**CERTIFIED TRANSLATION**

**\*\*\*\* BEGINNING OF DOCUMENT \*\*\*\***

[Emblem]

National Civil Police

 Police Report

**1- COMPLAINT INFO:**

Report number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Ref ­­­­­

Date XX/XXXX/XXXX Day Tuesday Time 19:00hours

**2-COMPLAINANT GENERAL INFO:**

Name: XXXX XXXX XXXX XXXX Age: XX

Document of Identification (DUI): XXXXXXXX-X ­­­­

Place of origin: San Juan Opico II. Date of birth: XX/XX/XXXX

Marital status: Single . Profession: Home maker

Resident of: XXXXXXXXX\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: XXXXXXXX Place of work: Export Factory

 Phone Number: - - -

**3-VICTIM(S) INFO:**

Name: XXXX XXXX XXXX XXXX . Age:XX

Document of Identification (DUI): ­­­­

Place of origin: City of Sra La Libertad Date of birth: XX/XX/XXXX

Marital status: Profession:

Resident of: XXXXXXXX

Phone Number: Place of work: Phone Number:

**4-INCIDENT INFO**

05. Crime: Disappeared Person

Place: Left the home, whereabouts unknown Sector: Date: XX/XXXX/XXXX . Time: 16:00 hrs.

XXXXX, Colonia San Miguel Municipality: Dept. San Salvador

Date: August XX, XXXX Time: 12:30 with

Means Used: Fire arm Yes / No

Knife Yes / No

Vehicle Yes / No

Other Means Yes / No

**5-GENERAL INFO OF THE PRESUMED PERPETRATOR(S)**

Name:

Alias: Type:

Identification:

Address:

Address Job or School: Phone Number:

Occupation / Class: License:

[Handwritten] Note: Photograph has not been delivered

Relationship to Victim: Athletic Description:

Date of birth: Age:

Gender: Skin Color: Weight:

Glasses: Hair Color: Eyes:

Special Marks:

**6-WITNESSES**

Name: Age:

Phone Number Resident of:

**7-STATEMENT OF THE FACTS**

The undersigned chief of the sub delegation of the city of Arce, Jurisdiction of the National Civil Police of Lourdes Colon, by way of the present certifies that: the present photocopy of the complaint conforms to the original which was requested by Andrea Alejandra Portillo Vega to be presented before the United States Immigration Court of Los Angeles The city of Arce Department of [Illegible] extends the present on the 23rd day of the month October of the year 2018

[Signature]

Signature

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| F.  |  [signature]  | [Seal] [Signature] | F.  |  [signature]  |
| Name: | Mirian Guadalupe Portillo | [Illegible] Aguilar Vasquez |
|  | Complainant |  | Investigator |
|  |  |  |  |
|  |  |

**\*\*\*\*\*END OF DOCUMENT\*\*\*\*\***

**CERTIFIED TRANSLATION**

**Certificate of Translation:**

I, Albertina Bocanegra, certify that I am fluent in Spanish and English, that I am competent to translate the foregoing document, and that the translation is correct and complete to the best of my abilities.

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| Signature | Date |

Name:

Address:

Telephone: