

# Olympia Police Department Incident Report

Case Number  
**2013-01434**

Type of Report <b>Arrest</b>		Responding To	Event	Officer Assigned <b>Seig, Kimberly #2800</b>	Date <b>02/28/2013</b>
Incident Classification 1 <b>VANDALISM NOW</b>		Offense Code <b>1702 C</b>	Offense Code	Offense Code	Offense Code
Address/Location of Incident <b>220 Legion WY, Olympia, WA 98501</b>					
Premise Type/Name <b>Specialty Shop</b>		Code <b>50</b>	# of Units	# of Offenses <b>1</b>	# of Offenders <b>1</b>
# of Victims <b>1</b>		Occurred on or From (Date/Time/DOW) <b>02/28/2013 08:40 Thu</b>		Occurred To (Date/Time/DOW) <b>02/28/2013 08:40 Thu</b>	
Reported tOn (Date/Time/DOW) <b>02/28/2013 08:40 Thu</b>		Status <b>2</b>		Date <b>02/28/2013</b>	
Charge # <b>1</b>	<input checked="" type="checkbox"/> Local <input type="checkbox"/> State	Statute <b>9.40.090</b>	Description <b>Property Damage</b>		Counts <b>1</b>

Person(s)/Business(es)										
No. <b>B-1</b>	Non-Disc. <input type="checkbox"/>	Name (Last, First, Middle) <b>Seldons Furniture</b>			Race	Ethnicity	Sex	DOB/Age	Height	Weight
Street Address <b>220 Legion WY, Olympia, WA 98501</b>		Residential Status	Home Phone		Work Phone					

Known Suspect(s)/Subject(s)											
No. <b>A-1</b>	Name (Last, First, Middle) <b>Werner, Lucas Colby</b>			Race <b>W</b>	Ethnicity	Sex <b>M</b>	DOB/Age <b>11/27/1979</b>	Height <b>6'00"</b>	Weight <b>290</b>	Hair <b>BRO</b>	Eyes <b>BLK</b>
Street Address <b>514 Courtside STSW #B305, Olympia, WA 98502</b>		Residential Status <b>Unkn</b>	Home Phone		Work Phone						

Vehicle License	Make	Model	Color <b>bl/VehColor</b>	Other Description			
Booking Number	Booked Where	Location of Arrest <b>220 Legion WY, Olympia, WA 98501</b>			Arrestee Armed With		
Arrest Date <b>02/28/2013</b>	Arrest Time <b>08:40</b>	On View <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Cited / Released <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Statement <input type="checkbox"/> Oral <input type="checkbox"/> Written		Charges <input type="checkbox"/> Admitted <input type="checkbox"/> Denied	Multi-Clear <b>N/A</b>
Name of Person Notified		DOB	Relation	Date & Time Notified	Notified By		Disp. of Juvenile
Arrest Result of <b>On View</b>		Miranda By	Date/Time		Booking Authorized By		

General Property							
No. <b>1</b>	Subject # <b>B-1</b>	Subject Name <b>Seldons Furniture</b>				Evidence Location	
Property Code <b>07</b>	Property Type	Property Class	Quantity <b>1</b>	Description <b>Cement pillar</b>			
Make	Model	Serial Number	OAN	Value <b>\$ 25.00</b>			

General Property							
No. <b>2</b>	Subject #	Subject Name				Evidence Location	
Property Code <b>03</b>	Property Type	Property Class	Quantity <b>1</b>	Description <b>Photo CD</b>			
Make	Model	Serial Number	OAN	Value			

### Narrative

On 2/27/13 I was driving in my marked patrol vehicle. As I drove past Seldon's Furniture I noticed a white male writing on the building with a writing pen. I stopped my vehicle and approached the suspect. The suspect did not notice me approaching and continued writing.

Status							
Officer Name/Number <b>(Seig, Kimberly) #2800</b>			Unit <b>2B57</b>	Approved By Number <i>Paul Seig</i> <b>631</b>		Date <b>3/1/13</b>	
Clearance <input type="checkbox"/> Arr/A <input type="checkbox"/> Arr/J	<input type="checkbox"/> Unfounded <input type="checkbox"/> Exc/A <input type="checkbox"/> Exc/J	Distribution <b>PA</b>		Logged <b>/</b>		Date <b>/</b>	
<input type="checkbox"/> Entered RMS Date Initials		<input type="checkbox"/> Entered WAC/NCIC Date Initials		<input type="checkbox"/> Cleared WAC/NCIC Date Initials			

# Olympia Police Department Incident Report

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Incident Classification 1

**VANDALISM NOW**

Case Number

**2013-01434**

I stopped the suspect from writing and noticed two blue ball point pens in his hands. The suspect identified himself as Lucas Werner.

I issued Lucas a criminal citation for Damage Property, he was released on his own signature pending his court appearance.

## RECOMMENDED ACTION

Forward to the PA.

### Attachments

Signature Form

Statement Form

Impound Notice

Authorization to Impound

Medical Release

Consent Form

Other

Officer Name/Number

**(Seig, Kimberly) #2800**

Unit

**2B57**

Approved By Number

Date

**INCIDENT REPORT**

**CRIMINAL**

TRAFFIC  NON-TRAFFIC LEA ORI#: **WA0340100** COURT ORI #: **WA034011J** CITATION #: **3Z0205435** REPORT #: **13-1434**

IN THE  DISTRICT  MUNICIPAL COURT OF **OLYMPIA WA**  
 STATE OF WASHINGTON  COUNTY OF  CITY/TOWN OF **OLYMPIA**, PLAINTIFF VS. NAMED DEFENDANT

**THE UNDERSIGNED CERTIFIES AND SAYS THAT IN THE STATE OF WASHINGTON**

DRIVER'S LICENSE NO. (ID ONLY) **WERNELC218Q7** STATE **WA** EXPIRES **11-27-14** PHOTO I.D. MATCHED  YES  NO NAME: LAST **WERNER** FIRST **LUCAS** MIDDLE **COLBY** SFX  CDL  YES  NO  
 ADDRESS **514 COURTSIDE ST SW APT B305**  IF NEW ADDRESS CITY **OLYMPIA** STATE **WA** ZIP CODE **98502**

EMPLOYER  EMPLOYER LOCATION   
 DATE OF BIRTH **11-27-79** RACE **W** SEX **M** HEIGHT **6'00"** WEIGHT **290** EYES **BLU** HAIR **BRO** RESIDENTIAL PHONE NO.  CELL/PAGER PHONE NO.  WORK PHONE NO.   
 VIOLATION DATE ON OR ABOUT **2/28/2013 8:41** INTERPRETER NEEDED  AT LOCATION **220 LEGION WAY** M.P. BLOCK #  CITY/COUNTY OF **OLYMPIA/THURSTON**

**DID OPERATE THE FOLLOWING VEHICLE/MOTOR VEHICLE ON A PUBLIC HIGHWAY AND**

VEH LIC NO  STATE  EXPIRES  VEH YR  MAKE  MODEL  STYLE  COLOR   
 TR #1 LIC NO  STATE  EXPIRES  TR YR  TR #2 LIC NO  STATE  EXPIRES  TR YR   
 OWNER/COMPANY IF OTHER THAN DRIVER   
 ADDRESS  CITY  STATE  ZIP CODE   
 ACCIDENT  BAC  COMMERCIAL VEHICLE  YES  NO  16+ PASS  YES  NO  HAZMAT  YES  NO  EXEMPT VEHICLE  FARM R.V.  FIRE OTHER

**DID THEN AND THERE COMMIT EACH OF THE FOLLOWING OFFENSES**

- 1. VIOLATION/STATUTE CODE **OMC 9.40.090**  DV **PROPERTY DAMAGE**
- 2. VIOLATION/STATUTE CODE  DV
- 3. VIOLATION/STATUTE CODE  DV
- 4. VIOLATION/STATUTE CODE  DV
- 5. VIOLATION/STATUTE CODE  DV

MANDATORY COURT APPEARANCE APPEARANCE DATE **03-13-13** TIME **9:00 AM** RELATED #  DATE ISSUED **02-28-13**

- TICKET SERVED ON VIOLATOR  TICKET REFERRED TO PROSECUTOR
- TICKET SENT TO COURT FOR MAILING  BOOKED

I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT I HAVE ISSUED THIS ON THE DATE AND AT THE LOCATION ABOVE, THAT I HAVE PROBABLE CAUSE TO BELIEVE THE ABOVE NAMED PERSON COMMITTED THE ABOVE OFFENSE(S), AND I AM ENTERING MY AUTHORIZED USER ID AND PASSWORD TO AUTHENTICATE IT.  
 OFFICER **K SEIG** # **2800**  
 OFFICER #

