HATFIELD CAME TO PICK HER UP FROM THE LOCATION. MS. SENN ADVISED MR. HATFIELD GRABBED HER CELL PHONE FROM HER AND PUSHED HER AS HE TOOK THE CELL PHONE. MS. SENN DENIED LAYING HANDS ON MR. HATFIELD AND BANGING HER FIST ON HIS VEHICLE IN THE ROADWAY. MS. SENN ALSO DENIED ATTEMPTING TO GRAB MR. HATFIELD'S FIREARM, SHE ADVISED MR. HATFIELD DID NOT HAVE HIS FIREARM ON HIM AT THE TIME OF THE INCIDENT.

MR. HATFIELD IS A CONSTABLE IN CADD0 PARISH. MR. HATFIELD DID WISH TO PURSUE SIMPLE BATTERY CHARGES AGAINST MS. AMY SENN. MS. SENN WAS ISSUED A MISDEMEANOR SUMMONS (M08-30594) FOR SIMPLE BATTERY. THERE WAS NO WITNESS TO THE OFFENSE TO BE INTERVIEWED. NO MEDICAL ATTENTION WAS REQUESTED BY MR. HATFIELD OR MS. SENN. MVS WAS ACTIVE ON THEIR CALL.

[illegible]

COMPLAINANT'S NAME

Last Hatfield, Eric	First	Middle
Address 10489 PLUM CREEK SHREVEPORT, LA 71106		
Type Incident Misdemeanor		

Shreveport Police Department

PROPERTY/VEHICLE SUPPLEMENT

08/28/2008
Date of Occurrence

05
District

08195453

Offense Number

08/28/2008 00:35
Time/Date of Supplement Report

TYPE PROP LOSS CODE	BRAND	PROPERTY DESCRIPTION	MODEL	QTY.	LIC #	SERIAL NO./VIN	COLOR	SIZE	VALUE
1	CHEV	BLK CHEV TAHOE	TAHOE	1.00	NKD035		BLK		\$30,000.00

TYPE PROPERTY LOSS/ETC.
(enter number in code column above)

1 NONE
2 BURNED
3 COUNTERFEIT/FORGED

4 DAMAGED/DESTROYED
5 RECOVERED
6 SEIZED

7 STOLEN
8 UNKNOWN
9 UNAUTHORIZED USE
10 USED IN CRIME

OFFICER'S NAME Pittman, L B BADGE # 249 DATE 08/28/2008 SUPERVISOR Thompson, T D BADGE # 424