

Full In

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**3 Personal Information**

Age: 37 Date of Birth: [REDACTED]

Sex: MALE

Ethnicity: AFRICAN AMERICAN

Occupation: ACCOUNT EXECUTIVE

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**4 Telephone Numbers:**

Home: [REDACTED]

Work: ( )

6 Type of Place STREET, CAR, HOSPITAL | 7 District J

9 Incident Report or Citation No [REDACTED]

(If "Yes", attach separate sheet of paper.)  
 This matter? Yes ☒ No ☒ 4/11-9  
 (Drug) Alcohol Related? Yes ☒ No ☐  
 er: SFPD  
 Medical Release Signed? Yes ☒ No ☐

[illegible]

SFDPA - 184-04 - 000001





Police Commission for the City and County of San Francisco  
**OFFICE OF CITIZEN COMPLAINTS**



~CITIZEN COMPLAINT FORM~

**INSTRUCTIONS FOR COMPLETION OF THE CITIZEN COMPLAINT FORM:**

Please answer questions in blocks 2, 3, 4, 5, 8, 11, 15, 17, 20, 21 & 22. Leave all other blocks blank unless you know the information requested. Please **print** all information in **English**. If you do not have a telephone number, enter a message number or the number of a neighbor, friend or relative in block 4. If witnesses are available, write their names, addresses and telephone numbers on a separate sheet of paper and attach it to your complaint. Do not write them on the complaint form. If you do not know the officers name or badge number, include a complete physical description in the narrative (22). **Print** your narrative. Explain what happened from beginning to end. Be specific as to the nature of your complaint against each officer. Include who, what, where, when and why. If you need additional space, use separate sheets of paper and attach them to the complaint. **YOUR STATEMENT MUST BE A TRUE AND ACCURATE ACCOUNT OF THE INCIDENT** to the best of your knowledge and belief, and must be signed by you in block 22. If you have questions or need help, please call the OCC at (415) 597-7711 between 8:00 a.m. and 5:00 p.m., or leave a message with our answering service after 5:00 p.m. You may also contact your local neighborhood center for help. Interpreters can be provided at no charge.

**填寫公民投訴書說明：**

請回答第 2, 3, 4, 5, 8, 11, 15, 17, 20, 21 及 22 項問題。除非您知道我們所要求的資料，否則請將其他各項留空。所有資料，務請以正楷填寫清楚。如果您沒有電話號碼，請在第 4 項填上有可聯絡您的電話號碼，或鄰居、親戚、朋友的號碼。如果有證人，請用另一張紙寫上他們的姓名，地址及電話，和投訴書夾在一起；切勿寫在投訴書上。如果你不知道涉及事件的警務人員姓名或編號，請將該員的身體特徵，以正楷詳盡寫在第 22 項上。請清楚說明事件的過程，及投訴的類別，包括涉及何人、何事、何處、何時及何由。如您認為投訴書不夠您填寫，可以另紙填寫資料，夾在投訴書上。您應根據您所知道及所相信的事實填寫資料，**必須真實及正確**；填妥請在第 22 頁簽名。如有疑問或需要幫助，請在上午八時至下午五時，致電 (415) 597-7711「公民投訴組」，或在下午五時後，在該組的電話錄音機上留言。您亦可以與有免費翻譯員服務的「華埠建民中心」求助，電話 415-391-5099。

**INSTRUCCIONES PARA LLENAR EL FORMULARIO DE QUEJAS DE LOS CIUDADANOS:** Por favor conteste las preguntas de las casillas 2, 3, 4, 5, 8, 11, 15, 17, 20, 21 & 22. Deje sin contestar las demas preguntas a menos que sepa la información solicitada. El formulario debe ser contestado en **Ingles**. Si usted no tiene telefono escriba en la casilla 4 el número de un servicio de mensajes, o el de un vecino, amigo o pariente. Escriba en una hoja separada los nombres, direcciones y telefonos de los testigos (si los hay), y adjunte ésta información al formulario. En caso de que no conozca el nombre o número de insignia de los oficiales, incluya una descripción fisica completa (22). Describa los hechos en forma completa, sea especifico. Incluya quien, que, donde, cuando y porque. Su declaración debe ser un recuento exacto y verdadero del incidente y debe estar firmada por usted (22). Para pedir información o solicitar ayuda visite nuestras oficinas locales o llamenos al numero (415) 597-7711 de 8:00 AM - 5:00 PM. El servicio de interpretacion es gratis. Formularios tambien pueden ser obtenidos en La Raza Information Center-- (415) 863-0764.

**PARAAN NG PAGSAGOT SA PORMANG ITO (CITIZEN COMPLAINT o REKLAMO NG MAMAMAYAN)**

Mangyaring sagutin ang mga tanong sa blokeng 2, 3, 4, 5, 8, 11, 15, 17, 20, 21, at 22. Kung wala kayo ng impormasyon hinihingi dito, paki-iwanan blanko ang blokeng hindi masagot. **Paki-Ilmbag ang lahat na sagot ninyo.** Kung wala kayong telepono, paki-sulat lang ang inyong "message number", o ang numero ng inyong kapit-bahay, kaibigan, o kamaganak. Kung mayroon kayong mga saksi o testigo, isulat sa ibang papel ang kanilang mga pangalan, mga tirahan, at mga telepono at ikabit ito sa reklamo ninyo. Huwag gagamitin ang pormang ito. Kung hindi ninyo alam ang pangalan ng pulis o ang numero ng kanyang tsapa, isama sa inyong salaysay ang hitsura at pagmumukha ng pulis. Ilmbag ang inyong salaysay. Liwanagin lahat ang nangyari magmula sa umpisa hanggang sa katapusan. Tiyakin o siguraduhin ang inyong sinusumbong o renireklamo. Sabihin o ilarawan kung sino, ano, saan, kailan at bakit sa pangyayari. Kung kulang ang pagsusulatan dito gumamit ng ibang papel at ikabit ito sa sumbong ninyo. Sa inyong kaalaman at paniniwala, ang inilahad ninyong nangyari ay dapat lubos na katotohanan at walang kamali-mali at kailangan ninyong pirmahan ang sumbong ito sa blokeng bilang 22. Itanong sa amin kung alinman dito ang hindi maliwanag sa inyo. Kung kailangan ninyo ng tulong, paki-tawagan kami, OCC, telepono (415) 597-7711. Maaring tawagan din ninyo ang Philippines American Consul sa telepono (415) 626-0773 sa pagitan ng alas--otso ng umaga at alas--singko ng hapon o mag-iwan ng pahatid o "message" sa aming "answering service" paglampas dng alas--singko ng hapon.



22

## NARRATIVE OF INCIDENT: FEB 20, 2004 UPON LEAVING THE CORNER OF OFARRELL, I WAS

APPROACHED BY S.F.P.D NARC ASK ME CAN HE SCORE FIFTY DOLLARS OF CRACK, I SUGGESTED HE GIVE ME THE MONEY; HE SAID NO. I KEPT WALKING DOWN JONES TOWARDS ELLIS, AND SO DID HE. AS I CROSSED ELLIS AN UNKNOWN MAN ASKED THE NARC WHAT HE WANTED AND DEMAND THE MONEY, THE NARC DARTED TO OPPOSITE SIDE OF JONES. I OBSERVE THE UNKNOWN <sup>MAN</sup> FOLLOW THE NARC ACROSS JONES, THE UNKNOWN MAN SPoke TO ANOTHER INDIVIDUAL. THE NARC AND UNKNOWN MAN WALKED BACK TOWARDS ME AND MADE TRANSACTION. POLICE OFF. KASPER #68 JUMPED OUT UNMARKED CAR AND LUNGED AT ME, I FLED DOWN ELLIS ST TOWARD LEAVENWORTH. I FELL/SUP ON MY BEHIND/BOTTOM, OFF. KASPER #68 FINALLY CAUGHT UP, TACKLED ME PUT HIS LEFT HAND AROUND MY THROAT AND SAID WHILE PUNCHING ME IN THE EYE WITH SHINY OBJECT [REDACTED] I WAS PUT IN POLICE CAR [REDACTED] PUMMELED ME IN THE RIBS WITH FIST ON THE WAY TO POLICE STATION. PARAMEDICS CAME TOOK BLOOD PRESSURE AND SAID I SHOULD BE TAKEN TO GEN. HOSP. - [REDACTED]

[REDACTED] TOOK ME TO 850 BRYANT, THE MEDICAL PERSON SAID WE CAN RECEIVE HIM BECAUSE PARAMEDICS SIGN FORM STATING MUST GO TO GEN. HOSP., ALL THREE OFFICERS WERE IRRATE AT ME IN CAR TALKING ABOUT SHOOTING ME IN THE HEAD THROWING ME OFF A BRIDGE. WHILE IN HOSPITAL ALL THREE OFFICERS, [REDACTED] INSULTED ME VERBALLY AS WELL AS TELLING UNKNOWN MEDICAL STAFF I AM A RAPIST TO DEMEAN AND HUMILIATE ME. WHILE FEELING DIZZY ON SEVERAL OCCASIONS I WAS DRAGGED AND TOLD TO STOP FAKING BY [REDACTED] UPON LEAVING HOSPITAL [REDACTED] PUSHED MY HEAD UNTO ROOF AS I TRIED TO ENTER VEHICLE. ON NUMEROUS TIMES I HEARD ALL OFFICERS AGREE TO WHAT THE OTHERS ~~WANT TO REPORT~~ WOULD PUT IN REPORT.

(OVER FOR ALLEGATIONS)

(State law passed in 1995 mandates that the following statement be provided to, read and signed by persons filing complaints. The OCC encourages the filing of a complaint by anyone who believes he or she is a victim or a witness of improper police conduct or policies.)

## ACKNOWLEDGEMENT OF COMPLAINANT (148.6 P.C.)

YOU HAVE THE RIGHT TO MAKE A COMPLAINT AGAINST A POLICE OFFICER FOR ANY IMPROPER POLICE CONDUCT. CALIFORNIA LAW REQUIRES THIS AGENCY TO HAVE A PROCEDURE TO INVESTIGATE CITIZENS' COMPLAINTS. YOU HAVE A RIGHT TO A WRITTEN DESCRIPTION OF THIS PROCEDURE. THIS AGENCY MAY FIND AFTER INVESTIGATION THAT THERE IS NOT ENOUGH EVIDENCE TO WARRANT ACTION ON YOUR COMPLAINT; EVEN IF THAT IS THE CASE, YOU HAVE THE RIGHT TO MAKE THE COMPLAINT AND HAVE IT INVESTIGATED IF YOU BELIEVE AN OFFICER BEHAVED IMPROPERLY. CITIZEN COMPLAINTS AND ANY REPORTS OR FINDINGS RELATING TO COMPLAINTS MUST BE RETAINED FOR AT LEAST FIVE YEARS. IT IS AGAINST THE LAW TO MAKE A COMPLAINT THAT YOU KNOW TO BE FALSE. IF YOU MAKE A COMPLAINT AGAINST AN OFFICER KNOWING THAT IT IS FALSE, YOU CAN BE PROSECUTED ON A MISDEMEANOR CHARGE.

☒ I HAVE READ AND UNDERSTOOD THE ABOVE STATEMENT.

☐ THE ACKNOWLEDGMENT HAS BEEN READ TO THE COMPLAINANT.

Taken By (Name/#/Unit)/Date: OCC 4/21/04

Inv. David Aulet

Assigned Investigator/Date:

Inv. Aulet 4/1/04

Closure Approval/Date:

J. K. Alf 12.27.04

After you have completed this form, return it to the Office of Citizen Complaints by folding it along the lines below so that the address shows on the outside. Drop in any mailbox. NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES.

在您填妥本投訴書後，請沿摺線摺妥（地址在外），投入郵箱，寄回「公民投訴組」。在美國境內寄出，不需郵費。

Despues de completar la forma, doblela sobre las lineas marcadas y depositela en el buzón. No necesita estampilla (sello postal).

Matapos buuin ang pormang ito, tiklupin sa mga linyang nakatatak sa baba upang makita sa labas ang aming "address". Ihulog sa anumang buson o "mailbox". Hindi kailangan ng selyo kung ipadadala lang sa loob ng America.

OFFICES LOCATED AT:  
480 Second Street, Suite 100  
San Francisco, CA 94107



NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES

**BUSINESS REPLY MAIL**

FIRST CLASS MAIL PERMIT NO. 22978 SAN FRANCISCO, CA

POSTAGE WILL BE PAID BY ADDRESSEE

City and County of San Francisco  
**OFFICE OF CITIZEN COMPLAINTS**  
875 Stevenson Street, Room 125  
San Francisco, CA 94103-0917

RECEIVED  
AT OCC  
2004 APR -1 P 2:44





**COMPLAINANT:**

DESCRIPTION: \_\_\_\_\_

Unnecessary Force (UF) -The off. used excessive force during the arrest. (68)



OFFICE OF CITIZEN COMPLAINTS  
WITNESS LIST  
OCC CASE NO. 184-04

Civilian ☒ Officer ☐

Name: [REDACTED]  
Address: CS #2  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
CDC

Civilian ☒ Officer ☐

Name: [REDACTED]  
Address: [REDACTED]  
City: [REDACTED]  
State: [REDACTED] Zip: [REDACTED]  
Telephone: [REDACTED]

Civilian ☐ Officer ☐

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_

Civilian ☐ Officer ☐

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_

Civilian ☐ Officer ☐

Name: \_\_\_\_\_  
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Telephone: \_\_\_\_\_

Civilian ☐ Officer ☐

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_







San Francisco Police Department  
ADDITIONAL SUSPECTS

BOOKED 2	CODE B 2	NAME (LAST, FIRST MIDDLE) [REDACTED]				ALIAS				
	DAY PHONE	TYPE	HOME ADDRESS [REDACTED]			CITY	STATE	ZIP CODE		
	NIGHT PHONE	TYPE	WORK ADDRESS			CITY	STATE	ZIP CODE		
	SCHOOL (IF JUVENILE)	RACE B	SEX M	DOB UNKNOWN <input type="checkbox"/>	DOB [REDACTED]	HEIGHT 511	WEIGHT 180	HAIR COLOR BLK	EYE COLOR BRO	
	BPNO	JDS (IF JUV)	ID NO.	ID NO.		ID NO.				
	BOOKCHARGE 1	BOOKCHARGE 2	BOOKCHARGE 3	BOOKCHARGE 4	BOOKCHARGE 5	WHERE BOOKED				
	NW 11352 H&S NW 182 P.C. NW 243(C) P.C. 148(a)(1) P.C. 148 P.C.									
	WARRANT #	COURT #	ACTION #	DEPT	ENROUTE TO	CWS CHECK Miller	STAR 972			
	WARRANT VIOLATION(S)					BAI	IRANDIZED <input type="checkbox"/>	STAR	DATE TIME	STATEMENT <input type="checkbox"/>
	CITATION #					VIOLATION(S)		APPEAR DATE/ TIME		LOCATION OF APPEARANCE
BOOKCITE APPROVAL					STAR	MASS ARREST CODE	M X-RAYS <input type="checkbox"/>			
Insp. Doss 1568										
OTHER INFORMATION: CITATION/WARRANT/BOOKING CHARGE(S)/MISSING PERSON-SUBJECT DESCRIPTION/SCARS, MARKS, TATTOOS Wearing blk jacket, blue jeans, white tennis shoes.										
PVT PERSON ARREST	<input type="checkbox"/> ORIGINAL PRIVATE PERSON'S ARREST FORM BOOKED AS EVIDENCE. PHOTOCOPY ATTACHED WITH THIS REPORT.									
	CODE	NAME (LAST, FIRST MIDDLE)				ALIAS				
	DAY PHONE	TYPE	HOME ADDRESS			CITY	STATE	ZIP CODE		
	NIGHT PHONE	TYPE	WORK ADDRESS			CITY	STATE	ZIP CODE		
	SCHOOL (IF JUVENILE)	RACE	SEX	DOB UNKNOWN <input type="checkbox"/>	DOB	HEIGHT	WEIGHT	HAIR COLOR	EYE COLOR	
	BPNO	JDS (IF JUV)	ID NO.	ID NO.		ID NO.				
	BOOKCHARGE 1	BOOKCHARGE 2	BOOKCHARGE 3	BOOKCHARGE 4	BOOKCHARGE 5	WHERE BOOKED				
	WARRANT #	COURT #	ACTION #	DEPT	ENROUTE TO	CWS CHECK	STAR			
	WARRANT VIOLATION(S)					BAI	IRANDIZED <input type="checkbox"/>	STAR	DATE TIME	STATEMENT <input type="checkbox"/>
	CITATION #					VIOLATION(S)		APPEAR DATE/ TIME		LOCATION OF APPEARANCE
	BOOKCITE APPROVAL					STAR	MASS ARREST CODE	M X-RAYS <input type="checkbox"/>		
OTHER INFORMATION: CITATION/WARRANT/BOOKING CHARGE(S)/MISSING PERSON-SUBJECT DESCRIPTION/SCARS, MARKS, TATTOOS										
PVT PERSON ARREST	<input type="checkbox"/> ORIGINAL PRIVATE PERSON'S ARREST FORM BOOKED AS EVIDENCE. PHOTOCOPY ATTACHED WITH THIS REPORT.									

SFPD377 C (11/02)

Incident# [REDACTED]

Page 2 of 5



040-205-715

San Francisco Police Department  
PROPERTY LISTINGS

E	CODE/NO	ITEM DESCRIPTION				BRAND	MODEL	
1	EVD 1	suspected cocaine base						
	SERIAL NO.	GUN MAKE	CALIBER	COLOR	NARCOTICS LAB NO.	QUANTITY	VALUE	
					04213342	1	\$40	
	SEIZED BY (STAR)	FROM WHERE						
	1012	(B) [REDACTED] right hand						
	ADDITIONAL DESCRIPTION/IDENTIFYING NUMBERS							
	1 off-white rock of suspected cocaine base							
E	CODE/NO	ITEM DESCRIPTION				BRAND	MODEL	
2	EVD 2	suspected cocaine base						
	SERIAL NO.	GUN MAKE	CALIBER	COLOR	NARCOTICS LAB NO.	QUANTITY	VALUE	
					04213342	3		
	SEIZED BY (STAR)	FROM WHERE						
	1287	left hand of (B) [REDACTED]						
	ADDITIONAL DESCRIPTION/IDENTIFYING NUMBERS							
	3 rocks of suspected cocaine base							
E	CODE/NO	ITEM DESCRIPTION				BRAND	MODEL	
3	EVD 3	photocopies of before/after M.C.F.						
	SERIAL NO.	GUN MAKE	CALIBER	COLOR	NARCOTICS LAB NO.	QUANTITY	VALUE	
						2		
	SEIZED BY (STAR)	FROM WHERE						
	1012							
	ADDITIONAL DESCRIPTION/IDENTIFYING NUMBERS							
E	CODE/NO	ITEM DESCRIPTION				BRAND	MODEL	
4	EVD 4	photos of (B) [REDACTED] and Officer Kaspers #68 injuries						
	SERIAL NO.	GUN MAKE	CALIBER	COLOR	NARCOTICS LAB NO.	QUANTITY	VALUE	
	SEIZED BY (STAR)	FROM WHERE						
	1012							
	ADDITIONAL DESCRIPTION/IDENTIFYING NUMBERS							
	one polaroid and 1 disk with pictures on it.							
	CODE/NO	ITEM DESCRIPTION				BRAND	MODEL	
	SERIAL NO.	GUN MAKE	CALIBER	COLOR	NARCOTICS LAB NO.	QUANTITY	VALUE	
	SEIZED BY (STAR)	FROM WHERE						
	ADDITIONAL DESCRIPTION/IDENTIFYING NUMBERS							
	CODE/NO	ITEM DESCRIPTION				BRAND	MODEL	
	SERIAL NO.	GUN MAKE	CALIBER	COLOR	NARCOTICS LAB NO.	QUANTITY	VALUE	
	SEIZED BY (STAR)	FROM WHERE						
	ADDITIONAL DESCRIPTION/IDENTIFYING NUMBERS							



San Francisco Police Department  
NARRATIVE

Additional charges for (B) 1203.2(a) P.C. probation violation.

On 02/20/04 myself and the following officers conducted a buy/bust operation; Inspector Doss #1566, Officers Valdez #1287, Guerrero #1162, Healy #579, Kasper #68, Schaffer #1749, and Mullins #505. I was the buy officer and Officer Guerrero #1162 was the close cover officer.

I marked, photocopied, and time stamped the photocopies of the M.C.F. prior to and after the operation.

At approximately 1640 hours I was walking down Jones Street when (B) approached me on the sidewalk in front of 420 Jones Street and said "what do you need." It should be noted that this area is known for high incidents of narcotics sales and related activity. I told (B) that I wanted "2 solids for forty" (slang for 2 rocks of cocaine base worth \$40). (B) told me that he could get me some and told me to follow him. I began following (B) south bound Jones Street and as we walked he pointed out an unidentified black female sitting on a fire hydrant and told me that she was his lookout and his black queen. At the northeast corner of Jones and Ellis Streets (B) introduced me to (B) and told (B) that I wanted something for forty (B) then lifted up the front of my shirt and said, you're not five o are you, meaning was I police. I said no and then he gave me (E-1) rock of suspected cocaine with his right hand. I handed (B) \$40 M.C.F. (2x\$20) to his right hand, gave the bust signal, and began walking away south bound on Jones Street towards Ellis Street.

Officer Guerrero #1162 witnessed my interactions with (B) and the transaction between (B) and myself and relayed the descriptions of (B) and (B) to the other officer over the radio.

As I crossed Ellis Street I looked back and I saw (B) running south bound on Jones Street away from Officer Kasper. In the street near the north east corner of Jones Street at Ellis Street Officer Kasper tripped over an unidentified female, did a forward roll over her as she crouched down, and continued chasing (B) west bound on Ellis Street. At this point I lost view of the footchase and Inspector Doss and Officer Kasper later told me the following.

Inspector Doss told me that he and Officers Kasper, Schaffer, and Healy had their police stars displayed on their chests and had been yelling "police and stop" as they were chasing (B). Officer Kasper told me that he caught up to (B) about midblock on Ellis Street between Jones Street and Leavenworth Street on the north side of the street. Officer Kasper said that he took control of (B) arm and pulled him down to the sidewalk. Officer Kasper said that (B) was able to quickly pull from his control and stand up. Officer Kasper told me that as (B) stood up, (B) struck him forcefully in the face with a closed fist and tried to continue running west bound on Ellis Street. Officer Kasper told me that he then struck (B) once in the face with a closed fist and was able to maintain a hold on (B) until Inspector Doss #1566, and Officers Schaffer and Healy caught up. Inspector Doss, and Officers Healy and Schaffer all told me that they witnessed (B) strike Officer Kasper and Officer Kasper strike (B). Both Officer Kasper #68 and Inspector Doss #1566 told me that (B) continued to resist arrest once on the sidewalk in the prone position by attempting to forcefully pull his arms away from the officers attempts to handcuff him.

Inspector Doss told me that after (B) was handcuffed he observed a laceration that was bleeding slowly above (B) left eyebrow. Therefore he requested an ambulance to respond to the scene.

Incident#

Page 4 of 5



Inspector Doss told me that while they awaited the ambulance, a large crowd of people began forming on the block and therefore Officers Schaffer #1749 and Healy #579 transported [REDACTED] back to Tenderloin Station and the ambulance was re-directed to Tenderloin station.

Officer Kasper told me that he had returned to the corner of Ellis and Jones Streets in an attempt to locate the woman he had accidentally tripped over, but that he was unsuccessful.

Officer Valdez #1287 told me that as he took [REDACTED] into custody, he recovered the M.C.F. from [REDACTED] right hand and (E-3) 3 rocks of suspected cocaine base from [REDACTED] left hand, which he gave to me later at Tenderloin Station.

Officer Kasper's nose was bleeding from both nostrils and bruised as a result of being struck by [REDACTED]. Officer Kasper told me that he also felt a throbbing pain in his nose from being struck. Officer Kasper sought his own medical treatment.

5N200 Sgt. Scott #1488 was notified regarding Officer Kasper's injury and he responded to Tenderloin Station.

Medic 13 responded to Tenderloin Station to assess [REDACTED] injury. After being treated and assessed by Medic 13 Officers Healy #579, Schaffer #1749, and Valdez #1287 transported [REDACTED] to General Hospital for further evaluation.

A computer check on [REDACTED] showed that he was currently wanted on a parole violation. Miller #972, of Central Warrants Bureau, confirmed the warrant and he was booked for it and the other listed charges.

A computer check of [REDACTED] criminal history showed that he was currently on probation for a rape and felony assault offense (see superior court number [REDACTED]). Therefore Inspector Doss #1586 authorized a probation hold to be placed on [REDACTED] in addition to the other listed charges for him.

[REDACTED] was treated at General Hospital by Doctor Leeko and then transported to County Jail #9 by Officers Healy #579, Schaffer #1749, and Valdez #1287 and booked there.

Officer Nastari #1766 booked (E-1) and (E-2) suspected cocaine base into a Narcotics envelope for me in my presence and I hand carried and deposited the envelope in the drop box located on the 4th floor of the Hall of Justice.

Officer Nastari #1766 booked all other evidence for me.

Sgt. Scott #1488 made the appropriate use of force entry to the log at the Narcotics Office.



2004 FEB 20 P 3:41



BEFORE MCF

CASE #





RECEIVED  
TASK FORCE

2004 FEB 20 P 11:11

AFTER MCF FROM  
RT HAND OF MCGALL

CASE #



## MEMBER RESPONSE FORM FOR OCC CASE #184-04

- 1) I WAS PART OF THE ARREST TEAM, I WAS ON O'FARRELL STREET, AND I DID NOT SEE GILL-KEHOE CONTACT [REDACTED]
- 2) GAVE CHASE OF [REDACTED], HELPED IN PLACING HIM UNDER ARREST.
- 3) I SAW [REDACTED] PUNCH OFFICER KASPER IN THE FACE, I SAW KASPER PUNCH [REDACTED] [REDACTED] RESISTED ARREST.
- 4) A) I ARRIVED WHEN KASPER AND [REDACTED] WERE ON THE FLOOR. I SAW [REDACTED] STAND AND PUNCH KASPER IN THE FACE. KASPER PUNCHED [REDACTED] OFFICER KASPER, INSP. DOOS, AND I STRUGGLED WITH [REDACTED] AND EVENTUALLY HANDCUFFED HIM.  
B) I DON'T RECALL WHO ACTUALLY HANDCUFFED [REDACTED]
- 5) NO
- 6) [REDACTED]
- 7) A CROWN WAS GATHERING, THE 408 WAS A DELAY, AND CO J. WAS A MORE SECURE PLACE FOR [REDACTED]
- 8) [REDACTED]
- 9) NO
- 10) YES, HE WAS TREATED FOR INJURY. A) NO. B) NO C) NO D) NO.
- 11) NO

[REDACTED]

#579



Page 2

OCC Case No. 184-04

Off. Ricardo Guerrero #1162

**INFORMATION REQUESTED:** *(On a separate sheet of paper, please provide a separate response to each question.)*

1. Please describe your role, your location, and what you saw when Off. Gill-Kehoe had contact with complainant [REDACTED]

2. Please describe everything you did at the scene.

3. Please describe everything you saw complainant [REDACTED] do and say, and everything officers who interacted with and arrested [REDACTED] did and said at the scene.

4. Please describe, in as much detail as possible, all force you or other officers used arresting and handcuffing complainant [REDACTED] and all of [REDACTED] actions.

a) When did you arrive at the scene of [REDACTED] arrest, and what was happening when you arrived there.

b) Who handcuffed [REDACTED]?

5. Did Off. Kasper ever grab the complainant by the throat?

6. [REDACTED]

7. Why was complainant [REDACTED] transported to Co J before the 408 arrived on the scene?

8. [REDACTED]

9. Did you and other officers discuss what would be written in the incident report? If so, please describe what was said.

ARE THERE ANY WITNESSES TO THIS INCIDENT? IF SO IDENTIFY AND PROVIDE CONTACT INFORMATION.

WOULD AN ORAL INTERVIEW AID THIS INVESTIGATION? IF YES, PLEASE EXPLAIN:

ADD ANY STATEMENT YOU FEEL IS NECESSARY FOR US TO CONSIDER IN THIS INVESTIGATION.

REASON FOR THIS REQUEST: Investigation of citizen complaint.

DOCUMENTS ATTACHED: 293

MEMBER'S SIGNATURE [REDACTED]

DATE: 12/10/04

OCC#184-04

1. I WAS THE CLOSE COVER OFFICER IN THE NARCOTICS TRANSACTION WHICH OCCURRED IN CASE# [REDACTED]
2. NOTHING
3. I DIDN'T SEE ANYTHING
4. I DIDN'T SEE ANY FORCE.
- (A) I DIDN'T ARRIVE AT THE SCENE.
- (B) I DON'T KNOW.
5. I DON'T KNOW.
6. [REDACTED]
7. I DON'T KNOW
8. [REDACTED]
9. NO
10. NO
11. NO



THE POLICE COMMISSION

**OFFICE OF CITIZEN COMPLAINTS**

CITY AND COUNTY OF SAN FRANCISCO

Kevin Allen  
Director**PROOF OF SERVICE**

TO: Commanding Officer / Officer in Command, Narcotics

RE: MEMBER RESPONSE FORM FOR OCC CASE # 184-04

FROM: J. Wechter, Investigator

DATE: November 22, 2004

MEMBER TO BE NOTIFIED: Off. Kevin Healy #579 [REDACTED]

**COMMANDING OFFICER:** Sign this Proof of Service and serve the attached Member Response Form and any attachments to the named member when the member next reports to duty. If the member is designated as named, give the member a copy of the attached complaint. Witness members do not get a copy of the complaint, and none may be attached in that event. If the member is on D.P. or extended sick leave, but is medically able to complete the form, forward the Member Response Form to the member at his/her residence. The member must complete and return the Member Response Form to OCC no later than **December 13, 2004**. Once the member has been served return the original of the Proof of Service to OCC and retain the File Copy for your file. If you are unable to serve the member you shall notify the OCC investigator by phone no later than (December 1, 2004).

**COMMANDING OFFICER'S PROOF OF SERVICE:**

Date received: \_\_\_\_\_  
Date and Time served: \_\_\_\_\_  
Date returned to OCC: \_\_\_\_\_

Reason for failure to serve: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_ Star No. \_\_\_\_\_

**MEMBER'S ACKNOWLEDGMENT OF RECEIPT:** Your signature acknowledges receipt of the Member Response Form and the following attachments:

X \_\_\_\_\_ Complaint Form \_\_\_\_\_ None

Member's Signature

Star No.

Date and Time Notified

POLICE COMMISSION  
**OFFICE OF CITIZEN COMPLAINTS**

CITY AND COUNTY OF SAN FRANCISCO



Kevin Allen  
Director

**PROOF OF SERVICE**

TO: Commanding Officer / Officer in Command, Narcotics

RE: MEMBER RESPONSE FORM FOR OCC CASE # 184-04

FROM: J. Wechter, Investigator

DATE: November 22, 2004

MEMBER TO BE NOTIFIED: Off. Ricardo Guerrero #1162 [REDACTED]

**COMMANDING OFFICER:** Sign this Proof of Service and serve the attached Member Response Form and any attachments to the named member when the member next reports to duty. If the member is designated as named, give the member a copy of the attached complaint. Witness members do not get a copy of the complaint, and none may be attached in that event. If the member is on D.P. or extended sick leave, but is medically able to complete the form, forward the Member Response Form to the member at his/her residence. The member must complete and return the Member Response Form to OCC no later than **December 13, 2004**. Once the member has been served return the original of the Proof of Service to OCC and retain the File Copy for your file. **If you are unable to serve the member you shall notify the OCC investigator by phone no later than (December 1, 2004).**

**COMMANDING OFFICER'S PROOF OF SERVICE:**

Date received: 11.29.04

Reason for failure to serve: \_\_\_\_\_

Date and Time served: 11.29.04 2200hrs

Date returned to OCC: 11.20.07

Signature \_\_\_\_\_

Star No. \_\_\_\_\_

**MEMBER'S ACKNOWLEDGMENT OF RECEIPT:** Your signature acknowledges receipt of the Member Response Form and the following attachments:

X ☒ Complaint Form

☐ None

[REDACTED]  
Member's Signature

1162  
Star No.

11/29/04 2200 HNS  
Date and Time Notified



Case No. 184-04  
Investigator J. L. C. A. 7ER  
Page 1 / of 1

OCC TAPED INTERVIEW LOG

Date of Interview	Name of Interviewee or subject of tape (e.g. CAD tape)	Comments
4/31/04	[REDACTED]	

Date submitted to file room 12/27/08  
Total Number of Tapes 1

Tiburon, Inc. EVENT HISTORY DETAIL: S040512393

04-06-04

SAN FRANCISCO POLICE

08:43

\*\*\*\*\*

S040512393 C ARR JONES ST/ELLIS ST,SF

(D=3B 400 JONES/398 ELLIS) J3

16:39:26 DP04 ON-VIEW 5N51:UN, CITIZEN KNOCKED DWN BY UNITS -- MAY 408 -- C/1  
-- 1023 ON 408 -- WILL CHECK W/ CITIZEN

16:39:26 DP04 PERS-ID 5N51 [REDACTED] DOSS ROBERT M

16:39:26 DP04 PRIOR ARR YESTERDAY S2333 (44 MORE)

16:40:00 1124 EMERGNCY 5N51

16:40:26 1124 EMERGNCY 5N51

16:40:45 DP01 BACK-ENR 5N51 5N58:UN

16:40:45 DP01 PERS-ID 5N58 &lt;[REDACTED]&gt;VALDEZ RICARDO H/1287

16:40:56 DP04 MISC 5N51, 1022 408 -- CITIZEN WALKED AWAY

16:40:59 1124 EMERGNCY 5N51

16:41:36 DP01 BACK-ENR 5N51 5N54:UN, 50 ELLIS 1 408 BM CONSCIOUS & BREATHING  
LACERATION ABOVE EYE

16:41:36 DP01 PERS-ID 5N54 &lt;[REDACTED]&gt;HEALY KEVIN E/0579

16:42:56 DP01 MISC 5N51, 450 ELLIS...

16:43:26 DP01 MISC 5N54, 30-40 YOM...BLEEDING CONTROL

16:43:55 1124 EMERGNCY 5N51

16:49:26 DP01 MISC 5N54, REDIREC 408 OT CO J

20:06:45 DP01 CLEAR 5N54 ARR

20:06:48 DP01 CLEAR 5N58

20:07:09 DP01 CLEAR 5N51 ARR

20:07:09 DP01 CLOSE

## Call Recap:

INITIATE: 16:39:26 02/20/04 CALL NUMBER: #2393

ENTRY: 16:39:26 CURRENT STATUS: CLOSED

DISPATCH: 16:39:26 PRIMARY UNIT: 5N51

ON SCENE: 16:39:26 JURISDICTION: SP

CLOSE: 20:07:09 DISPOSITION: ARR

ADDRESS: JONES ST/ELLIS ST,SF (D=3B 400 JONES/398 ELLIS)

DAREA: 3B

SECTOR: J3 TYPE: ARR ARREST MADE

RA: 172 PRIORITY: C

FIRE: 1461 PRIOR HISTORY

OPERATOR ASSIGNMENTS: DP04 [REDACTED]

1124 5N51

DP01 [REDACTED]

AS OF 16:49:26: DP01 [REDACTED]

AS OF 20:06:45: DP01 [REDACTED]



Tiburon, Inc.

UNIT HISTORY DETAIL FOR 5N54

04-06-04

SAN FRANCISCO POLICE

08:38

\*\*\*\*\*

ON DUTY: 12:00:03 02/20/04 DAREA: UN CONTROL: UN MID: FK:  
OFF DUTY: 22:00:03 Narcotics Division

RADIO: 1: 00701131

ID # 1 [REDACTED] HEALY KEVIN E

12:00:03 SLON ON-DUTY ID: [REDACTED] NAME:HEALY KEVIN E/0579 BEAT:UN RADIO:00701131

15:33:44 DP04 QUERY Q H [REDACTED]

15:33:50 DP04 QUERY Q H [REDACTED]

16:41:36 DP01 BACK-ENR S040512393 C/ARR JONES ST/ELLIS ST,SF, 50 ELLIS 1 408 BM  
CONSCIOUS & BREATHING LACERATION ABOVE EYE

16:43:26 DP01 MISC 30-40 YOM...BLEEDING CONTROL

16:49:26 DP01 MISC REDIREC 408 OT CO J

20:06:45 DP01 CLEAR ARR

OPERATOR ASSIGNMENTS: DP04 [REDACTED]

DP01

AS OF 16:49:26: DP01

AS OF 20:06:45: DP01

## USE OF FORCE LOG

Reporting Period

Beginning

2/16/04  
Mo Day Yr

Ending

2/29/04  
Mo Day Yr

DATE	CASE NUMBER	OFFICER USING FORCE NAME & STAR #	REVIEWING SUPERVISOR NAME & STAR #	PHYSICAL CONTROL	STRIKE BY <u>LEST</u> OR OBJECT	CHEMICAL AGENTS/PEPPER	BATON/STRIKE OR LASH	CAROTID RESTRAINT	FIREARM	SUSPECT INJURED	SUSPECT COMPLAINT OF INJURY	OFFICER INJURED DURING USE OF REPORTABLE FORCE	COMMENTS
7/20/04	040205715	Off. Kasper #68	Insf. Scott #1488	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Off. Kasper sustained a back injury while using force on suspect. Suspect was taken to hospital and treated. No further action.
										Yes No	Yes No	Yes No	
										Yes No	Yes No	Yes No	
										Yes No	Yes No	Yes No	
										Yes No	Yes No	Yes No	

FORWARD ONE COPY TO: BUREAU HEADQUARTERS. FORWARD COPY OF LOG AND INCIDENT REPORTS TO COMMANDING OFFICER, M.C.D. AND TRAINING DIVISION.

1ST AND 15TH OF EACH MONTH

NO. 075 P004/005



No Day.

STPD 128 (Rev. 7-96)

# SAN FRANCISCO POLICE DEPARTMENT

## DAILY ARREST INFORMATION

<b>Station</b>	TENO	<b>Reporting Period</b>	Day <u>FRI</u> Date <u>02/20/04</u> 0001 hrs.	<b>through</b>	2400 hrs.
----------------	------	-------------------------	---	----------------	-----------

TIME	NAME	ADDRESS	DOB	SEX	CHARGES	LOCATION OF ARREST
------	------	---------	-----	-----	---------	--------------------

[REDACTED]

1700	[REDACTED]	[REDACTED]	[REDACTED]	M	1135214 w/ 243 E11K	450 ELL.
------	------------	------------	------------	---	------------------------	----------

[REDACTED]




# SAN FRANCISCO POLICE DEPARTMENT

## DAILY ARREST INFORMATION

<b>Station</b>	<b>Reporting Period</b>	Day _____ Date <u>2/20/04</u> 0001 hrs.	<b>through</b>	2400 hrs.
----------------	-------------------------	---	----------------	-----------

[illegible]



# SAN FRANCISCO POLICE DEPARTMENT



## MUGSHOT PROFILE

NAME:

AKA:

AKA:

MONIKER:

SF#:

JAIL #:

BOOKING DATE:

Feb 21 2004 9:02AM

DATE OF BIRTH:

PLACE OF BIRTH:

SOCIAL SECURITY #:

CII#:

CA DRIVERS LIC #:

### PHYSICAL DESCRIPTION

SEX:

MALE

RACE:

BLACK

HEIGHT:

5'10"

WEIGHT:

180

EYE COLOR:

BROWN

HAIR COLOR:

BLACK

GLASSES:

No

BUILD:

MEDIUM

COMPLEXION:

CLEAR

EYE CHARACTERISTICS:

NORMAL

FACIAL HAIR:

BEARD &amp; MUSTACHE

HAIR LENGTH:

ABOVE EARS

### SCARS/MARKS/TATTOOS

#1.:

#2.:

#3.:

#1.:

11352A HS

#2.:

182A1 PC

#3.:

243C PC

#4.:

148A1 PC

#5.:

148A PC

#6.:

1203.2A PC

#7.:

#8.:

#9.:

#10.:



**OFFICE OF CITIZEN COMPLAINTS  
MEMBER RESPONSE FORM**

TO: Off. Brian Schaffer #1749

RE: OCC CASE No. 184-04

FROM: Inv. J. Wechter

COMPLAINANT: [REDACTED]

DATE: November 22, 2004

DATE OF OCCURRENCE: 2/20/04

RESPONSE DUE DATE: 12/13/04

REPORT/CITATION NO.: [REDACTED]

The OCC is conducting an investigation into the complaint referenced above. In order to facilitate the investigation, you are to provide a separate answer to each of the specific questions listed on the reverse side of this form.

You are to answer truthfully, candidly and to the best of your ability. **Failure to answer all questions even under advice of counsel or representative may be a violation of Department General Orders 2.01, 2.04, and 2.08, all of which require cooperation in an OCC investigation.** Administratively compelled statements shall not be used against you in a criminal investigation or proceeding. Your statements shall only be used for administrative proceedings.

Because this investigation could result in punitive action, all of the rights enacted in the Public Safety Officers' Procedural Bill of Rights apply. Specifically:

1. You may seek assistance from the representative of your choice in completing this form.
2. You are specifically authorized to complete answers to these questions while on duty.
3. You have the right to keep a copy of this form.

**(OVER)**

**INFORMATION REQUESTED:** *(On a separate sheet of paper, please provide a separate response to each question.)*

1. Please describe your role, your location, and what you saw when Off. Gill-Kehoe had contact with complainant [REDACTED]

2. Please describe everything you did at the scene.

3. Please describe everything you saw complainant [REDACTED] do and say, and everything officers who interacted with and arrested [REDACTED] did and said at the scene.

4. Please describe, in as much detail as possible, all force you or other officers used arresting and handcuffing complainant [REDACTED] and all of [REDACTED] actions.

a) When did you arrive at the scene of [REDACTED] arrest, and what was happening when you arrived there.

b) Who handcuffed [REDACTED]?

5. Did Off. Kasper ever grab the complainant by the throat?

6 [REDACTED]

7. Why was complainant [REDACTED] transported to Co J before the 408 arrived on the scene?

8 [REDACTED]

9 [REDACTED]

10 [REDACTED]

- a) [REDACTED]
- b) [REDACTED]
- c) [REDACTED]
- d) [REDACTED]

11. Did you and other officers discuss what would be written in the incident report? If so, please describe what was said.



- 1) Arrest team.
- 2) Assisted in taking suspect into custody.
- 3) [REDACTED] was violently resisting arrest
- 4) I observed [REDACTED] violently resisting arrest while trying to get back up off the sidewalk. I did not see any officers using force against [REDACTED] Unknown who handcuffed [REDACTED]
- 5) No.
- 6) [REDACTED]
- 7) A crowd began gathering in the area and began yelling and threatening us.
- 8) [REDACTED]
- 9) [REDACTED]
- 10) [REDACTED]
- 11) Do not recall.

[REDACTED] 1749 12-9-04



POLICE DEPARTMENT  
**CITY AND COUNTY OF SAN FRANCISCO**

THOMAS J. CAHILL HALL OF JUSTICE  
850 BRYANT STREET  
SAN FRANCISCO, CALIFORNIA 94103-4603

**HEATHER J. FONG**  
CHIEF OF POLICE



# Memorandum

San Francisco Police Department



**To:** CAPTAIN TIMOTHY HETTRICH#1696  
COMMANDING OFFICER OF THE  
NARCOTICS DIVISION

**From:** [REDACTED]  
NARCOTICS DIVISION

**Date:** Tuesday, November 30, 2004

**Subject:** O.C.C. COMPLAINT

ON 11-30-04 AT 1200HRS CAPTAIN TIMOTHY HETTRICH#1696 PERSONALLY  
SERVED ME REGARDING O.C.C. COMPLAINT #184-04 WHICH IS A COMPLAINT  
FROM [REDACTED] (CASE# [REDACTED])

APPROVED	YES	NO
[REDACTED]	<input checked="" type="checkbox"/>	<input type="checkbox"/>
[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>
[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>

**OFFICE OF CITIZEN COMPLAINTS  
MEMBER RESPONSE FORM**

TO: Off. Jon Kasper #68

RE: OCC CASE No. 184-04

FROM: Inv. J. Wechter

COMPLAINANT: [REDACTED]

DATE: November 22, 2004

DATE OF OCCURRENCE: 2/20/04

RESPONSE DUE DATE: 12/13/04

REPORT/CITATION NO.: [REDACTED]

The OCC is conducting an investigation into the complaint referenced above. In order to facilitate the investigation, you are to provide a separate answer to each of the specific questions listed on the reverse side of this form.

You are to answer truthfully, candidly and to the best of your ability. **Failure to answer all questions even under advice of counsel or representative may be a violation of Department General Orders 2.01, 2.04, and 2.08, all of which require cooperation in an OCC investigation.** Administratively compelled statements shall not be used against you in a criminal investigation or proceeding. Your statements shall only be used for administrative proceedings.

Because this investigation could result in punitive action, all of the rights enacted in the Public Safety Officers' Procedural Bill of Rights apply. Specifically:

1. You may seek assistance from the representative of your choice in completing this form.
2. You are specifically authorized to complete answers to these questions while on duty.
3. You have the right to keep a copy of this form.

**(OVER)**



**INFORMATION REQUESTED:** *(On a separate sheet of paper, please provide a separate response to each question.)*

1. Please describe your role, your location, and what you saw when Off. Gill-Kehoe had contact with complainant [REDACTED]

2. Please describe everything you did at the scene.

3. Please describe everything you saw complainant [REDACTED] do and say, and everything officers who interacted with and arrested [REDACTED] did and said at the scene.

4. Please describe, in as much detail as possible, all force you or other officers used arresting and handcuffing complainant [REDACTED] and all of [REDACTED] actions.

a) When did you arrive at the scene of [REDACTED] arrest, and what was happening when you arrived there.

b) Who handcuffed [REDACTED]?

5. Did you ever grab the complainant by the throat?

6. [REDACTED]

7. Why was complainant [REDACTED] transported to Co J before the 408 arrived on the scene?

8. [REDACTED]

a) [REDACTED]

b) [REDACTED]

c) [REDACTED]

d) [REDACTED]

11. Did you and other officers discuss what would be written in the incident report? If so, please describe what was said.

ARE THERE ANY WITNESSES TO THIS INCIDENT? IF SO IDENTIFY AND PROVIDE CONTACT INFORMATION.

WOULD AN ORAL INTERVIEW AID THIS INVESTIGATION? IF YES, PLEASE EXPLAIN:

ADD ANY STATEMENT YOU FEEL IS NECESSARY FOR US TO CONSIDER IN THIS INVESTIGATION.

REASON FOR THIS REQUEST: Investigation of citizen complaint.

DOCUMENTS ATTACHED: 293

MEMBER'S SIGNATURE: \_\_\_\_\_



DATE: 12-9-04



MEMBER RESPONSE TO OCC CASE NO: 184-04

1) I WAS PART OF AN ARREST TEAM DURING AN UNDERCOVER "BUY/BUST" OPERATION. I WAS PARKED AT JONES AND O'FARRELL. I SAW OFC. GIL-KEHOE SPEAKING WITH [REDACTED]

2) AFTER WE WERE ADVISED TO MOVE IN AND ARREST [REDACTED] AND [REDACTED], I CHASED [REDACTED] S/B JONES TO W/B ELLIS. I ATTEMPTED TO TAKE [REDACTED] IN CUSTODY AND HE PUNCHED ME IN THE NOSE. [REDACTED] ATTEMPTED TO HIT ME AGAIN, AND IN SELF DEFENSE, FEARING FOR MY SAFETY, I PUNCHED HIM IN THE FACE, KNOCKING HIM TO THE GROUND. INSP. DOSS, OFC. SCHAFFER, OFC. HEALY AND I PLACED [REDACTED] IN HANDCUFFS AFTER A BRIEF STRUGGLE. AN AMBULANCE WAS CALLED FOR [REDACTED]

3) [REDACTED] FLED FROM ME DURING AN ATTEMPTED ARREST, PUNCHED ME IN THE NOSE AND RESISTED ARREST. AFTER HE WAS TAKEN INTO CUSTODY, HE JUST SMILED AT US. I ASKED [REDACTED] IF HE WAS HURT AND HE JUST SMILED. THE OTHER OFFICERS ASKED HIS NAME AND DATE OF BIRTH. [REDACTED] REFUSED TO ANSWER. I TOLD [REDACTED] THAT I REQUESTED AN AMBULANCE FOR HIM AND HE SAID THAT HE DIDN'T NEED ONE.

4) THE ONLY FORCE USED WAS WHEN I PUNCHED [REDACTED] IN THE FACE. NO OTHER OFFICER USED FORCE ON [REDACTED]. [REDACTED] CONTINUED TO FLAIL HIS ARMS AND ATTEMPT TO GET UP OFF OF THE GROUND.

- A) I WAS THE OFFICER ATTEMPTING TO ARREST [REDACTED]
- B) I DO NOT REMEMBER WHO ACTUALLY PUT THEM ON, ALTHOUGH IT WAS A COMBINED EFFORT WITH INSP. DOSS, OFC. SCHAFFER AND MYSELF.

5) NO

6) [REDACTED]

7) DUE TO THE FACT THAT A LARGE HOSTILE CROWD THAT WAS GATHERING. MEMBERS OF THE CROWD WERE WALKING ACROSS THE STREET TO OUR LOCATION.

8) [REDACTED]

(ACCORDING TO THE QUESTIONS YOU PROVIDED, THERE ARE NO QUESTIONS LISTED AS #9, OR #10)

11) YES, I TOLD OFC. GIL-KEHOE WHAT HAPPENED WHEN I ATTEMPTED TO ARREST [REDACTED] REGARDING HIM FLEEING, RESISTING, AND PUNCHING ME IN THE FACE, INJURING MY NOSE.

THERE ARE NO WITNESSES THAT I KNOW OF, AN ORAL INTERVIEW WOULD NO AID THIS INVESTIGATION, AND I HAVE NOTHING FURTHER TO ADD.

SUBMITTED, [REDACTED]

OFF. JON KASPER #68

**OFFICE OF CITIZEN COMPLAINTS**

CITY AND COUNTY OF SAN FRANCISCO

Kevin Allen  
Director**PROOF OF SERVICE**

TO: Commanding Officer / Officer in Command, Narcotics

RE: MEMBER RESPONSE FORM FOR OCC CASE # 184-04

FROM: J. Wechter, Investigator

DATE: November 22, 2004

MEMBER TO BE NOTIFIED: Off. Jon Kasper #68 Named   x   Witness       

**COMMANDING OFFICER:** Sign this Proof of Service and serve the attached Member Response Form and any attachments to the named member when the member next reports to duty. If the member is designated as named, give the member a copy of the attached complaint. Witness members do not get a copy of the complaint, and none may be attached in that event. If the member is on D.P. or extended sick leave, but is medically able to complete the form, forward the Member Response Form to the member at his/her residence. The member must complete and return the Member Response Form to OCC no later than **December 13, 2004**. Once the member has been served return the original of the Proof of Service to OCC and retain the File Copy for your file. **If you are unable to serve the member you shall notify the OCC investigator by phone no later than (December 1, 2004).**

**COMMANDING OFFICER'S PROOF OF SERVICE:**Date received: 11-29-04

Reason for failure to serve: \_\_\_\_\_

Date and Time served: 11-29-04 1400hrsDate returned to OCC: 11-30-04

Signature

Star No. \_\_\_\_\_

**MEMBER'S ACKNOWLEDGMENT OF RECEIPT:** Your signature acknowledges receipt of the Member Response Form and the following attachments:

  X   Complaint Form       NoneStar No. 68Date and Time Notified 11-29-04 1400



**INFORMATION REQUESTED:** *(On a separate sheet of paper, please provide a separate response to each question.)*

1. Please describe your role, your location, and what you saw when Off. Gill-Kehoe had contact with complainant [REDACTED]

2. Please describe everything you did at the scene.

3. Please describe everything you saw complainant [REDACTED] do and say, and everything officers who interacted with and arrested [REDACTED] did and said at the scene.

4. Please describe, in as much detail as possible, all force you or other officers used arresting and handcuffing complainant [REDACTED] and all of [REDACTED] actions.

a) When did you arrive at the scene of [REDACTED] arrest, and what was happening when you arrived there.

b) Who handcuffed [REDACTED]?

5. Did Off. Kasper ever grab the complainant by the throat?

6. [REDACTED]

7. Why was complainant [REDACTED] transported to Co J before the 408 arrived on the scene?

8. Did you and other officers discuss what would be written in the incident report? If so, please describe what was said.

ARE THERE ANY WITNESSES TO THIS INCIDENT? IF SO IDENTIFY AND PROVIDE CONTACT INFORMATION.

WOULD AN ORAL INTERVIEW AID THIS INVESTIGATION? IF YES, PLEASE EXPLAIN:

ADD ANY STATEMENT YOU FEEL IS NECESSARY FOR US TO CONSIDER IN THIS INVESTIGATION.

REASON FOR THIS REQUEST: Investigation of citizen complaint.

DOCUMENTS ATTACHED: 293

MEMBER'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

TO OCC J.WECHTER  
FROM INSPECTOR ROBERT DOSS 1566 [REDACTED] 1566  
O.C.C CASE # 184-04  
DECEMBER 7, 2004

QUESTION # 1: I was part of a arrest team on buy bust operation [REDACTED] I was in a unmarked vehicle with officer Kasper 68. On Jones street, neat Ellis St. I observed Officer Gill-Kehoe speaking with [REDACTED]

QUESTION #2; After receiving the move-in from Officer Guerrero 1162 and being directed to [REDACTED] and [REDACTED] I exited my vehicle and approached [REDACTED] Officer Kasper approached [REDACTED] ahead of me. Officer Kasper and I both had our SFPD stars out. I also observed Officer Schaffer 1749 approaching the area. After Officer Kasper approached [REDACTED] and identified himself as a Police Officer, I observed [REDACTED] break and run w/b on Ellis St. from Jones St. away from Officer kasper and me. Both officer Kasper and I was yelling for [REDACTED] to stop. I observed [REDACTED] knock over a women as he was fleeing the scene. I observed Officer Kasper catch up to [REDACTED] and grab him by the arm. Both [REDACTED] and Officer kasper fell down on the ground. Next I observed [REDACTED] get first and punch Officer Kasper in the face with his closed fist. Next Officer Kasper recovered from the punch and I observed Officer Kasper punch [REDACTED] with his closed fist. [REDACTED] tried to run and Officer Kasper [REDACTED] hold of Graham and [REDACTED] slipped down on the ground. As [REDACTED] was trying to get up I came to Officer Kasper aid and with Officer Schaffer help we placed [REDACTED] under arrest.

QUESTION # 3: See question # 2.

QUESTION #4 See question # 2  
4 a: See question #2.  
4 b: I do not recall

QUESTION# 5: No.

QUESTION # 6: No.

QUESTION# 7: A large crowd of people was forming on the block, therefore for officers safety and the suspect safety he was transported to Co J and ambulance was redirected to Co.J from the arrest scene.

QUESTION:#8: Yes, Officer Gill-Kehoe was writing the report and we gave him the Information. Also Sgt./Insp. Scott 1488 made a entry into the use of force log.

See police Report.

No.

No.



**OFFICE OF CITIZEN COMPLAINTS**

CITY AND COUNTY OF SAN FRANCISCO

Kevin Allen  
Director**PROOF OF SERVICE**

TO: Commanding Officer / Officer in Command, Narcotics

RE: MEMBER RESPONSE FORM FOR OCC CASE # 184-04

FROM: J. Wechter, Investigator

DATE: November 22, 2004

MEMBER TO BE NOTIFIED: Insp. Robert Doss #1566 [REDACTED]

**COMMANDING OFFICER:** Sign this Proof of Service and serve the attached Member Response Form and any attachments to the named member when the member next reports to duty. If the member is designated as named, give the member a copy of the attached complaint. Witness members do not get a copy of the complaint, and none may be attached in that event. If the member is on D.P. or extended sick leave, but is medically able to complete the form, forward the Member Response Form to the member at his/her residence. The member must complete and return the Member Response Form to OCC no later than **December 13, 2004**. Once the member has been served return the original of the Proof of Service to OCC and retain the File Copy for your file. **If you are unable to serve the member you shall notify the OCC investigator by phone no later than (December 1, 2004 ).**

**COMMANDING OFFICER'S PROOF OF SERVICE:**Date received: 11-29-04

Reason for failure to serve:

Date and Time served: 11-29-04 1330hrsDate returned to OCC: 11-30-04Sig. [REDACTED] Gry  
Star No.

**MEMBER'S ACKNOWLEDGMENT OF RECEIPT:** Your signature acknowledges receipt of the Member Response Form and the following attachments:

X      Complaint Form     None[REDACTED]  
Member's Signature1566  
Star No.11/29/04 1330  
Date and Time Notified

**OFFICE OF CITIZEN COMPLAINTS  
MEMBER RESPONSE FORM**

TO: Off. Kahri Gill-Kehoe #1012

RE: OCC CASE No. 184-04

FROM: Inv. J. Wechter

COMPLAINANT: [REDACTED]

DATE: November 22, 2004

DATE OF OCCURRENCE: 2/20/04

RESPONSE DUE DATE: 12/13/04

REPORT/CITATION NO.: [REDACTED]

The OCC is conducting an investigation into the complaint referenced above. In order to facilitate the investigation, you are to provide a separate answer to each of the specific questions listed on the reverse side of this form.

You are to answer truthfully, candidly and to the best of your ability. **Failure to answer all questions even under advice of counsel or representative may be a violation of Department General Orders 2.01, 2.04, and 2.08, all of which require cooperation in an OCC investigation.** Administratively compelled statements shall not be used against you in a criminal investigation or proceeding. Your statements shall only be used for administrative proceedings.

Because this investigation could result in punitive action, all of the rights enacted in the Public Safety Officers' Procedural Bill of Rights apply. Specifically:

1. You may seek assistance from the representative of your choice in completing this form.
2. You are specifically authorized to complete answers to these questions while on duty.
3. You have the right to keep a copy of this form.

**(OVER)**



**INFORMATION REQUESTED:** *(On a separate sheet of paper, please provide a separate response to each question.)*

1. Please describe your role, your location, and everything you did at the scene.
2. Please describe everything you saw complainant [REDACTED] do and say, and everything officers who interacted with and arrested [REDACTED] did and said at the scene.
3. Please describe, in as much detail as possible, all force you or other officers used arresting and handcuffing complainant [REDACTED], and all of [REDACTED] actions.
  - a) When did you arrive at the scene of [REDACTED] arrest, and what was happening when you arrived there.
  - b) Who handcuffed [REDACTED]?
4. Did Off. Kasper ever grab the complainant by the throat?
5. [REDACTED]
6. Why was complainant [REDACTED] transported to Co J before the 408 arrived on the scene?
7. Did you and other officers discuss what would be written in the incident report? If so, please describe what was said.
8. Is the incident report you prepared a truthful and accurate account of what occurred?

ARE THERE ANY WITNESSES TO THIS INCIDENT? IF SO IDENTIFY AND PROVIDE CONTACT INFORMATION.

WOULD AN ORAL INTERVIEW AID THIS INVESTIGATION? IF YES, PLEASE EXPLAIN:

ADD ANY STATEMENT YOU FEEL IS NECESSARY FOR US TO CONSIDER IN THIS INVESTIGATION.

REASON FOR THIS REQUEST: Investigation of citizen complaint.

DOCUMENTS ATTACHED: 293

MEMBER'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Date 12/01/04

Requested answers to questions regarding OCC investigation Case No. 184-04.

1. I was the buy officer in S.F. police report case number [REDACTED] with the listed suspects as [REDACTED] and [REDACTED] I interacted with [REDACTED] and [REDACTED] while buying suspected cocaine base from them near the north east corner of Jones and Ellis Streets. The details are listed in the police report. I walked away south bound on Jones Street across Ellis Street after making the buy and saw [REDACTED] running away from Officer Kasper #68 towards me briefly before I lost sight of them as the footchase continued west bound on Ellis Street.
2. I was initially contacted by [REDACTED] at about [REDACTED] Jones Street and he asked me what I needed. I told him I wanted "two solids for forty" (meaning that I wanted to buy 2 rocks of cocaine base for \$40). [REDACTED] then directed me to follow him south bound on Jones Street, pointed to an unidentified black female abult sitting on a fire hydrant and told me that she was his lookout and black queen, and then brought me to [REDACTED] near the north east corner of Jones and Ellis Streets. [REDACTED] told [REDACTED] that I wanted something for forty. [REDACTED] asked me if I was "five o", which I understood to mean police, and he lifted up my shirt while inspecting my waistband area. I then completed the buy with [REDACTED] while [REDACTED] stood next to us and then I walked away south bound on Jones Street.
3. I was not present while [REDACTED] was taken into custody nor did I use any force on [REDACTED] therefore I feel that questions #3, #3a, and #3b are not applicable to me.
4. Not to my knowledge.
5. [REDACTED]
6. [REDACTED] was transported to CO. J. prior to the 408 arriving on scene because a crowd had formed at the arrest scene, which made a possible officer safety issue for the officers present at the arrest scene due to the fact that this is a high crime area and it would be difficult for the officers to watch their surroundings while attending to [REDACTED]
7. I discussed the footchase and subsequent arrest of [REDACTED] and [REDACTED] with the other officers in order to get the facts as documented in the police report in order document what had happened due to the fact that I was not present during the arrest of [REDACTED]
8. Yes, the incident report I wrote Case [REDACTED] is accurate and truthful based on my personal knowledge.

I am not aware of any additional witnesses to the incident.

I do not believe an oral interview would aid this investigation.



Full In

SEE OCC Allegation CONTINUATION FORM

Two. Aulet 2/1/01



After you have completed this form, return it to the Office of Citizen Complaints by folding it along the lines below so that the address shows on the outside. Drop in any mailbox. NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES.

在您填妥本投訴書後，請沿邊緣摺妥（地址在外），投入郵箱，寄回「公民投訴組」。在美國境內寄出，不需郵費。

Después de completar la forma, doblarla sobre las líneas marcadas y depositarla en el buzón. No necesita estampilla (sello postal).

Matapos buuin ang pormang ito, tiklupin sa mga linyang nakatatak sa baba upang makita sa labas ang aming "address". Ihulog sa anumang buson o "mailbox". Hindi kailangan ng selyo kung ipadadala lang sa loob ng America.

OFFICES LOCATED AT:  
480 Second Street, Suite 100  
San Francisco, CA 94107



NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES

**BUSINESS REPLY MAIL**

FIRST CLASS MAIL PERMIT NO. 22978 SAN FRANCISCO, CA

POSTAGE WILL BE PAID BY ADDRESSEE

City and County of San Francisco  
OFFICE OF CITIZEN COMPLAINTS  
875 Stevenson Street, Room 125  
San Francisco, CA 94103-0917



Police Commission for the City and County of San Francisco  
**OFFICE OF CITIZEN COMPLAINTS**



~CITIZEN COMPLAINT FORM~

**INSTRUCTIONS FOR COMPLETION OF THE CITIZEN COMPLAINT FORM:**

Please answer questions in blocks 2, 3, 4, 5, 8, 11, 15, 17, 20, 21 & 22. Leave all other blocks blank unless you know the information requested. Please **print** all information in **English**. If you do not have a telephone number, enter a message number or the number of a neighbor, friend or relative in block 4. If witnesses are available, write their names, addresses and telephone numbers on a separate sheet of paper and attach it to your complaint. Do not write them on the complaint form. If you do not know the officers name or badge number, include a complete physical description in the narrative (22). **Print** your narrative. Explain what happened from beginning to end. Be specific as to the nature of your complaint against each officer. Include who, what, where, when and why. If you need additional space, use separate sheets of paper and attach them to the complaint. **YOUR STATEMENT MUST BE A TRUE AND ACCURATE ACCOUNT OF THE INCIDENT** to the best of your knowledge and belief, and **must be signed** by you in block 22. If you have questions or need help, please call the OCC at (415) 597-7711 between 8:00 a.m. and 5:00 p.m., or leave a message with our answering service after 5:00 p.m. You may also contact your local neighborhood center for help. Interpreters can be provided at no charge.

**填寫公民投訴書說明：**

請回答第 2、3、4、5、8、11、15、17、20、21 及 22 項問題。除非您知道我們所要求的資料，否則請將其各項留空。所有資料，務請以正楷填寫清楚。如果您沒有電話號碼，請在第 4 項填上有可能聯絡您的電話號碼，或鄰居、親戚、朋友的號碼。如果有證人，請用另一張紙寫上他們的姓名、地址及電話，和投訴書夾在一起；切勿寫在投訴書上。如果你不知道涉及事件的警務人員姓名或編號，請將該員的身體特徵，以正楷詳盡寫在第 22 項上。請清楚說明事件的過程，及投訴的類別，包括涉及何人、何事、何處、何時及何由。如您認為投訴書不夠您填寫，可以另紙填寫資料，夾在投訴書上。您應根據您所知道及所相信的事實填寫資料，必須真實及正確；填妥請在第 22 頁簽名。如有疑問或需要幫助，請在上午八時至下午五時，致電 (415) 597-7711「公民投訴組」，或在下午五時後，在該組的電話錄音機上留言。您亦可以與有免費翻譯員服務的「華埠建民中心」求助，電話 415-391-5099。

**INSTRUCCIONES PARA LLENAR EL FORMULARIO DE QUEJAS DE LOS CIUDADANOS:** Por favor conteste las preguntas de las casillas 2, 3, 4, 5, 8, 11, 15, 17, 20, 21 & 22. Deje sin contestar las demás preguntas a menos que sepa la información solicitada. El formulario debe ser contestado **en Inglés**. Si usted no tiene teléfono escriba en la casilla 4 el número de un servicio de mensajes, o el de un vecino, amigo o pariente. Escriba en una hoja separada los nombres, direcciones y teléfonos de los testigos (si los hay), y adjunte ésta información al formulario. En caso de que no conozca el nombre o número de insignia de los oficiales, incluya una descripción física completa (22). Describa los hechos en forma completa, sea específico. Incluya quien, que, donde, cuando y porque. Su declaración debe ser un recuento exacto y verdadero del incidente y debe estar firmada por usted (22). Para pedir información o solicitar ayuda visite nuestras oficinas locales o llámenos al número (415) 597-7711 de 8:00 AM - 5:00 PM. El servicio de interpretación es gratis. Formularios también pueden ser obtenidos en La Raza Information Center-- (415) 863-0764.

**PARAAN NG PAGSAGOT SA PORMANG ITO (CITIZEN COMPLAINT o REKLAMO NG MAMAMAYAN)** Mangyaring sagutin ang mga tanong sa bloke 2, 3, 4, 5, 8, 11, 15, 17, 20, 21, at 22. Kung wala kayo ng impormasyon hinihingi dito, paki-ibang blanko ang bloke hindi masagot. **Paki-Ilmbag ang lahat na sagot ninyo.** Kung wala kayong telepono, paki-sulat lang ang inyong "message number", o ang numero ng inyong kapit-bahay, kaibigan, o kamaganak. Kung mayroon kayong mga saksi o testigo, isulat sa ibang papel ang kanilang mga pangalan, mga tirahan, mga telepono at ikabit ito sa reklamo ninyo. Huwag gagamitin ang pormang ito. Kung hindi ninyo alam ang pangalan ng p... o ang numero ng kanyang tsapa, isama sa inyong salaysay ang hitsura at pagmumukha ng pulis. Ilmbag ang inyong salaysay. Liwanagin lahat ang nangyari magmula sa umpisa hanggang sa katapusan. Tiyakin o siguraduhin ang inyong sinusumbong o renireklamo. Sabihin o ilarawan kung sino, ano, saan, kailan at bakit sa pangyayari. Kung kulang ang pagsusulat dito gumamit ng ibang papel at ikabit ito sa sumbong ninyo. Sa inyong kaalaman at paniniwala, ang inilalahad ninyong nangyari ay dapat lubos na katotohanan at walang kamali-mali at kailangan ninyong pirmahan ang sumbong ito sa bloke bilang 22. Itanong sa amin kung alinman dito ang hindi maliwanag sa inyo. Kung kailangan ninyo ng tulong, paki-tawagan kami, OCC, telepono (415) 597-7711. Maaring tawagan din ninyo ang Philippines American Consul sa telepono (415) 626-0773 sa pagitan ng alas-otso ng umaga at alas-singko ng hapon o mag-iwan ng pahatid o "message" sa aming "answering service" paglampas ng alas-singko ng hapon.



COMPLAINANT: GRAHAM, THEODORE

DESCRIPTION:

Unnecessary Force (UF) - The off. used excessive force during the arrest. (68)

**OFFICE OF CITIZEN COMPLAINTS**

CITY AND COUNTY OF SAN FRANCISCO


**Kevin Allen**  
 Director
**PROOF OF SERVICE**
 TO: Commanding Officer / Officer in Command, ~~Central Station~~ *Narcotics*

RE: MEMBER RESPONSE FORM FOR OCC CASE # 184-04

FROM: J. Wechter, Investigator

DATE: November 22, 2004

MEMBER TO BE NOTIFIED: Off. Kahri Gill-Kehoe #1012 [REDACTED]

**COMMANDING OFFICER:** Sign this Proof of Service and serve the attached Member Response Form and any attachments to the named member when the member next reports to duty. If the member is designated as named, give the member a copy of the attached complaint. Witness members do not get a copy of the complaint, and none may be attached in that event. If the member is on D.P. or extended sick leave, but is medically able to complete the form, forward the Member Response Form to the member at his/her residence. The member must complete and return the Member Response Form to OCC no later than **December 13, 2004**. Once the member has been served return the original of the Proof of Service to OCC and retain the File Copy for your file. **If you are unable to serve the member you shall notify the OCC investigator by phone no later than (December 1, 2004).**

**COMMANDING OFFICER'S PROOF OF SERVICE:**
 Date received: 12/1/04  
 Date and Time served: 12.1.04 1209  
 Date returned to OCC: 12.1-04

Reason for failure to serve:

 [REDACTED] *Gr*  
 Sign \_\_\_\_\_ Star No.

**MEMBER'S ACKNOWLEDGMENT OF RECEIPT:** Your signature acknowledges receipt of the Member Response Form and the following attachments:

 X ☒ Complaint Form

☐ None

 [REDACTED] 1012 12/1/04 1200 hrs  
 Member's Signature Star No. Date and Time Notified



RECEIVED  
AT OCC

2004 DEC -9 P 2:42

**OFFICE OF CITIZEN COMPLAINTS  
MEMBER RESPONSE FORM**

TO: Off. Richard Valdez #1287

RE: OCC CASE No. 184-04

FROM: Inv. J. Wechter

COMPLAINANT: [REDACTED]

DATE: November 22, 2004

DATE OF OCCURRENCE: 2/20/04

RESPONSE DUE DATE: 12/13/04

REPORT/CITATION NO. [REDACTED]

The OCC is conducting an investigation into the complaint referenced above. In order to facilitate the investigation, you are to provide a separate answer to each of the specific questions listed on the reverse side of this form.

You are to answer truthfully, candidly and to the best of your ability. **Failure to answer all questions even under advice of counsel or representative may be a violation of Department General Orders 2.01, 2.04, and 2.08, all of which require cooperation in an OCC investigation.** Administratively compelled statements shall not be used against you in a criminal investigation or proceeding. Your statements shall only be used for administrative proceedings.

Because this investigation could result in punitive action, all of the rights enacted in the Public Safety Officers' Procedural Bill of Rights apply. Specifically:

1. You may seek assistance from the representative of your choice in completing this form.
2. You are specifically authorized to complete answers to these questions while on duty.
3. You have the right to keep a copy of this form.

**(OVER)**

ARE THERE ANY WITNESSES TO THIS INCIDENT? IF SO IDENTIFY AND PROVIDE CONTACT INFORMATION. *NO*

WOULD AN ORAL INTERVIEW AID THIS INVESTIGATION? IF YES, PLEASE EXPLAIN: *NO*

ADD ANY STATEMENT YOU FEEL IS NECESSARY FOR US TO CONSIDER IN THIS INVESTIGATION.

REASON FOR THIS REQUEST: Investigation of citizen complaint.

DOCUMENTS ATTACHED: 293

MEMBER'S SIGNATURE: \_\_\_\_\_

*1287*

DATE: *12-8-04*



OCC # 184-04

RICARDO VALDEA \*1287

NARCOTICS

- 1) I WAS PART OF THE ARREST TEAM.  
I ARRESTED [REDACTED] ON LONG ST. AFTER  
THE BUY OCCURRED
- 2) I ARRESTED [REDACTED]
- 3) I SAW [REDACTED] RUN TOWARDS ELLIS ST.  
WAS NOT ABLE TO SEE [REDACTED] ARREST  
BECAUSE I WAS WITH [REDACTED]
- 4) WAS NOT THERE
- 5) DO NOT KNOW, WAS NOT THERE
- 6) [REDACTED]
- 7) [REDACTED] WAS TRANSPORTED TO CO J. DUE  
TO THE FACT THAT A CROWD WAS GATHERING.  
'OFFICIAL SAFETY'
- 8) [REDACTED]
- 9) [REDACTED]
- 10) [REDACTED]
- 11) I DID NOT

**INFORMATION REQUESTED:** *(On a separate sheet of paper, please provide a separate response to each question.)*

1. Please describe your role, your location, and what you saw when Off. Gill-Kehoe had contact with complainant [REDACTED]

2. Please describe everything you did at the scene.

3. Please describe everything you saw complainant [REDACTED] do and say, and everything officers who interacted with and arrested [REDACTED] did and said at the scene.

4. Please describe, in as much detail as possible, all force you or other officers used arresting and handcuffing complainant [REDACTED] and all of [REDACTED] actions.

a) When did you arrive at the scene of [REDACTED] arrest, and what was happening when you arrived there.

b) Who handcuffed [REDACTED]?

5. Did Off. Kasper ever grab the complainant by the throat?

6. [REDACTED]

7. Why was complainant [REDACTED] transported to Co J before the 408 arrived on the scene?

8. [REDACTED]

9. [REDACTED]

10. [REDACTED]

11. Did you and other officers discuss what would be written in the incident report? If so, please describe what was said.





San Francisco Police Department  
Narcotics Division

(415) 970-3000 Office  
(415) 970-3048 Fax



# Fax

To: INV. J. NECHTER From: OFFICER MULLINS  
Fax: [REDACTED] Date: 12/23/04  
Phone: 970-3000  
# of pages including  
transmittal sheet: 3

☐ Urgent

☐ For Review

☐ Please Comment

☐ Please Reply

☐ As Requested

•Comments:

Page 2 OCC Case No. 184-04

Off. Ted Mullins #505

**INFORMATION REQUESTED:** *(On a separate sheet of paper, please provide a separate response to each question.)*

1. Please describe your role, your location, and what you saw when Off. Gill-Kehoe had contact with complainant [REDACTED]
2. Please describe everything you did at the scene.
3. Please describe everything you saw complainant [REDACTED] do and say, and everything officers who interacted with and arrested [REDACTED] did and said at the scene.
4. Please describe, in as much detail as possible, all force you or other officers used arresting and handcuffing complainant [REDACTED] and all of [REDACTED] actions.
  - a) When did you arrive at the scene of [REDACTED] arrest, and what was happening when you arrived there.
  - b) Who handcuffed [REDACTED]?

5. Did Off. Kasper ever grab the complainant by the throat?

6. [REDACTED]

7. Why was complainant [REDACTED] transported to Co J before the 408 arrived on the scene?

8. Did you and other officers discuss what would be written in the incident report? If so, please describe what was said.

ARE THERE ANY WITNESSES TO THIS INCIDENT? IF SO IDENTIFY AND PROVIDE CONTACT INFORMATION.

WOULD AN ORAL INTERVIEW AID THIS INVESTIGATION? IF YES, PLEASE EXPLAIN:

ADD ANY STATEMENT YOU FEEL IS NECESSARY FOR US TO CONSIDER IN THIS INVESTIGATION.

REASON FOR THIS REQUEST: Investigation of citizen complaint.

DOCUMENTS ATTACHED: 293

MEMBER'S SIGNATURE [REDACTED]

DATE: 12/03/04



OCC RESPONSE TO OCC CASE #184-04

FROM: OFFICER TED MULLINS #505

DATE: December 03, 2004

1. I was in an undercover buy officer capacity waiting, standing outside my vehicle in the area of Geary BL. / Jones ST. I saw Officer Gill-Kehoe walked up and approached a black male (who was later identified as [REDACTED]). I then saw Officer Gill-Kehoe and [REDACTED] walked up to another black male, who was later identified as [REDACTED]. Shortly after, I saw Officer Gill-Kehoe walking away. I then saw [REDACTED] running down Jones ST. being chased by other officers. [REDACTED] then turned unto Ellis ST. out of my view.
2. I then entered my vehicle and drove to the area where [REDACTED] was being detained.
3. A few minutes later I saw Officer Kasper, Officer Schaffer, among others walking with [REDACTED] in handcuff. Officer Kasper said something about been punched by [REDACTED] I don't know who handcuffed [REDACTED].
4. I did not see when [REDACTED] was put under arrest or handcuffed.
5. I did not see Officer Kasper grab anyone by their throat.
6. [REDACTED]
7. I recall several people forming in the area, they were becoming hostile to the police, yelling obscenities.
8. I have not talked to any officers regarding what was to be said in the report, neither did anyone consult with me.
9. I don't know of any witnesses to the incident, other than the officers, [REDACTED] and [REDACTED].
10. I don't believe I could aid this investigation any further.

**OFFICE OF CITIZEN COMPLAINTS**

CITY AND COUNTY OF SAN FRANCISCO


**Kevin Allen**  
 Director
**PROOF OF SERVICE**

TO: Commanding Officer / Officer in Command, Narcotics

RE: MEMBER RESPONSE FORM FOR OCC CASE # 184-04

FROM: J. Wechter, Investigator

DATE: November 22, 2004

MEMBER TO BE NOTIFIED: Off. Ted Mullins #505 [REDACTED]

**COMMANDING OFFICER:** Sign this Proof of Service and serve the attached Member Response Form and any attachments to the named member when the member next reports to duty. If the member is designated as named, give the member a copy of the attached complaint. Witness members do not get a copy of the complaint, and none may be attached in that event. If the member is on D.P. or extended sick leave, but is medically able to complete the form, forward the Member Response Form to the member at his/her residence. The member must complete and return the Member Response Form to OCC no later than **December 13, 2004**. Once the member has been served return the original of the Proof of Service to OCC and retain the File Copy for your file. **If you are unable to serve the member you shall notify the OCC investigator by phone no later than (December 1, 2004).**

**COMMANDING OFFICER'S PROOF OF SERVICE:**
 Date received: 11-29-04  
 Date and Time served: 11-29-04 2250  
 Date returned to OCC: 11-30-04

Reason for failure to serve:

Signature

Star No.

**MEMBER'S ACKNOWLEDGMENT OF RECEIPT:** Your signature acknowledges receipt of the Member Response Form and the following attachments:

X ☐ Complaint Form☐ None

Member's Signature

Star No.

Date and Time Notified



**INFORMATION REQUESTED:** *(On a separate sheet of paper, please provide a separate response to each question.)*

1. Please describe your role, your location, and what you saw when Off. Gill-Kehoe had contact with complainant [REDACTED]

2. Please describe everything you did at the scene.

3. Please describe everything you saw complainant [REDACTED] do and say, and everything officers who interacted with and arrested [REDACTED] did and said at the scene.

4. Please describe, in as much detail as possible, all force you or other officers used arresting and handcuffing complainant [REDACTED], and all of [REDACTED] actions.

a) When did you arrive at the scene of [REDACTED] arrest, and what was happening when you arrived there.

b) Who handcuffed [REDACTED]?

5. Did Off. Kasper ever grab the complainant by the throat?

6. [REDACTED]

7. Why was complainant [REDACTED] transported to Co J before the 408 arrived on the scene?

8. [REDACTED]

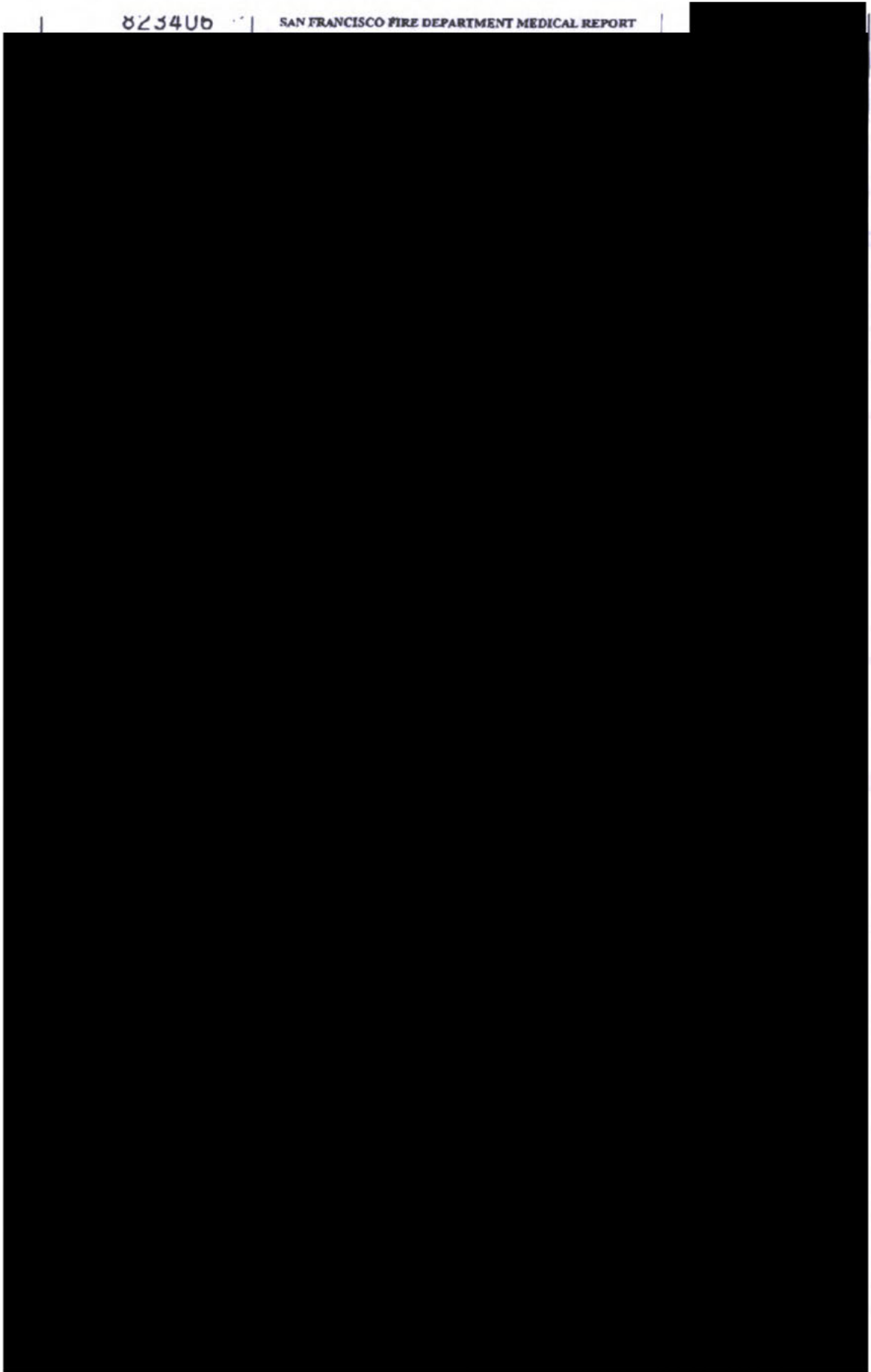
9. [REDACTED]

10. [REDACTED]

11. Did you and other officers discuss what would be written in the incident report? If so, please describe what was said.

823406

SAN FRANCISCO FIRE DEPARTMENT MEDICAL REPORT



SFDPA - 184-04 - 000056

FROM

4-26-2004 9:21AM



# FAX

Date 4-26-04  
Number of pages including cover sheet 2

To: DAVID AULET  
Name \_\_\_\_\_  
Company \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_  
Fax Phone \_\_\_\_\_  
CC: \_\_\_\_\_

From: \_\_\_\_\_  
Name JOSEPH MARESCHI  
Company SFFD EMS DIVISION  
Address 1415 Evans Avenue  
Suite 2A  
San Francisco, Ca 94124  
Phone 415 920-2956  
Fax Phone 415 920-2963

## REMARKS:

☐ Urgent ☐ For your review ☐ Reply ASAP ☐ Please comment

OCC # 184-04

CONFIDENTIAL: The information contained in this facsimile (fax) message is PRIVILEGED and CONFIDENTIAL material of the San Francisco Fire Department, may contain Protected Health-Care Information, and is intended ONLY for the use of the addressee. If you are not the intended recipient, any disclosure, copying, use or distribution of the information contained in pages of this transmission is strictly prohibited and would be in violation of Federal HIPAA Regulations. If you have received this communication in error, please contact us immediately. TEL: SFDPA - 184-04 - 000057

FROM 4155615929

4-26-2004 9:20AM

**OFFICE OF CITIZEN COMPLAINTS**

CITY AND COUNTY OF SAN FRANCISCO

01534357

Kevin Allen  
Director

San Francisco General Hospital  
Attention: Medical Records  
1001 Potrero Avenue, Room 2B-5  
San Francisco, CA 94110

RE: OCC Case #184-04

DATE: April 23, 2004

To whom it may concern:

Per the attached medical release, I request that you send a copy of the medical records of [REDACTED] for treatment received beginning on February 20, 2004, and any related subsequent treatment received.

Please send this information to my attention at the above address. Thank you for your cooperation in this matter. Should there be any questions, please do not hesitate to contact me at (415) 597-7729.

Sincerely,

David Aulet  
INVESTIGATOR

COPIED b

APR 29 2004

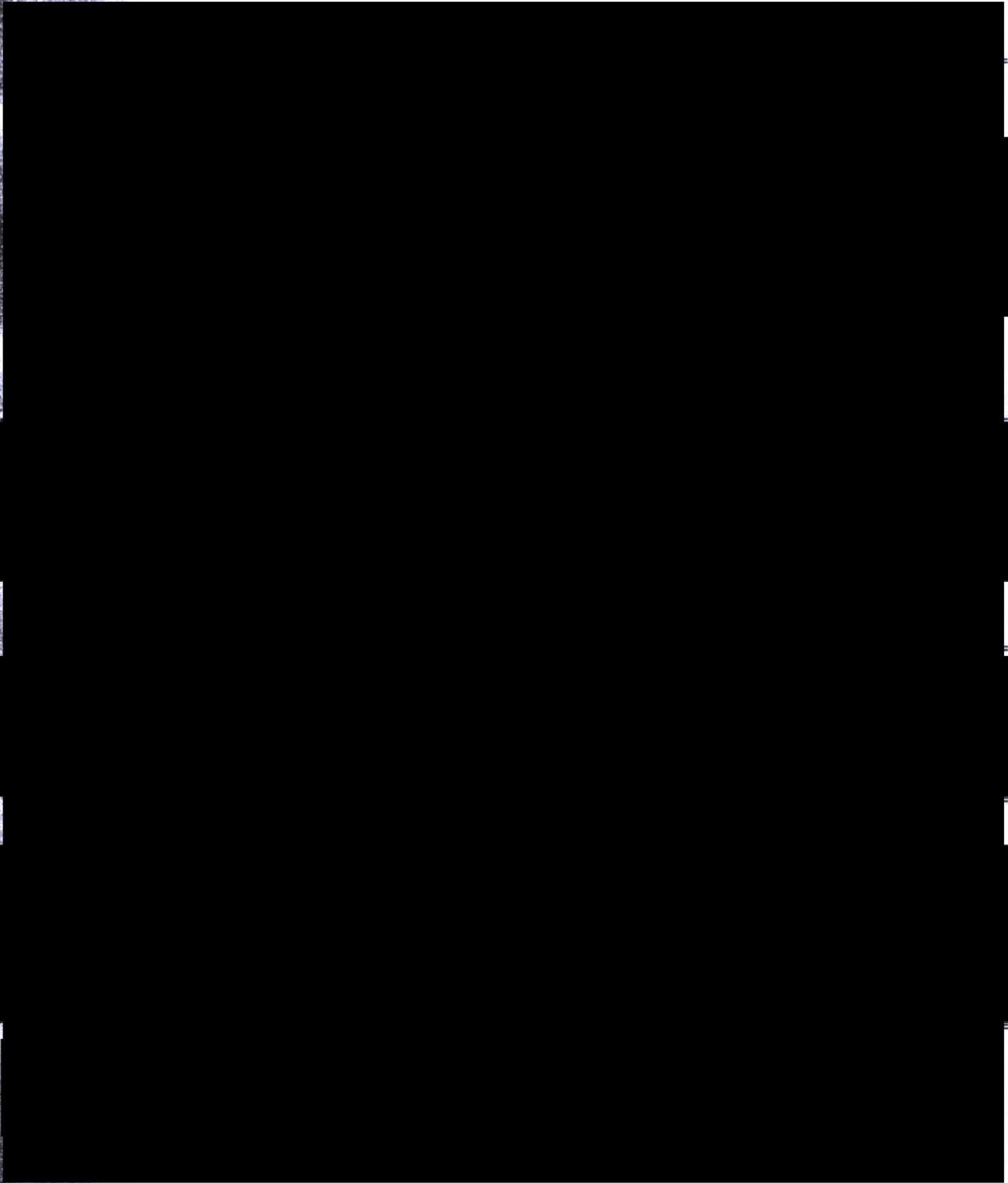
FOTO-MED COLLECTION

**RECEIVED**

APR 27 2004

SAN FRANCISCO GENERAL HOSPITAL  
HEALTH INFORMATION SERVICES







Community Health Network  
San Francisco General Hospital  
Medical Center  
(SFGHMC)

Inpatient / Outpatient / Emergency  
Terms and Conditions of Admission

Patient ID / Addressograph

THE UNDERSIGNED CERTIFIES THAT HE/SHE HAS READ THE FOREGOING,  
AND UPON REQUEST, RECEIVED A COPY THEREOF AS THE PATIENT, OR  
DULY AUTHORIZED BY OR ON BEHALF OF THE PATIENT TO EXECUTE THE  
ABOVE AND ACCEPT ITS TERMS.

Financial Responsibility Agreement by Person Other than the Patient or the Patient's Legal Representative:

**Advance Directives:** SFGHMC honors patients' wishes regarding treatment decisions whenever possible. SFGHMC encourages patients to communicate their health care preferences to their health care providers and to those who may have to make health care decisions for patients who become incapacitated. SFGHMC does not discriminate against an individual based on whether or not the individual has executed an Advance Directive. If an Advance Directive has been executed, the undersigned is responsible for providing a copy of the Advance Directive to SFGHMC for inclusion in the medical record.

Do you have an Advance Directive for Health Care?

UPON REQUEST, A COPY OF THIS DOCUMENT SHOULD BE GIVEN TO THE PATIENT AND THE SIGNATOR.

Original - Medical Record Copy



USE PAT

COMMUNITY HEALTH NETWORK  
SAN FRANCISCO GENERAL HOSPITAL MEDICAL CENTER  
EMERGENCY DEPARTMENT

Zone \_\_\_\_\_ Room \_\_\_\_\_ Time \_\_\_\_\_



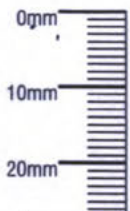
Community Health Network  
San Francisco General Hospital  
Medical Center

EMERGENCY DEPARTMENT

MEDICAL SCREENING EXAM RECORD

[Redacted content]





Community Health Network  
San Francisco General Hospital Medical Center  
Emergency Department

**EMERGENCY NURSING CARE FLOW RECORD**

Name

DOB

MRN

PCP

Patient ID / Addressograph

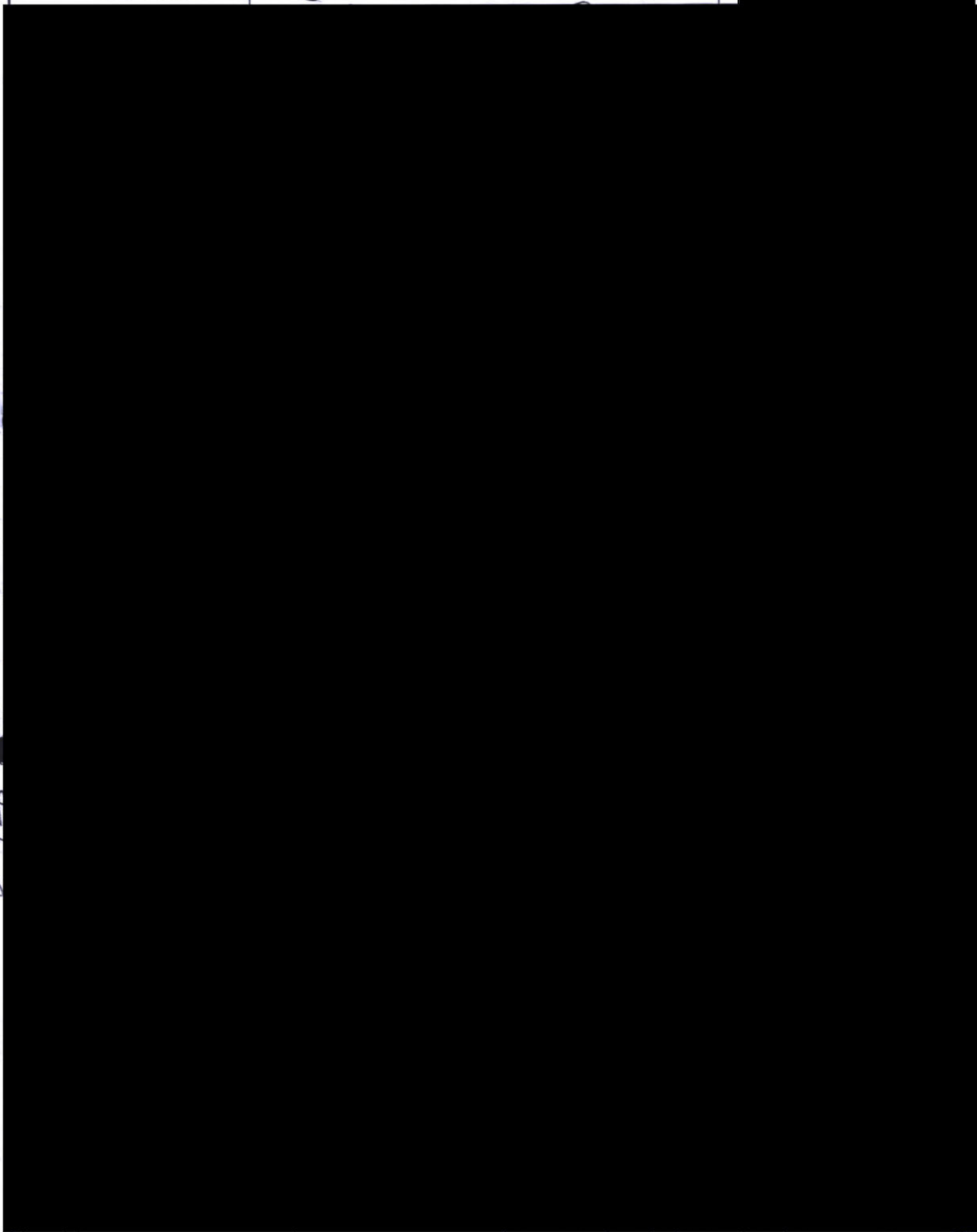
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823406

SAN FRANCISCO FIRE DEPARTMENT MEDICAL REPORT



12-128







**COMMUNITY HEALTH NETWORK OF SAN FRANCISCO  
OUTPATIENT CONSULTATION REQUEST**

CONSULT APPT. DATE \_\_\_\_\_ APPT. TIME \_\_\_\_\_

[Redacted content]

White Copy - Referring Provider • Yellow Copy - Clinic Use • Pink Copy - Patient

SFDPA - 184-04 - 000067

**Community Health Network**  
**San Francisco General Hospital**  
**Medical Center**

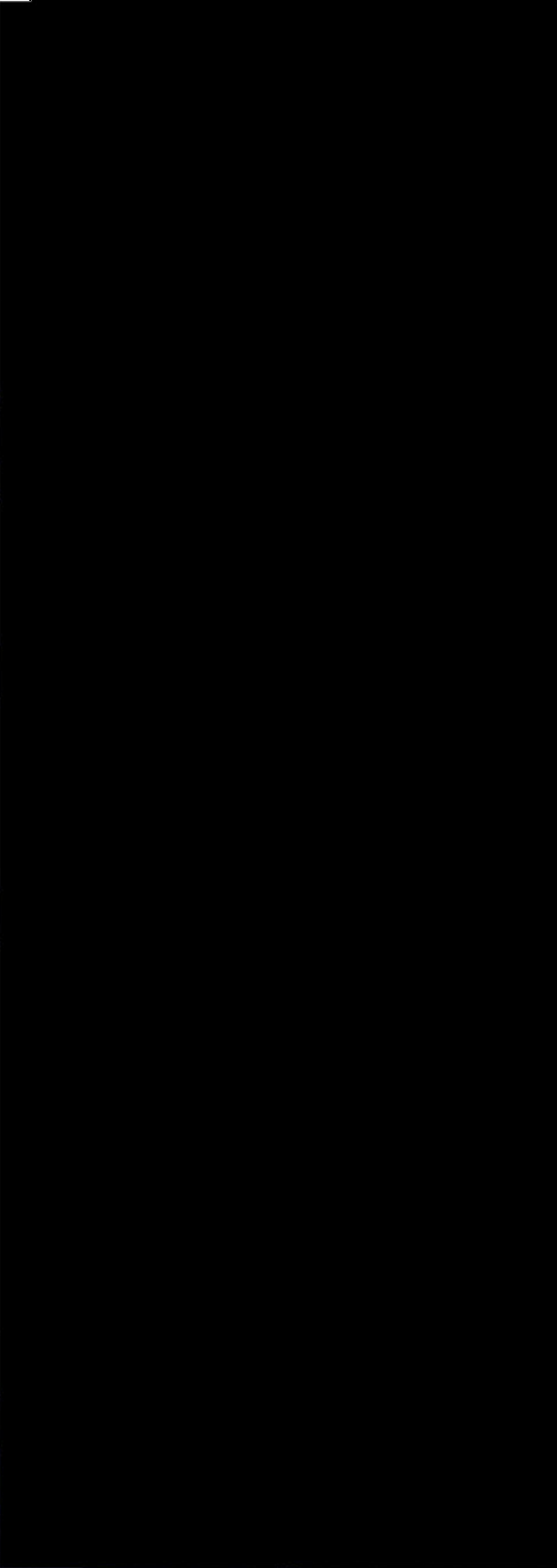
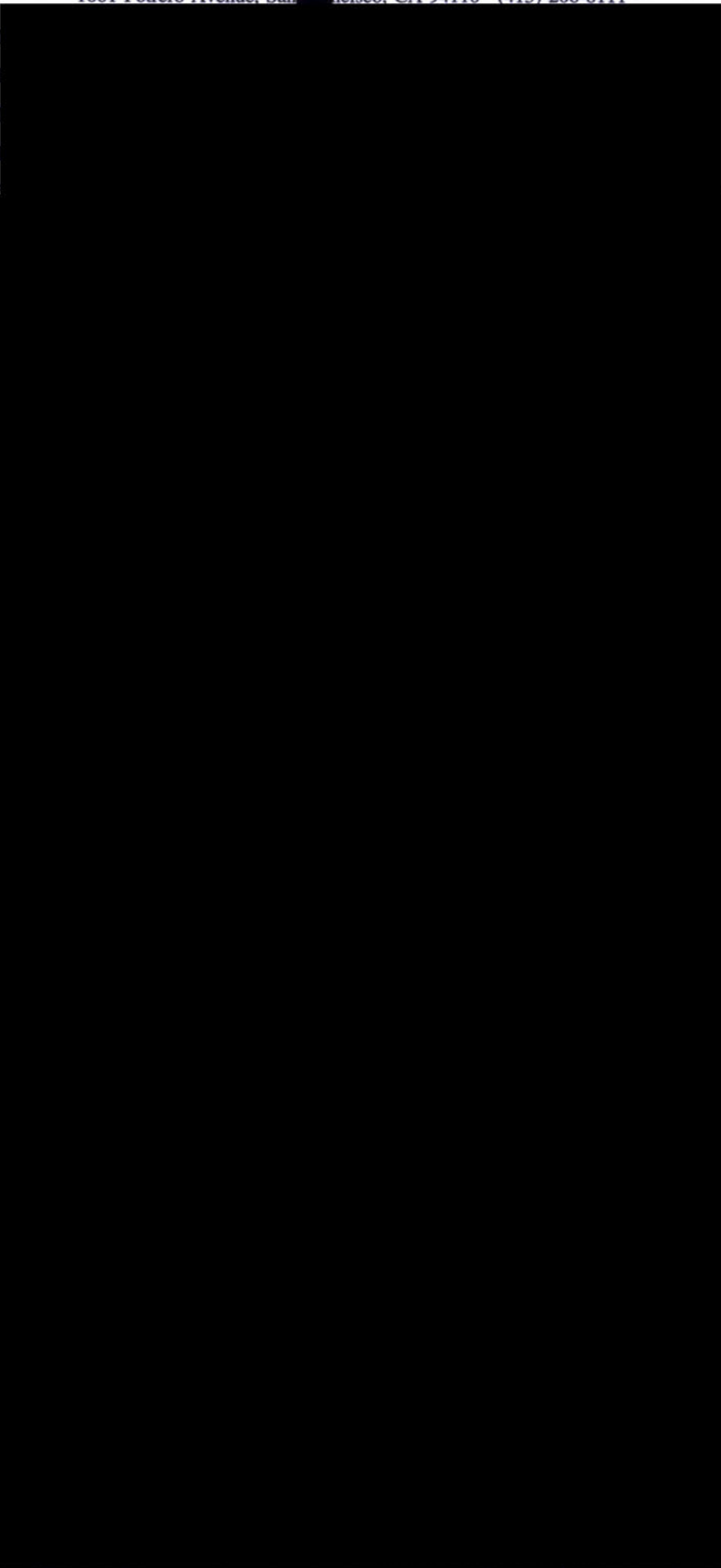
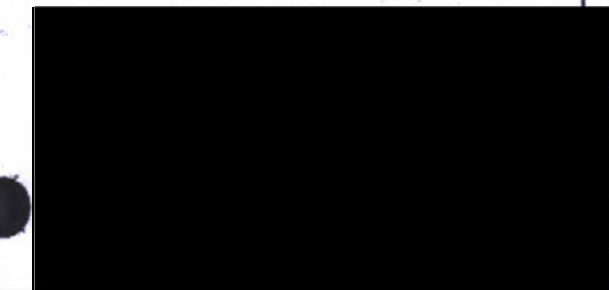
**EMERGENCY DEPARTMENT**

**PHYSICIAN ORDERS**



**EMERGENCY DEPARTMENT (ED)**

1001 Potrero Avenue, San Francisco, CA 94110 (415) 206-8111



Community Health Network of San Francisco

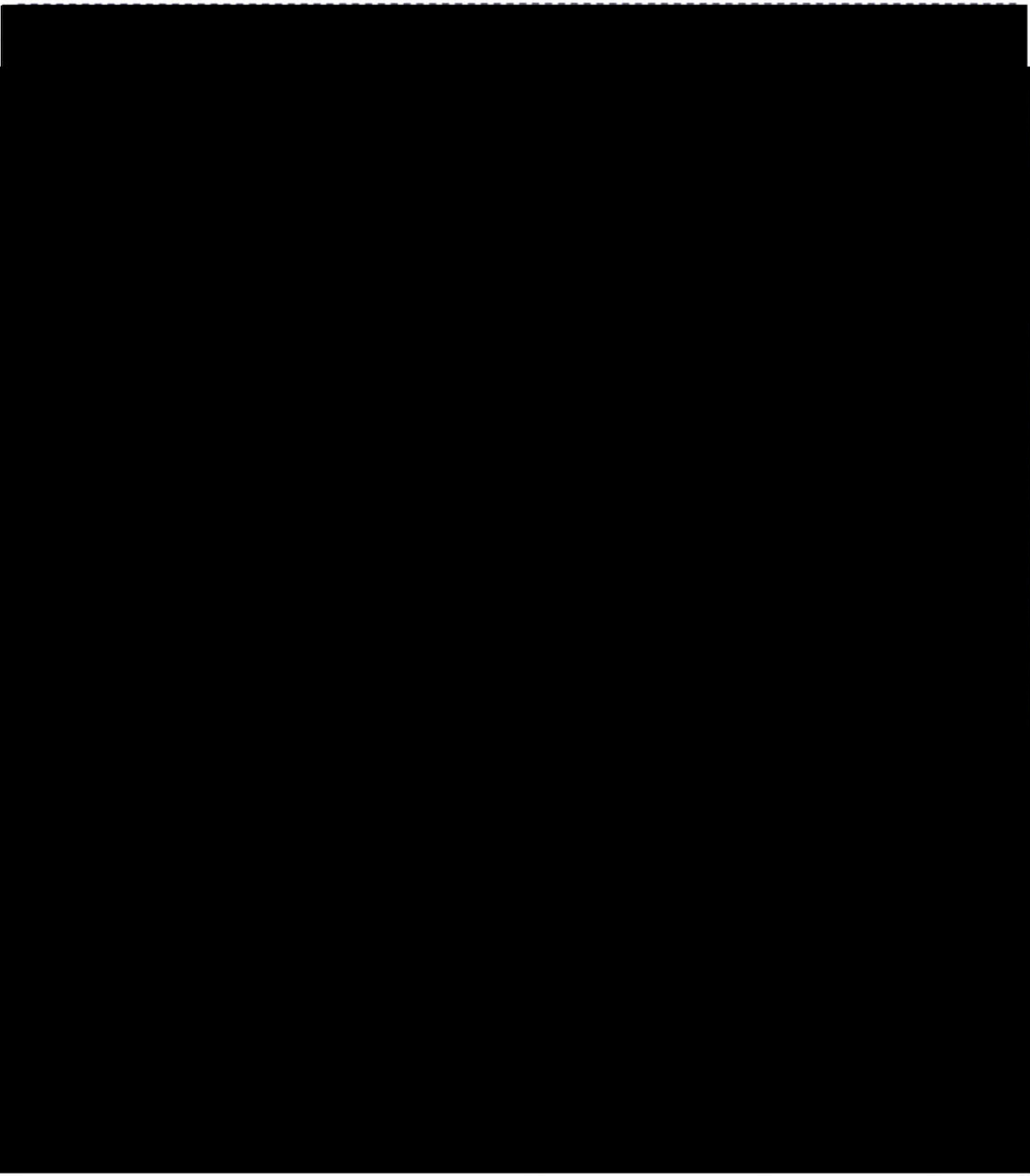
SAN FRANCISCO GENERAL HOSPITAL MEDICAL C  
SAN FRANCISCO GENERAL HOSPITAL  
1001 POTRERO AVE  
SAN FRANCISCO , CA 94110

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Community Health Network of San Francisco

SAN FRANCISCO GENERAL HOSPITAL MEDICAL C  
SAN FRANCISCO GENERAL HOSPITAL  
1001 POTRERO AVE  
SAN FRANCISCO , CA 94110



Community Health Network of San Francisco

SAN FRANCISCO GENERAL HOSPITAL MEDICAL C  
SAN FRANCISCO GENERAL HOSPITAL  
1001 POTRERO AVE  
SAN FRANCISCO , CA 94110

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# INTAKE CHECKLIST

CASE # 184-04

COMPLAINANT [REDACTED]

## PHASE I (first ten days)

	Done	N/A	Notes
A. CASE RECEIVED	✓		
1. Log into book/database	✓		
B. LOCATE AND INTERVIEW COMPLAINANT	✓		Pending interview
1. Medical release signed	✓		
2. Obtain specific contact info	✓		
3. Juvenile Consent form signed	✓		
4. 148.6 signed or taped	✓		
5. Photograph injuries	✓		Request Diskette Prints <del>not done</del> # Comp April 25/04
6. Photo spread	✓		
7. Complete 293	✓		
C. CASE CHRONOLOGY			
1. Summarize interviews/evidence in CWS	✓		
2. Record investigative steps in CWS	✓		
D. COMPUTER INFORMATION			
1. Run CAD, QCH, QUH	✓		
2. DMV, QALL, QIR, QPRL, QLAB, QCA	✓		
3. Run PS or Roster	✓		
4. Other QCF/cart no; Q NAR	✓		
E. ORDER DOCUMENTS			
1. Obtain copy of IR	✓		
2. Obtain communications tape	✓		to dot
3. Citations ordered	✓		SFGH
4. Medical records	✓		
5. Arrest card	✓		
6. S/W (affidavit), UOF log, Tow Inventory	✓		pending from NARS
7. 849(b), Strip Search Auth., Juvenile Log, Arrest	✓		pending release
8. Log, Paramedic Records	✓		
9. Housing card	✓		
10. Other	✓		
F. IDENTIFY WITNESSES & START WITNESS LIST	✓		wit @ CDC - call hotline
1. Obtain specific contact info	✓		
G. DRAFT ALLEGATIONS	✓		
H. FINALIZE NARRATIVE	✓		
I. START TAPED INTERVIEW LOG	✓		
J. REVIEW GO'S, RULES, HS/WI/PC/DB/MPC/ COPWARE	✓		
K. PREPARE CASE MGMNT. DOC. (see reverse)	✓		

## PHASE II

	Done	N/A	Notes
A. SENT IN FOR INTAKE REVIEW			
B. INV PLAN/ALLEGATIONS APPROVED			
C. ASSIGN WEIGHT			
D. COPY 293			
1. Copies sent to Admin			
2. Copies mailed to COMP			

(OVER)

SFDPA - 184-04 - 000074

04-06-04  
08:33

Tiburon, Inc.

UNIT HISTORY DETAIL FOR 5N52

04-06-04

SAN FRANCISCO POLICE

08:36

\*\*\*\*\*

ON DUTY: 12:00:03 02/20/04 DAREA: UN CONTROL: UN MID: FK:  
OFF DUTY: 22:00:01 Narcotics Division

ID # 1 [REDACTED] GILL-KEHOE KAHRI D

12:00:03 SLON ON-DUTY ID: [REDACTED] NAME: GILL-KEHOE KAHRI D/1012 BEAT: UN



Tiburon, Inc.

UNIT HISTORY DETAIL FOR 5N55

04-06-04

SAN FRANCISCO POLICE

08:38

\*\*\*\*\*

ON DUTY: 12:00:06 02/20/04 DAREA: UN CONTROL: UN MID: FK:  
OFF DUTY: 22:00:03 Narcotics Division

RADIO: 1: 00701132

ID # 1 [REDACTED] KASPER JON M

12:00:06 SLON ON-DUTY ID:[REDACTED] NAME:KASPER JON M/0068 BEAT:UN RADIO:00701132

Tiburon, Inc.

UNIT HISTORY DETAIL FOR 5N57

04-06-04

SAN FRANCISCO POLICE

08:40

\*\*\*\*\*

ON DUTY: 12:00:06 02/20/04 DAREA: UN CONTROL: UN MID: FK:  
OFF DUTY: 22:00:03 Narcotics Division

RADIO: 1: 00701203

ID # 1 [REDACTED] SCHAFFER BRIAN E

12:00:06 SLON ON-DUTY ID:[REDACTED] NAME:SCHAFFER BRIAN E/1749 BEAT:UN  
RADIO:00701203

Tiburon, Inc.

UNIT HISTORY DETAIL FOR 5N58

04-06-04

SAN FRANCISCO POLICE

08:40

\*\*\*\*\*

ON DUTY: 12:00:06 02/20/04 DAREA: UN CONTROL: UN MID: FK:  
OFF DUTY: 22:00:03 Narcotics Division

RADIO: 1: 00701144

ID # 1 [REDACTED] VALDEZ RICARDO H

12:00:06 SLON ON-DUTY ID: [REDACTED] NAME: VALDEZ RICARDO H/1287 BEAT: UN  
RADIO: 00701144

16:40:45 DP01 BACK-ENR S040512393 C/ARR JONES ST/ELLIS ST, SF  
20:06:48 DP01 CLEAR

OPERATOR ASSIGNMENTS: DP01 [REDACTED]  
AS OF 20:06:48: DP01 [REDACTED]



Tiburon, Inc.

UNIT HISTORY DETAIL FOR 5N51

04-06-04

SAN FRANCISCO POLICE

08:47

\*\*\*\*\*

ON DUTY: 12:00:03 02/20/04 DAREA: UN CONTROL: UN MID: FK:  
OFF DUTY: 22:00:01 Narcotics Division

RADIO: 1: 00701124

ID # 1 [REDACTED] DOSS ROBERT M

12:00:03 SLON ON-DUTY ID: [REDACTED] NAME: DOSS ROBERT M/1566 BEAT: UN RADIO: 00701124

16:38:03 1124 EMERGNCY 1124

16:38:08 1124 EMERGNCY 1124

16:39:26 DP04 ON-VIEW S040512393 C/ARR JONES ST/ELLIS ST, CITIZEN KNOCKED DWN  
BY UNITS -- MAY 408 -- C/1 -- 1023 ON 408 -- WILL CHECK  
W/ CITIZEN

16:40:00 1124 EMERGNCY 1124

16:40:26 1124 EMERGNCY 1124

16:40:56 DP04 MISC 1022 408 -- CITIZEN WALKED AWAY

16:40:59 1124 EMERGNCY 1124

16:42:56 DP01 MISC 450 ELLIS...

16:43:55 1124 EMERGNCY 1124

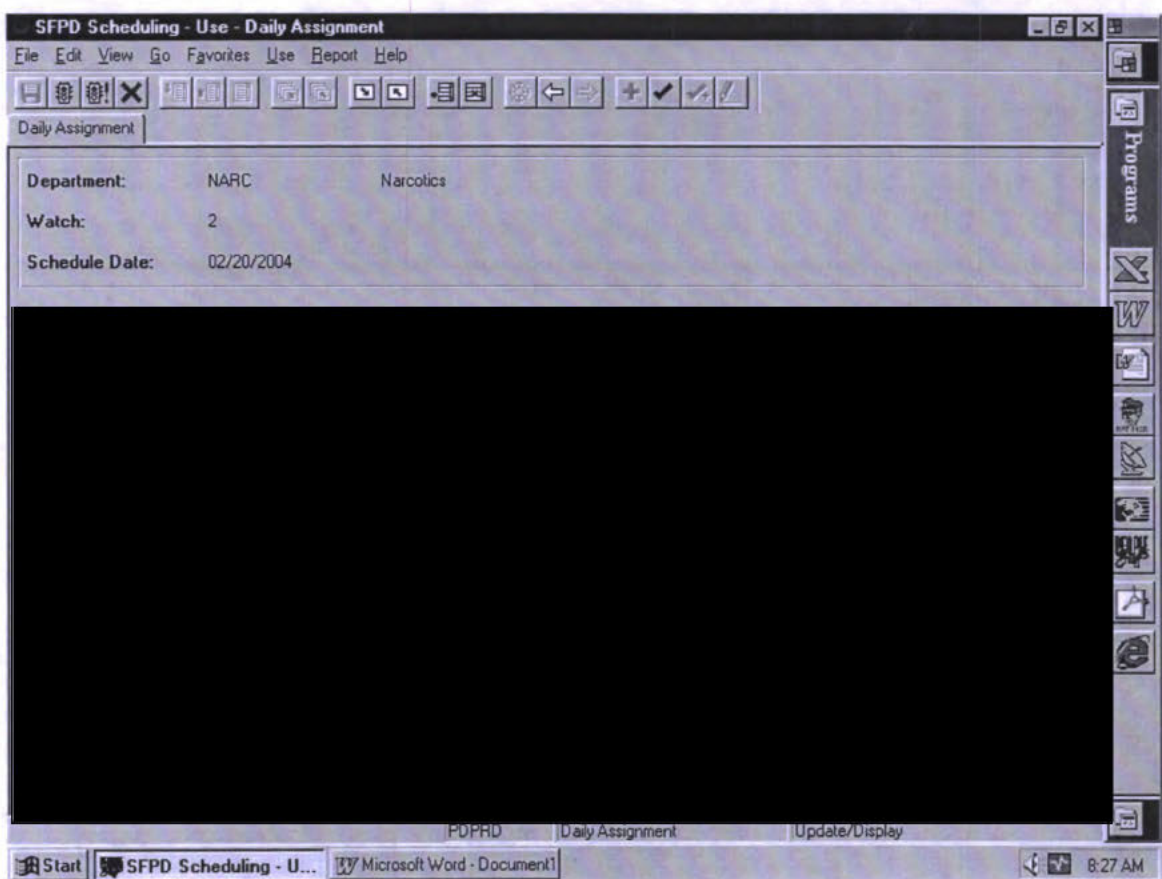
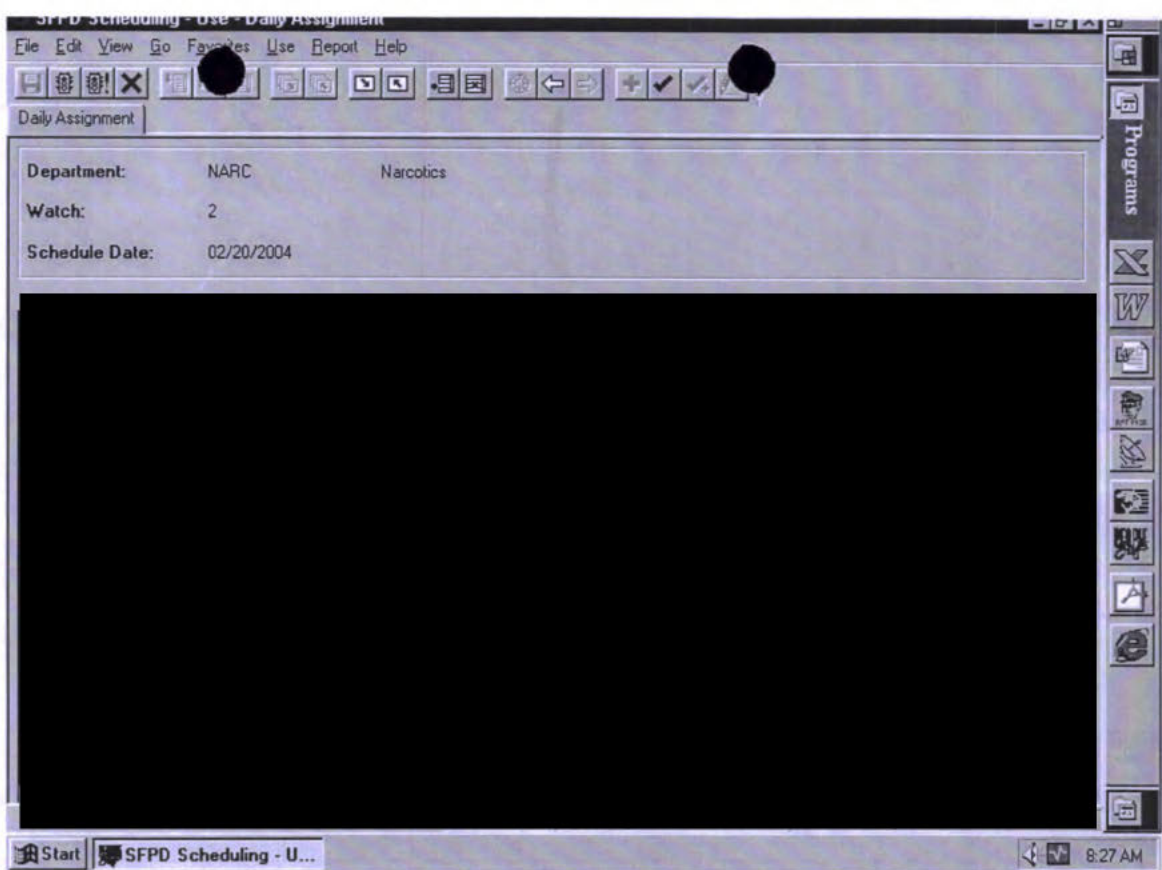
20:07:09 DP01 CLEAR ARR

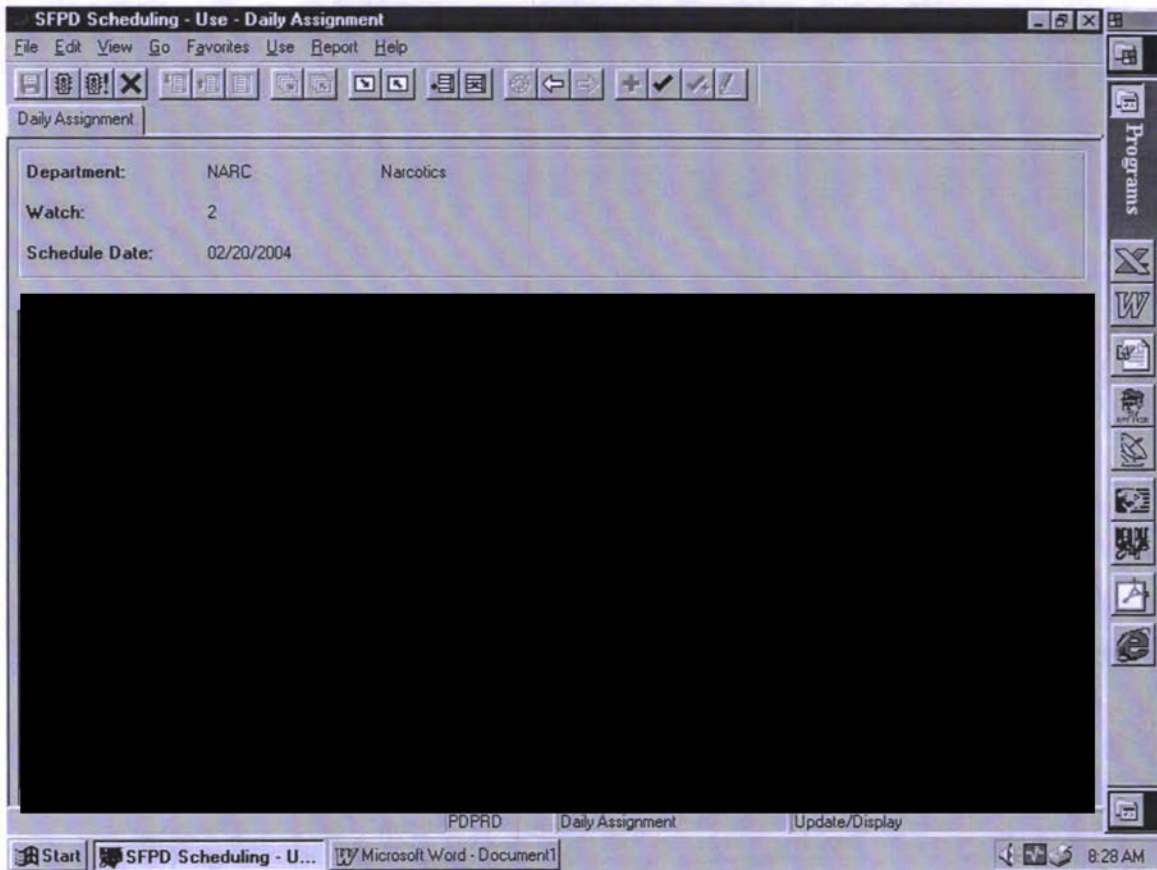
OPERATOR ASSIGNMENTS: 1124 5N51

DP04 [REDACTED]

DP01 [REDACTED]

AS OF 20:07:09: DP01 [REDACTED]







Fill In

OFFICE OF CITIZEN COMPLAINTS - USE BLACK INK ONLY!