COMPLAINT/ CITATION ABSTRACT OF JUDGMENT	CHG #	RESPONSE	CHG	DISPOSITION	FINES	SUSPENDED	SUB-TOTAL	FINDING/JUDGMENT DATE	TO SERVE _____ DAYS W _____ DAYS SUSP
	1	G NG		G NG D	\$	\$	\$		
	2	G NG		G NG D	\$	\$	\$	ABSTRACT MLD TO OLYMPIA	CREDIT/TIME SVD. Y / N
	3	G NG		G NG D	\$	\$	\$		LIC SURR DT _____
	4	G NG		G NG D	\$	\$	\$	TOTAL COSTS	REC. NONEXTENSION OF
	5	G NG		G NG D	\$	\$	\$	\$	SUSP. Y / N

CITATION # 3Z0205435 OPD CN

WERNER, LUCAS C 112779



On 2/27/13 while on patrol, in a marked patrol vehicle, I witnessed the defendant writing on a building pillar with a writing pen. I stopped my patrol vehicle and walked toward the defendant as I witnessed him continue to write, not noticing my approach. As I contacted him he stated he was upset over the "homeless situation" and that why he was writing on the building. The defendant stated he chose a writing pen because he thought it would be easier for business owners to clean it up.

I issued the defendant a criminal citation after confirming his ID. The defendant was released pending his court date.

\*\*\*\*\*

Officer's Report for Citation/Notice of Infraction # 3Z0205435.  
The information contained in and attached to this citation/notice of infraction is incorporated by reference into this report.

I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT ALL STATEMENTS MADE HEREIN ARE TRUE AND ACCURATE AND THAT I AM ENTERING MY AUTHORIZED USER ID AND PASSWORD TO AUTHENTICATE IT.

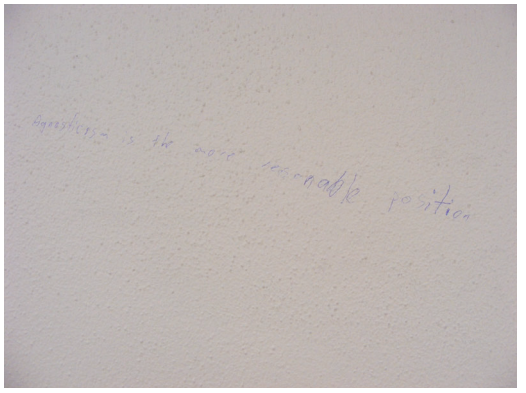
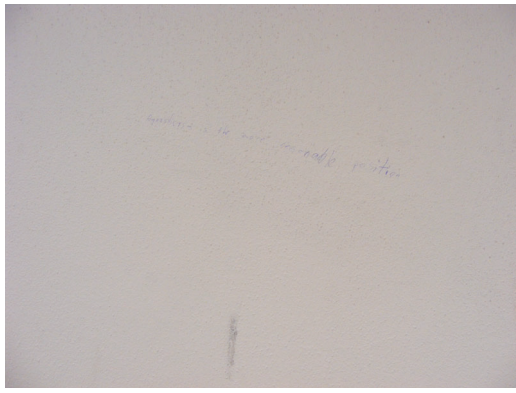
Signature: K SEIG #: 2800

Date and Place: 2/28/2013 City/Town of Olympia, County of THURSTON

...NARRATIVE CONTINUES ON NEXT PAGE...

TRAFFIC		WEATHER		STREET		LIGHT	
WITNESS NAME (LAST, FIRST, M.I.)		PHONE		WITNESS NAME (LAST, FIRST, M.I.)		PHONE	
ADDRESS	CITY	STATE	ZIP	ADDRESS	CITY	STATE	ZIP
WITNESS NAME (LAST, FIRST, M.I.)		PHONE		WITNESS NAME (LAST, FIRST, M.I.)		PHONE	
ADDRESS	CITY	STATE	ZIP	ADDRESS	CITY	STATE	ZIP
WITNESS NAME (LAST, FIRST, M.I.)		PHONE		WITNESS NAME (LAST, FIRST, M.I.)		PHONE	
ADDRESS	CITY	STATE	ZIP	ADDRESS	CITY	STATE	ZIP
WITNESS NAME (LAST, FIRST, M.I.)		PHONE		WITNESS NAME (LAST, FIRST, M.I.)		PHONE	
ADDRESS	CITY	STATE	ZIP	ADDRESS	CITY	STATE	ZIP

\*\*\*\*\*



IN THE OLYMPIA MUNICIPAL COURT

CITY OF OLYMPIA,

Plaintiff,

LUCAS C. WERNER  
514 Courtside St SW Apt B305  
Olympia Wa 98502

Defendant.

Cause No. 3Z0205435

OPD No. 13-1434

Officer : Seig

AMENDED COMPLAINT

SEX: M	RACE: U	DOB: 11/27/79	DOL:
HT: 6'	WT: 290	EYES: BLU	SSN:

FINDING G NG D BF	DATE:	JAIL TIME:	DAYS SUSP:	CTS:	FINE:	COSTS:
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OMC9.40.095/GRAFFITI

I, Rocio D. Guerra, Assistant City Prosecutor for the City of Olympia, in the name and by the authority of the City of Olympia, State of Washington, do accuse Lucas C. Werner of the crime of Graffiti, as follows:

That Lucas C. Werner, in the City of Olympia, on or about **February 28, 2013**, did intentionally, without prior consent of the owner or owner's agent, write, paint, or draw any inscription, figure, or mark of any type on any public or private building or other structure or any real or personal property owned by any other person, in violation of OMC 9.40.095, a gross misdemeanor, and against the peace and dignity of the City of Olympia.

I, Rocio D. Guerra, Assistant City Prosecutor, certify/declare under penalty of perjury under the laws of the City of Olympia, State of Washington, that I have reasonable grounds to believe, and do believe, the above-named person committed the above offense(s) contrary to law.

DATED this 8th day of March, 2013

  
Rocio D. Guerra WSBA #34082  
Assistant City Prosecutor

AMENDED COMPLAINT

IN THE OLYMPIA MUNICIPAL COURT

**FILED**

MAR 11 2013

City of Olympia  
Municipal Court

CITY OF OLYMPIA,

Plaintiff,

LUCAS C. WERNER  
514 Courtside St SW Apt B305  
Olympia Wa 98502

Defendant.

Cause No. 3Z0205435

OPD No. 13-1434

Officer : Seig

AMENDED COMPLAINT

SEX: M	RACE: U	DOB: 11/27/79	DOL:
HT: 6'	WT: 290	EYES: BLU	SSN:

FINDING	DATE:	JAIL TIME:	DAYS SUSP:	CTS:	FINE:	COSTS:
G NG D BF	4-15-13	304	359		200	283 = 483

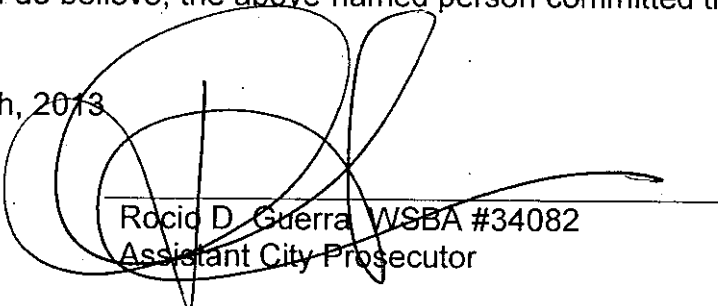
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DATED this 8th day of March, 2013

  
Rocio D. Guerra WSBA #34082  
Assistant City Prosecutor

AMENDED COMPLAINT

**OLYMPIA MUNICIPAL COURT**  
**PRE-TRIAL ORDER/JUDGMENT AND SENTENCE**

909 8TH AVE SE • Olympia, WA 98501 • (360) 753-8312  
 PO BOX 1967 • Olympia, WA 98507

Public Defender Appointed

OPD NUMBER: 1. 13-1434  
 2. 1210236  
 3. \_\_\_\_\_  
 4. \_\_\_\_\_

DEFENDANT Werner, Lucas Colby DOB: 11-27-1979

CASE NO.	CHARGE(S)	PLEA/ DISPO	JAIL TIME IMPOSED	JAIL TIME SUSPENDED	CREDIT FOR TIME SERVED	TOTAL JAIL TIME	PAY OR SERVE	BAIL AMOUNT
<del>132205435</del>	<del>Property Damage</del>						\$	\$
<del>132208800</del>	<del>Via Prob Order</del>						\$	\$
317705435	GLITCH	G	384	389		5	\$	\$
4.							\$	\$

Jail Time  Concurrent with  Olympia Municipal Court matters /  Other Court's matters  
 Consecutive to:  Olympia Municipal Court matters /  Other Court's matters

JAIL TIME TOTAL ALL CASES 5

Jail time to begin on or before 05, 17, 13  
 Month Day Year

Cash or Bond  Cash Only  Bail Forfeited  
 Bail Exonerated  Bail applied to fines/costs

**ORDER OF COMMITMENT / RELEASE / BAIL**

Defendant released on own recognizance.  
 Jail time may be served on:  Options Program  EHM  
 Work Crew  Alternative DUI Program

Review for  Options  Treatment  
 40 hours of community service in lieu of 1 day of jail due to jail overcrowding