1 Day, Date & Time Complaint Received  
Thursday 4-1-04  
Complaint Against: Personnel ☒ Policy ☐ Procedure ☐  
How Received: Person ☐ Phone ☐ Letter ☐ SFPD ☐ Mail-In ☒ Other ☐ (specify)

2 Primary Complainant: ☐ Co-Complainant  
Last Name First Name Middle Initial  
HOME ADDRESS: Street Apartment  
City State Zip  
WORK ADDRESS: Street Apartment  
City State Zip

3 Personal Information  
Age: 37 Date of Birth:   
Sex: MALE  
Ethnicity: AFRICAN AMERICAN  
Occupation: ACCOUNT EXECUTIVE

4 Telephone Numbers:  
Home:   
Work: ( )

5 Location of Occurrence:  
ON ELLIS BETWEEN JONES AND LEAVENWORTH

6 Day, Date, & Time Of Occurrence: A.M. (P.M.)  
FEB 20, 2004 FRIDAY 4:00pm (Circle one)

7 Type of Place  
STREET, CAR, HOSPITAL

8 SECONDARY COMPLAINANT? Yes ☐ No ☒ Witnesses? Yes ☒ No ☐ (If "Yes", attach separate sheet of paper.)  
Taped Interview? Yes ☐ No ☐ Criminal Case Pending in Relation to this matter? Yes ☒ No ☐

9 Injuries Claimed? Yes ☒ No ☐ Injuries Visible? Yes ☐ No ☒ Drug/Alcohol Related? Yes ☒ No ☐

10 Photos Taken? Yes ☐ No ☐ By: Photo Lab ☐ O.C.C. ☐ Other:

11 Type of Injury: Medical Release Signed? Yes ☐ No ☐

12 Activity	13 Type	14 DISP.	15 Uniform Yes No	16 Rank	17 Member's Name & Star Number	18 Unit	19 Svc	20 Sex	21 Eth
			X	Q2	JON KASPER 68	SN74		M	1

22 NARRATIVE OF INCIDENT: FEB 20, 2004 UPON LEAVING THE CORNER OF OFARRELL, I WAS APPROACHED BY S.F. P.D. NARC ASK ME CAN HE SCORE FIFTY DOLLARS OF CRACK. I SUGGESTED HE GIVE ME THE MONEY. HE SAID NO. I KEPT WALKING DOWN JONES TOWARD ELLIS, AND SO DID HE. AS I CROSSED ELLIS AN UNKNOWN MAN ASKED THE NARC WHAT HE WANTED AND DEMAND THE MONEY, THE NARC DARTED TO OPPOSITE SIDE OF JONES. I OBSERVE THE UNKNOWN <sup>MAN</sup> FROWN THE NARC ACROSS JONES, THE UNKNOWN MAN SPoke TO ANOTHER INDIVIDUAL. THE NARC AND UNKNOWN MAN WALKED BACK TOWARDS ME AND MADE TRANSACTION. POLICE OFF. KASPER <sup>WE</sup> JUMPED OUT UNMARKED CAR AND LUNGED AT ME, I FLED DOWN ELLIS ST TOWARD LEAVENWORTH. I FELL SLIP IN MY BEHIND/BOTTOM, OFF. KASPER <sup>OR</sup> FINALLY CAUGHT UP, TACKLED ME PUT HIS LEFT HAND AROUND MY THROAT AND SAID WHILE PUNCHING ME IN THE EYE WITH SHINY OBJECT. I WAS PUT IN POLICE CAR. <sup>HE</sup> HUMMED ME IN THE RIBS WITH PRT ON THE WAY TO POLICE STATION. PARAMEDICS CAME TOOK BLOOD PRESSURE AND SAID I SHOULD BE TAKEN TO GEN. HOSP. -   
TOOK ME TO SSO RAYMANT, THE MEDICAL PERSON SAID WE CAN RECEIVE HIM BECAUSE PARAMEDICS SIGN FROM STATING MUST GO TO GEN. HOSP., ALL THREE OFFICERS WERE IN RATE AT ME IN CAR TALKING ABOUT SHOOTING ME IN THE HEAD THROWING ME OFF A BRIDGE. WHILE IN HOSPITAL ALL THREE OFFICERS, <sup>THEY</sup> INSULTED ME VERBALLY AS WELL AS TELLING UNKNOWN MEDICAL STAFF I AM A RAPIST TO DEMEAN AND HUMILIATE ME. WHILE FEELING DIZZY ON SEVERAL OCCASIONS I WAS DRAGGED AND TOLD TO STOP FALKING BY OFF. SCHAFFEL 1744. UPON LEAVING HOSPITAL OFF. VALDEZ PUSHED MY HEAD UNTO ROOF AS I TRIED TO ENTER VEHICLE. ON NUMEROUS TIMES I HEARD ALL OFFICERS AGREE TO WHAT THE OTHERS WERE <sup>SAID</sup> REPORT WOULD PUT IN REPORT. (OVER FOR ALLEGATIONS)

(State law passed in 1995 mandates that the following statement be provided to, read and signed by persons filing complaints. The OCC encourages the filing of a complaint by anyone who believes he or she is a victim or a witness of improper police conduct or policies.)

ACKNOWLEDGEMENT OF COMPLAINANT (148.6 P.C.)

YOU HAVE THE RIGHT TO MAKE A COMPLAINT AGAINST A POLICE OFFICER FOR ANY IMPROPER POLICE CONDUCT. CALIFORNIA LAW REQUIRES THIS AGENCY TO HAVE A PROCEDURE TO INVESTIGATE CITIZENS' COMPLAINTS. YOU HAVE A RIGHT TO A WRITTEN DESCRIPTION OF THIS PROCEDURE. THIS AGENCY MAY FIND AFTER INVESTIGATION THAT THERE IS NOT ENOUGH EVIDENCE TO WARRANT ACTION ON YOUR COMPLAINT; EVEN IF THAT IS THE CASE, YOU HAVE THE RIGHT TO MAKE THE COMPLAINT AND HAVE IT INVESTIGATED IF YOU BELIEVE AN OFFICER BEHAVED IMPROPERLY. CITIZEN COMPLAINTS AND ANY REPORTS OR FINDINGS RELATING TO COMPLAINTS MUST BE RETAINED FOR AT LEAST FIVE YEARS. IT IS AGAINST THE LAW TO MAKE A COMPLAINT THAT YOU KNOW TO BE FALSE. IF YOU MAKE A COMPLAINT AGAINST AN OFFICER KNOWING THAT IT IS FALSE, YOU CAN BE PROSECUTED ON A MISDEMEANOR CHARGE.

☒ I HAVE READ AND UNDERSTOOD THE ABOVE STATEMENT. ☐ THE ACKNOWLEDGMENT HAS BEEN READ TO THE COMPLAINANT.

Taken By (Name/Unit)/Date: OCC  
INV. David Aulet  
Closure Approval/Date:   
Inv. Aulet 4/1/04



After you have completed this form, return it to the Office of Citizen Complaints by folding it along the lines below so that the address shows on the outside. Drop in any mailbox. NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES.

在您填妥本投訴書後，請沿摺線摺妥（地址在外），投入郵箱，寄回「公民投訴組」。在美國境內寄出，不需郵費。

Despues de completar la forma, doblarla sobre las lineas marcadas y depositarla en el buzón. No necesita estampilla (sello postal).

Matapos buuin ang pormang ito, tikluhin sa mga linyang nakatatak sa baba upang makita sa labas ang aming "address". Ihulog sa anumang buson o "mailbox". Hindi kailangan ng selo kung ipadadala lang sa loob ng America.

OFFICES LOCATED AT:  
480 Second Street, Suite 100  
San Francisco, CA 94107

NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES

**BUSINESS REPLY MAIL**  
FIRST CLASS MAIL PERMIT NO. 22978 SAN FRANCISCO, CA

POSTAGE WILL BE PAID BY ADDRESSEE

City and County of San Francisco  
**OFFICE OF CITIZEN COMPLAINTS**  
875 Stevenson Street, Room 125  
San Francisco, CA 94103-8017

THIS COMPLAINT IS OF:

[Redacted area for complaint details]



# Police Commission for the City and County of San Francisco OFFICE OF CITIZEN COMPLAINTS



## ~CITIZEN COMPLAINT FORM~

### INSTRUCTIONS FOR COMPLETION OF THE CITIZEN COMPLAINT FORM:

Please answer questions in blocks 2, 3, 4, 5, 8, 11, 15, 17, 20, 21 & 22. Leave all other blocks blank unless you know the information requested. Please **print** all information in **English**. If you do not have a telephone number, enter a message number or the number of a neighbor, friend or relative in block 4. If witnesses are available, write their names, addresses and telephone numbers on a separate sheet of paper and attach it to your complaint. Do not write them on the complaint form. If you do not know the officers name or badge number, include a complete physical description in the narrative (22). **Print** your narrative. Explain what happened from beginning to end. Be specific as to the nature of your complaint against each officer. Include who, what, where, when and why. If you need additional space, use separate sheets of paper and attach them to the complaint. **YOUR STATEMENT MUST BE A TRUE AND ACCURATE ACCOUNT OF THE INCIDENT** to the best of your knowledge and belief, and **must be signed** by you in block 22. If you have questions or need help, please call the OCC at (415) 597-7711 between 8:00 a.m. and 5:00 p.m., or leave a message with our answering service after 5:00 p.m. You may also contact your local neighborhood center for help. Interpreters can be provided at no charge.

### 填寫公民投訴書說明：

請回答第 2、3、4、5、8、11、15、17、20、21 及 22 項問題。除非您知道我們所要求的資料，否則請將其他各項留空。所有資料，務請以正楷填寫清楚。如果您沒有電話號碼，請在第 4 項填上有可能聯絡您的電話號碼，或鄰居、親戚、朋友的號碼。如果有證人，請用另一張紙寫上他們的姓名、地址及電話，和投訴書夾在一起；切勿寫在投訴書上。如果你不知道涉及事件的警務人員姓名或編號，請將該員的身體特徵，以正楷詳盡寫在第 22 項上。請清楚說明事件的過程，及投訴的類別，包括涉及何人、何事、何處、何時及何由。如您認為投訴書不夠您填寫，可以另紙填寫資料，夾在投訴書上。您應根據您所知道及所相信的事實填寫資料，必須真實及正確；填妥請在第 22 頁簽名。如有疑問或需要幫助，請在上午八時至下午五時，致電 (415) 597-7711「公民投訴組」，或在下午五時後，在該組的電話錄音機上留言。您亦可以與有免費翻譯員服務的「華埠建民中心」求助，電話 415-391-5099。

**INSTRUCCIONES PARA LLENAR EL FORMULARIO DE QUEJAS DE LOS CIUDADANOS:** Por favor conteste las preguntas de las casillas 2, 3, 4, 5, 8, 11, 15, 17, 20, 21 & 22. Deje sin contestar las demas preguntas a menos que sepa la información solicitada. El formulario debe ser contestado en **Ingles**. Si usted no tiene telefono escriba en la casilla 4 el número de un servicio de mensajes, o el de un vecino, amigo o pariente. Escriba en una hoja separada los nombres, direcciones y telefonos de los testigos (si los hay), y adjunte ésta información al formulario. En caso de que no conozca el nombre o número de insignia de los oficiales, incluya una descripción física completa (22). Describa los hechos en forma completa, sea específico. Incluya quien, que, donde, cuando y porque. Su declaración debe ser un recuento exacto y verdadero del incidente y debe estar firmada por usted (22). Para pedir información o solicitar ayuda visite nuestras oficinas locales o llámenos al numero (415) 597-7711 de 8:00 AM - 5:00 PM. El servicio de interpretacion es gratis. Formularios tambien pueden ser obtenidos en La Raza Information Center-- (415) 863-0764.

**PARAAN NG PAGSAGOT SA PORMANG ITO (CITIZEN COMPLAINT o REKLAMO NG MAMAMAYAN)** Mangyaring sagutin ang mga tanong sa blokeng 2, 3, 4, 5, 8, 11, 15, 17, 20, 21, at 22. Kung wala kayo ng impormasyon hinihingi dito, paki-iwanan blanko ang blokeng hindi masagot. **Paki-ilmbag ang lahat na sagot ninyo.** Kung wala kayong telepono, paki-sulat lang ang inyong "message number", o ang numero ng inyong kapit-bahay, kaibigan, o kamaganak. Kung mayroon kayong mga saksi o testigo, isulat sa ibang papel ang kanilang mga pangalan, mga tirahan, mga telepono at ikabit ito sa reklamo ninyo. Huwag gagamitin ang pormang ito. Kung hindi ninyo alam ang pangalan ng o ang numero ng kanyang tsapa, isama sa inyong salaysay ang hitsura at pagmumukha ng pulis. Ilmbag ang inyong salaysay. Liwanagin lahat ang nangyari magmula sa umpisa hanggang sa katapusan. Tiyakin o siguraduhin ang inyong sinusumbong o renireklamo. Sabihin o ilarawan kung sino, ano, saan, kailan at bakit sa pangyayari. Kung kulang ang pagsusulat dito gumamit ng ibang papel at ikabit ito sa sumbong ninyo. Sa inyong kaalaman at paniniwala, ang inilahad ninyong nangyari ay dapat lubos na katotohanan at walang kamali-mali at kailangan ninyong pirmahan ang sumbong ito sa blokeng bilang 22. Itanong sa amin kung alinman dito ang hindi maliwanag sa inyo. Kung kailangan ninyo ng tulong, paki-tawagan kami, OCC, telepono (415) 597-7711. Maaring tawagan din ninyo ang Philippines American Consul sa telepono (415) 626-0773 sa pagitan ng alas--otso ng umaga at alas--singko ng hapon o mag-iwan ng pahatid o "message" sa aming "answering service" paglampas dng alas--singko ng hapon.



THE POLICE COMMISSION  
**OFFICE OF CITIZEN COMPLAINTS**  
CITY AND COUNTY OF SAN FRANCISCO

OCC 184-04



Kevin Allen  
Director

**AUTHORIZATION FOR DISCLOSURE AND USE OF PROTECTED HEALTH INFORMATION TO AND BY THE OFFICE OF CITIZEN COMPLAINTS**

EXPLANATION: This Authorization is necessary for the Office of Citizen Complaints ("OCC") and the health care provider(s) or other persons having custody of protected health information about you to comply with California and federal laws pertaining to the privacy, disclosure and use of protected health information. This Authorization is necessary for the health care provider(s) or other persons listed below to disclose your health information to the OCC, and for the OCC to use your health information. Please provide all requested information. **FAILURE TO PROVIDE ALL REQUESTED INFORMATION MAY INVALIDATE THIS AUTHORIZATION AND PREVENT YOUR HEALTH CARE PROVIDER OR OTHER PERSONS HAVING CUSTODY OF PROTECTED HEALTH INFORMATION ABOUT YOU FROM ACTING ON THIS AUTHORIZATION.**

Name of Patient

[REDACTED]

Date of Birth

[REDACTED]

Other names (a.k.a.)

\_\_\_\_\_

☒ Male

\_\_\_\_\_

Female

Address

[REDACTED]  
[REDACTED]

Telephone

[REDACTED]

**1. PERSONS AUTHORIZED TO DISCLOSE PROTECTED HEALTH INFORMATION.**

I authorize the following health care provider(s), person(s) or class of persons to disclose health information about me as described in section 2, below:

SAN FRANCISCO GEN. HOSP. COUNTY JAIL #3 SAN BRUNO CA D. 97.  
SFFD - EMS Medical Records 4/21/04 T.B.


*(Print the name or names of health care providers and persons or class(es) of persons authorized to disclose health care information about you to OCC. These may include physicians, hospitals, clinics, paramedics, departments of the City and County of San Francisco, e.g., S.F.F.D. or Department of Public Health, or other persons or entities having custody of health information about you. Please be as specific as possible.)*



THE POLICE COMMISSION  
**OFFICE OF CITIZEN COMPLAINTS**  
CITY AND COUNTY OF SAN FRANCISCO

2. **DESCRIPTION OF INFORMATION.** This Authorization permits the use and disclosure of information as described in this Section 2, below. By checking the boxes below, I specifically authorize the release of the records and information described, if such records and information exist. The use and/or disclosure of records and information shall be limited to the types of information, types of treatment and/or dates of treatment I authorize, as indicated by checking the appropriate box(es) below. Authorization to disclose and/or use protected classes of information regarding mental health treatment, substance abuse treatment, HIV/AIDS tests or treatment, developmental disabilities and sexually transmitted disease require that I initial the appropriate space as indicated. California law requires that recipients of my health information refrain from redisclosing such information except with my written authorization or as specifically required by law.

(Check all applicable boxes and initial selection)

 All of my health information pertaining to any medical history, physical condition and treatment received. Except (optional) \_\_\_\_\_  
(initial)

Or, only the following records or types of health information and or only on the specified date(s):

Date(s) of Treatment: 2/20/04 Type of Treatment: \_\_\_\_\_  
(Inpatient, Emergency, Outpatient, Other)

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> Billing records  | <input type="checkbox"/> Progress Notes    | <input type="checkbox"/> EKG Results                                       | <input type="checkbox"/> Medications   |
| <input type="checkbox"/> Consultation   | <input type="checkbox"/> Lab Reports       | <input type="checkbox"/> Nurse's Notes                                     | <input type="checkbox"/> X-Ray Results |
| <input type="checkbox"/> Discharge Summary  | <input type="checkbox"/> Immunizations     | <input type="checkbox"/> Pathology Reports                                 | <input type="checkbox"/> Orders        |
| <input type="checkbox"/> History & Physical   | <input type="checkbox"/> Operative Reports | <input type="checkbox"/> Emergency Room Records                            |  |
| <input checked="" type="checkbox"/> All health information related to date(s) or type of treatment listed above |  | <input checked="" type="checkbox"/> Patient Care Reports (SFFD Paramedics) |  |

 (initial) Other: \_\_\_\_\_

**Initial below for approval to disclose protected classes of information:**

 Mental Health Treatment	 Substance Abuse Treatment
 HIV/AIDS Test/Treatment	 Sexually Transmitted Disease
 Developmental Disabilities	

**I understand that the information I authorize to be disclosed and/or used may also include any medical history, physical or mental condition, services rendered and/or treatment received.**



THE POLICE COMMISSION  
**OFFICE OF CITIZEN COMPLAINTS**  
CITY AND COUNTY OF SAN FRANCISCO

3. **AUTHORIZED USERS AND RECIPIENTS.** I hereby authorize the Office of Citizen Complaints, 480 Second St., San Francisco, CA 94107, and its employees and agents, to receive and use the health information checked in Section 2, above.

I hereby authorize the health care provider(s) or other person(s) identified in Section 1, above, to be interviewed by the Office of Citizen Complaints regarding the medical treatment provided for the dates and/or specific conditions described in Section 2, above (*initial one*):

 Yes        No

4. **PURPOSE.** I hereby authorize the use of health information checked in Section 2, above, for all official purposes of the Office of Citizen Complaints, including the investigation of citizen complaints against members of the San Francisco Police Department and potential disciplinary action in connection therewith. Send records to: Office of Citizen Complaints, 480 Second St., San Francisco, CA 94107.

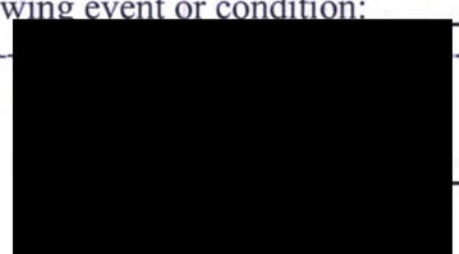
5. **MY RIGHTS; REVOCATION.** I understand that authorizing the disclosure and use of health information about me is voluntary. I may refuse to sign this Authorization. I may revoke this Authorization at any time. Revocation of this Authorization must be in writing, signed by me or on my behalf by someone with the legal authority to do so, and delivered to the person(s) authorized to disclose health information about me as set forth in Section 1, above. My revocation will be effective upon receipt, but will not be effective to the extent the person(s) set forth in Section 1 acted in reliance upon this Authorization prior to my revocation. I have a right to obtain a copy of this Authorization. I may not be denied treatment, payment, enrollment in a health plan or eligibility for benefits if I refuse to sign this Authorization.