Furlough \_\_\_\_\_  
 Refer to MIO Coordinator \_\_\_\_\_  
 Release after evaluation by C.D.M.H.P. per RCW 71.05  
 Evidence seized to be forfeited & destroyed  
 Other \_\_\_\_\_

**SENTENCE/DISPOSITION/FINDINGS**

Sentence is effective for  
 6 months  2 years  
 1 year  5 years (DUI's only)

Sentence is DEFERRED/CONTINUED for \_\_\_\_\_ month(s).  
 Compliance with conditions will result in  dismissal  reduction to \_\_\_\_\_  
 Close case upon completion of:  Jail  Payment of fine

**FINE**

	<input checked="" type="checkbox"/> FINE <input type="checkbox"/> COURT COSTS	PROBATION COSTS	RESTITUTION DUE	BREATH TEST FEE	DV FEE	CONVICTION FEE	CAC FEE	TOTAL DUE
1		<del>200</del>		<input type="checkbox"/> \$125	<input type="checkbox"/> \$100	<input type="checkbox"/> \$43	<input type="checkbox"/> \$150	
2				<input type="checkbox"/> \$125	<input type="checkbox"/> \$100	<input type="checkbox"/> \$43	<input type="checkbox"/> \$150	
3	<u>200</u>	<u>240</u>		<input type="checkbox"/> \$125	<input type="checkbox"/> \$100	<input checked="" type="checkbox"/> \$43	<input type="checkbox"/> \$150	<u>485</u>
4				<input type="checkbox"/> \$125	<input type="checkbox"/> \$100	<input type="checkbox"/> \$43	<input type="checkbox"/> \$150	

Total fine to be paid immediately unless otherwise indicated \_\_\_\_\_ Payment plan is available at clerk's office.

Restitution victim \_\_\_\_\_  Restitution reserved.

**CONDITIONS OF SENTENCE / PRE-TRIAL RELEASE \*COMPLY WITH ALL PRIOR ORDERS, UNLESS OTHERWISE INDICATED.**

**THINGS YOU MUST DO:**

Intensive Supervision as directed  Attend \_\_\_\_\_ AA/NA (or equivalent self-help group) meetings  
 Active Probation  Bench Probation  per week  w/in 90 days  
 You must report to Probation:  Be on monitored Antabuse w/in 72 hours  
 Within \_\_\_\_\_ court day after release from jail.  Of release from custody  Of the date of this order  
 On \_\_\_\_\_ DATE  Install club on any vehicle registered to defendant until properly licensed  
 Submit to breath test/UA  Other \_\_\_\_\_

**THINGS YOU MAY NOT DO:**

Commit a criminal law/criminal traffic violation  Enter any bar or tavern  Possess a firearm or dangerous weapon  
 Consume or possess alcohol, non-prescribed drugs, or any over-the-counter product containing alcohol or any drug screened for by UA  Drive with BAC of .08 or higher  Have contact with: \_\_\_\_\_  
 Refuse to take BAC when directed  Drive without valid license/liability insurance  
 Operate a motor vehicle without ignition interlock device  
 Pretrial  Per State Law

**YOU MUST SHOW PROBATION WRITTEN PROOF OF THE FOLLOWING WITHIN 45 DAYS OR AS DIRECTED;**

Chemical Dependency Assessment/Treatment  Domestic Violence Treatment  Other: \_\_\_\_\_  
 Attend DUI Victim Panel  Anger Management Referral/Treatment \_\_\_\_\_  
 Complete Alcohol/Drug Information School  Mental Health Referral/Counseling \_\_\_\_\_  
 Comply with all conditions of 10.05 DP  Traffic Safety Class \_\_\_\_\_

\*NEXT HEARING DATE: You must return to court on \_\_\_\_\_ at \_\_\_\_\_ a.m./p.m.  
 \_\_\_\_\_ at \_\_\_\_\_ a.m./p.m.

**MANDATORY APPEARANCE**

Pre-Trial/Motion/Trial/Competency/Sentencing/Review/Pre-FTC/Restitution/Fact Finding/Contested/Mitigation (circle one)

I understand that: (1) I promise to appear at all court hearings at which my presence is required; (2) I will notify the court and probation of any change of address in writing; (3) if I fail to appear or comply with this order, I will be in violation of my sentence, a bench warrant may be issued for my arrest, additional costs and/or jail time may be imposed, and my bail may be forfeited.

Defendant X \_\_\_\_\_ Date 04/15/13  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_ Judge \_\_\_\_\_  
 Phone # \_\_\_\_\_