6. **EXPIRATION.** Unless otherwise revoked, this Authorization will expire one (1) year from the date of execution unless a different end date or event is specified in Section 7, below, OR immediately upon the fulfillment of OCC's request for protected classes of information initialed in Section 2, above.

7. **EVENT/CONDITION.** (Optional) This Authorization will expire upon the occurrence of the following event or condition:

4/12/04

Date

 Relationship, if not Patient

Witness (required if Patient unable to sign)

Interpreter used:        Yes        No

# OFFICE OF CITIZEN COMPLAINTS

CITY AND COUNTY OF SAN FRANCISCO



Kevin Allen  
Director

PARAMEDICS DIVISION  
1415 Evans Avenue  
San Francisco, Ca 94124  
Att: Director of Medical Records  
Joe Mareschi OR Robert Rowbottom

VIA FAX (415) 920-2963

COPY

Date: 04/23/04

RE: OCC Case Number 184-04

Dear Mr. Mareschi:

Per the attached Consent to Release Medical Records, please send a copy of the Patient Chart of [REDACTED] for the ambulance medical assessment received at Tenderloin Task Force Station on 02-20-04 at about 1710 hours when SFFD personnel responded, assessed, recommended transport to S.F.G.H. for medical evaluation.

Please send this information (including any waiver or against medical advise form) at your earliest convenience to my attention at the Office of Citizen Complaints address to my attention or Via Fax at (415) 597-7733. If you have any questions, please do not hesitate to contact me at (415) 597-7729.

Thank you for your cooperation in this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "David Aulet".

David Aulet  
Investigator



# OFFICE OF CITIZEN COMPLAINTS

CITY AND COUNTY OF SAN FRANCISCO



Kevin Allen  
Director

COPY

San Francisco General Hospital  
Attention: Medical Records  
1001 Potrero Avenue, Room 2B-5  
San Francisco, CA 94110

RE: OCC Case #184-04

DATE: April 23, 2004

To whom it may concern:

Per the attached medical release, I request that you send a copy of the medical records of [REDACTED] for treatment received beginning on February 20, 2004, and any related subsequent treatment received.

Please send this information to my attention at the above address. Thank you for your cooperation in this matter. Should there be any questions, please do not hesitate to contact me at (415) 597-7729.

Sincerely,

A handwritten signature in black ink, appearing to read "David Aulet".

David Aulet  
INVESTIGATOR

# OFFICE OF CITIZEN COMPLAINTS

CITY AND COUNTY OF SAN FRANCISCO



Kevin Allen  
Director

April 12, 2004

San Francisco Police Department  
Lt. Charles Keohane, Legal Division  
850 Bryant Street, Room 575  
San Francisco, CA 94103

RE: OCC Case No. 184-04

COPY

Dear Lt. Keohane:

The Office of Citizen Complaints is conducting an investigation of the above referenced OCC case number. The complaint against several members of the San Francisco Police Department involves issues of force and injuries to both, the complainant and an officer, which were documented by SFPD in the report as "one Polaroid and one disk with pictures in it" under Evidence item no.4. The S.F.P.D. report for this incident of 02/20/04 is [REDACTED]

I am requesting a color copy of the Polaroid and a set of prints of the digital photographs of Theodore Graham and Officer Kasper #68 in the diskette.

I would appreciate a response to this request by April 26, 2004. Should there be any questions or concerns about this request, please call me at (415)597-7729.

Thank you for your cooperation with this matter.

Sincerely,

A handwritten signature in dark ink, appearing to read "David Aulet".

David Aulet  
INVESTIGATOR

**OFFICE OF CITIZEN COMPLAINTS**

CITY AND COUNTY OF SAN FRANCISCO

010



Kevin Allen  
Director

April 12, 2004

San Francisco Police Department  
Lt. Charles Keohane, Legal Division  
850 Bryant Street, Room 575  
San Francisco, CA 94103

**NON-ROUTINE**

RE: OCC Case No. 184-04

Dear Lt. Keohane:

The Office of Citizen Complaints is conducting an investigation of the above referenced OCC case number. The complaint against several members of the San Francisco Police Department involves issues of force and injuries to both, the complainant and an officer, which were documented by SFPD in the report as "one Polaroid and one disk with pictures in it" under Evidence item no.4. The S.F.P.D. report for this incident of 02/20/04 is [REDACTED].

I am requesting a color copy of the Polaroid and a set of prints of the digital photographs of Theodore Graham and Officer Kasper #68 in the diskette.

I would appreciate a response to this request by April 26, 2004. Should there be any questions or concerns about this request, please call me at (415) 597-7729.

Thank you for your cooperation with this matter.

Sincerely,

A handwritten signature in dark ink, appearing to read "David Aulet".

David Aulet  
INVESTIGATOR



# OFFICE OF CITIZEN COMPLAINTS

CITY AND COUNTY OF SAN FRANCISCO

April 6, 2004



Kevin Allen  
Director

RE: OCC Case NO. 184-04

COPY

Dear [REDACTED]

I am in receipt of your mailed in complaint regarding your arrest of Friday February 20, 2004. At this time you are in County Jail and the injuries are likely no longer visible. However, you still need be interviewed. Since you are still facing criminal proceedings in relation to this arrest, you are strongly encouraged to consult with your attorney before calling to be interviewed. If you decide to proceed with filing a complaint at this time, please call me as soon as possible on weekdays between 8:00 A.M. and 4:00 P.M. to be interviewed about your complaint.

Enclosed you will find a copy of your complaint for your records. I am also enclosing a new medical release form for you to sign or initial in the highlighted sections. Please mail back this form to my attention as soon as possible regardless of your decision as medical records will be an essential and required part of the OCC's investigation.

Thank your for your assistance with this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "David Aulet", with a stylized flourish extending to the right.

David Aulet  
INVESTIGATOR



# SAN FRANCISCO POLICE DEPARTMENT REPORT MANAGEMENT

## FAX TRANSMISSION RECORD

FAX NO: [415] 553-9848 VOICE NO: [415] 553-1038

Date 4/5/04

Agency Sent: O.C.C. Fax No: 597-7733

Attention: D. KULET

Sent by: FILAMOR

Incident Report no: [REDACTED]

Comments:

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Number of pages including cover sheet: 10

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OCC CASE # 184-04  
DATE/TIME 4-2-04

## Report Management Section REPORT REQUEST FORM

I HEREBY REQUEST ACCESS TO THE FOLLOWING INFORMATION  
THAT IS CONTAINED IN THE FILES OF THE REPORT MANAGEMENT  
SECTION. THIS DATA IS ESSENTIAL TO PERFORM MY DUTIES AS AN  
OCC INVESTIGATOR AND SHALL BE USED FOR OFFICIAL PURPOSES  
ONLY.

UNIT/AGENCY <b>OCC</b>	NAME & I.D. NO. (Print) <b>DAVID AULET</b>	INITIALS (Sign) <b>DA</b>
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REPORT NUMBER	VICTIM/SUSPECT (Print)	DATE OF INCIDENT	S.F. NUMBER
[REDACTED]	[REDACTED]	2-20-04	

☐ Will Return and Pick-Up at: \_\_\_\_\_ (Time) \_\_\_\_\_ (Date)

☒ Send to: OCC with all attachments

### FOR REPORT MANAGEMENT SECTION USE ONLY

\_\_\_ Hand-Delivered

\_\_\_ Mail

\_\_\_ FAX

By \_\_\_\_\_ Date \_\_\_\_\_  
(Report Management Section Member)

# OCC REPORT REQUEST

SFPD 493(01/04)



# OCC Routine Request Release Log

Date/Time: 4/5/04 Name of Requestor: NULET OCC Case # 184-04 Fax to: 800-97-7733  
Legal 553-1370

Officer handling this request:  
 Name and Star #: FILAMORE 1065

Date/Time

Document Released: 4/5/04

Method

Delivered: FILED / DEPT MAIL

These are the forms that are authorized to be released to OCC via verbal requests. Any juvenile information, child abuse reports, or documents not listed below are not routine requests. Requestor shall be referred to the Legal Division for any documents not listed on this form. Members receiving a verbal request shall complete this log and fax the completed log with disposition to the Legal Division. The original log shall be forwarded to the Legal Division by department mail.

- ☐ 12500 CVC Report (SFPD Form 164(a))
- ☐ 14601 CVC Report (SFPD Form 164)
- ☐ Academy training records
- ☐ Affidavit of Termination of Investigation (SFPD Form 470)
- ☐ Airport activity logs
- ☐ Anticipated Watch Report (SFPD Form 22)
- ☐ Arrest Record/Booking Slip (Form 3800-09)
- ☐ Candlestick Park activity logs
- ☐ Cell Check Log (SFPD Form 51)
- ☐ Certificate of Release (SFPD Form 184)
- ☐ Citation log book records
- ☐ Citizen Arrest Form (SFPD Form 80)
- ☐ Citizen Complaint Investigation Memorandum
- ☐ Cold Show Admonishment (SFPD Form 486)
- ☐ Corrected Watch Report (SFPD Form 117)
- ☐ Court Protective Orders or Emergency Protective Orders
- ☐ DABOR reports (post-hearing)
- ☐ Daily Arrest logs (SFPD Form 307)
- ☐ Demonstration Memorandum (SFPD Form 77)
- ☐ Demonstration squad charts
- ☐ DMV Officer's Statement
- ☐ DMV Order of Suspension (Form 360 & 360(A))
- ☐ DMV Supplemental to Officer's Statement (Blood/Urine Test Results)
- ☐ DMV Traffic Accident Report Form
- ☐ DMV Verbal Notice by Police Officer
- ☐ Domestic Violence Response Unit Tapes

- ☐ Domestic Violence Supplemental Report forms (SFPD 480a & 480b)
- ☐ Driving Under the Influence Card (SFPD Form 462)
- ☐ Driving Under the Influence Report (SFPD Form 284A-D)
- ☐ Drug Influence Evaluation Report (SFPD Form 26)
- ☐ Drug Influence Evaluation Report (SFPD Form 26A & B)
- ☐ Event operation orders
- ☐ Field Arrest Card
- ☐ Field Interview Card (SFPD Form 114)
- ☐ Firearms Training Roster (SFPD Form 53)
- ☐ Fleet management records
- ☐ Hit and Run Record (SFPD Form 133)
- ☒ Incident Reports (including all supplemental reports) (Investigation Bureau Units or Record Management Section Only - except juvenile incident reports.)
- ☐ Intoxilizer Model 5000 Checklist (or other models) (SFPD Form 15)
- ☐ Line-up Record (SFPD Form 56)
- ☐ Media footage
- ☐ Medical Screening Form (SFPD Form 54)
- ☐ Mug Shots (criminal history information tracking number to be redacted)
- ☐ Notice of Motor Vehicle Accident (SFPD Form 325)
- ☐ Officer notes
- ☐ Officer's Daily Report (Traffic Division) (SFPD Form 106)
- ☐ Overtime and Holiday Watch Report (SFPD Form 238)
- ☐ PacBell Park activity logs
- ☐ Payroll records
- ☐ Permission to Search For (SFPD Form 468)

- ☐ Photographic Line-up Instructions (SFPD Form 457)
- ☐ PLES (10-B assignment) rosters
- ☐ POST training materials
- ☐ Prisoner Transfer Record (SFPD Form 78)
- ☐ Property logs (from both stations and property control) (SFPD Form 230)
- ☐ Property Receipt Form (SFPD Form 315)
- ☐ Property Release Form (SFPD Form 156)
- ☐ Public Intoxication Report (SFPD Form 69)
- ☐ Ride-along Request and Review (SFPD Form 84)
- ☐ Roll call training logs
- ☐ Secondary Employment Application (SFPD Form 156)
- ☐ SFPD Dismissal Request (SFPD Form 256)
- ☐ SFPD officer photographs
- ☐ SFPD officer weight and height descriptions
- ☐ Station Arrest Logs
- ☐ Stop search authorization form (SFPD Form 305)
- ☐ Traffic Collision Reports (CHP555, 555-03 & 556)
- ☐ Traffic Court Report (SFPD Form 285)
- ☐ Unit orders
- ☐ Use of force logs (SFPD Form 128)
- ☐ Verification of latent fingerprint request (SFPD Form 235) (not including results)
- ☐ Action taken if information not released

SFPD Form 8 (07/03)

# OFFICE OF CITIZEN COMPLAINTS

CITY AND COUNTY OF SAN FRANCISCO



Kevin Allen  
Director

April 2, 2004

Re: OCC Case No. 184-04

Dear [REDACTED]

I have been assigned to conduct an investigation of the complaint you filed with the Office of Citizen Complaints. In order to proceed with my investigation, it is important that I have the opportunity to speak with you at your earliest convenience by calling me at (415) 597-7729 during the daytime to interview you.

Further input from you concerning this case is needed. If I do not hear from you within 10 days from the date of this letter, I shall have no choice but to proceed with the investigation without your input. If I am not in the office at the time you call, please leave me a location or telephone number where I can reach you during the daytime.

Enclosed is a copy of your complaint for your records.

Thank you for your assistance with this matter.

Sincerely,

A handwritten signature in dark ink, appearing to read "David Aulet", written over a horizontal line.

David Aulet  
INVESTIGATOR



**SAN FRANCISCO POLICE DEPARTMENT**  
**REPORT MANAGEMENT SECTION**  
850 BRYANT ST. ROOM 475  
SAN FRANCISCO, CALIFORNIA, 94103  
PHONE: (415) 553-1276/1277 FAX: (415) 553-9848

WE ARE REQUESTING THAT THE OFFICER IN CHARGE OF THE  
DETAILS BELOW, TO PLEASE REVIEW THE FOLLOWING SFPD  
INCIDENT REPORT.

REPORT NUMBER \_\_\_\_\_

IT HAS BEEN REQUESTED BY: O.C.C.

PLEASE CIRCLE ONE AND CHECK ONE:

   AUTO    BURGLARY    FENCING    FRAUD    GTF/SID  
   GENERAL WORKS    HOMICIDE    HIT & RUN    JUVENILE  
   ROBBERY    SEX CRIMES    NIGHT INVESTIGATION    VICE  
   PSYCH    DOMESTIC VIOLENCE    NARCOTICS    ARSON

\*\*\* PLEASE SANITIZE IF NEEDED AND RECOPY. THANK YOU

APPROVAL OFFICER: \_\_\_\_\_

APPROVED: \_\_\_\_\_ DISAPPROVED: \_\_\_\_\_

PLEASE FORWARD BACK TO THE REPORT MANAGEMENT SECTION:

REQUEST BY: FILANOR DATES: 4/20/04

IF YOU HAVE ANY QUESTION PLEASE CALL ME @EXT. \_\_\_\_\_  
MY WORK HOURS ARE:

MONDAY-THURSDAY 0500-1500HRS \_\_\_\_\_  
TUESDAY-FRIDAY 0500-1500HRS \_\_\_\_\_





# SAN FRANCISCO POLICE DEPARTMENT REPORT MANAGEMENT

## FAX TRANSMISSION RECORD

FAX NO: [415] 553-9848 VOICE NO: [415] 553-1038

Date 4/20/04

Agency Sent: O.C.C. Fax No: 597-7733

Attention: D. AULET

Sent by: B. FILAMOR

Incident Report no: [REDACTED]

Comments:

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Number of pages including cover sheet: 4

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OCC CASE # 207-04DATE/TIME 4-19-04 1000 hrs.

## Report Management Section REPORT REQUEST FORM

I HEREBY REQUEST ACCESS TO THE FOLLOWING INFORMATION  
THAT IS CONTAINED IN THE FILES OF THE REPORT MANAGEMENT  
SECTION. THIS DATA IS ESSENTIAL TO PERFORM MY DUTIES AS AN  
OCC INVESTIGATOR AND SHALL BE USED FOR OFFICIAL PURPOSES  
ONLY.

UNIT/AGENCY <b>OCC</b>	NAME & I.D. NO. (Print) Det. David Aulet	INITIALS (Sign) 
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REPORT NUMBER	VICTIM/SUSPECT (Print)	DATE OF INCIDENT	S.F. NUMBER
		4-10-04	
	"	"	
	"	"	
	"	"	

☐ Will Return and Pick-Up at: \_\_\_\_\_ (Time) \_\_\_\_\_ (Date)

☒ Send to: OCC

### FOR REPORT MANAGEMENT SECTION USE ONLY

\_\_\_ Hand-Delivered

\_\_\_ Mail

\_\_\_ FAX

By \_\_\_\_\_ Date \_\_\_\_\_  
(Report Management Section Member)

# OCC REPORT REQUEST

SFPD 493(01/04)



# OCC Routine Request Release Log

Date/Time: 4/20/04

Name of Requestor: ALUET

OCC Case # 207-04

Fax to: ☐ 97-7733  
☐ Legal 553-1370

Officer handling this request:  
Name and Star #: FILAMON 1065

Date/Time

Document Released: \_\_\_\_\_

Method

Delivered: \_\_\_\_\_

These are the forms that are authorized to be released to OCC via verbal requests. Any juvenile information, child abuse reports, or documents not listed below are not routine requests. Requestor shall be referred to the Legal Division for any documents not listed on this form. Members receiving a verbal request shall complete this log and fax the completed log with disposition to the Legal Division. The original log shall be forwarded to the Legal Division by department mail.

- ☐ 12500 CVC Report (SFPD Form 184(a))
- ☐ 14601 CVC Report (SFPD Form 184)
- ☐ Academy training records
- ☐ Affidavit of Termination of Investigation (SFPD Form 470)
- ☐ Airport activity logs
- ☐ Anticipated Watch Report (SFPD Form 22)
- ☐ Arrest Record/Booking Slip (Form 3800-09)
- ☐ Candlestick Park activity logs
- ☐ Cell Check Log (SFPD Form 51)
- ☐ Certificate of Release (SFPD Form 184)
- ☐ Citation log book records
- ☐ Citizen Arrest Form (SFPD Form 80)
- ☐ Citizen Complaint Investigation Memorandum
- ☐ Cold Show Admonishment (SFPD Form 466)
- ☐ Corrected Watch Report (SFPD Form 117)
- ☐ Court Protective Orders or Emergency Protective Orders
- ☐ DABOR reports (post-hearing)
- ☐ Daily Arrest logs (SFPD Form 307)
- ☐ Demonstration Memorandum (SFPD Form 77)
- ☐ Demonstration squad charts
- ☐ DMV Officer's Statement
- ☐ DMV Order of Suspension (Form 360 & 360(A))
- ☐ DMV Supplemental to Officer's Statement (Blood/Urine Test Results)
- ☐ DMV Traffic Accident Report Form
- ☐ DMV Verbal Notice by Police Officer
- ☐ Domestic Violence Response Unit Tapes

- ☐ Domestic Violence Supplemental Report forms (SFPD 480a & 480b)
- ☐ Driving Under the Influence Card (SFPD Form 462)
- ☐ Driving Under the Influence Report (SFPD Form 284A-D)
- ☐ Drug Influence Evaluation Report (SFPD Form 28)
- ☐ Drug Influence Evaluation Report (SFPD Form 28A & B)
- ☐ Event operation orders
- ☐ Field Arrest Card
- ☐ Field Interview Card (SFPD Form 114)
- ☐ Firearms Training Roster (SFPD Form 53)
- ☐ Fleet management records
- ☐ Hit and Run Report (SFPD Form 133)
- ☒ Incident Reports (including all supplemental reports) (Investigation Bureau Units or Record Management Section Only - except juvenile incident reports.)
- ☐ Intoxilizer Model 5000 Checklist (or other models) (SFPD Form 15)
- ☐ Line-up Record (SFPD Form 56)
- ☐ Media footage
- ☐ Medical Screening Form (SFPD Form 54)
- ☐ Mug Shots (criminal history information tracking number to be redacted)
- ☐ Notice of Motor Vehicle Accident (SFPD Form 325)
- ☐ Officer notes
- ☐ Officer's Daily Report (Traffic Division) (SFPD Form 106)
- ☐ Overtime and Holiday Watch Report (SFPD Form 238)
- ☐ PacBell Park activity logs
- ☐ Payroll records
- ☐ Permission to Search For \_\_\_\_\_ PD Form 468)

- ☐ Photographic Line-up Instructions (SFPD Form 487)
- ☐ PLES (10-B assignment) rosters
- ☐ POST training materials
- ☐ Prisoner Transfer Record (SFPD Form 78)
- ☐ Property logs (from both stations and property control) (SFPD Form 230)
- ☐ Property Receipt Form (SFPD Form 315)
- ☐ Property Release Form (SFPD Form 158)
- ☐ Public Intoxication Report (SFPD Form 69)
- ☐ Ride-along Request and Review (SFPD Form 84)
- ☐ Roll call training logs
- ☐ Secondary Employment Application (SFPD Form 156)
- ☐ SFPD Dismissal Request (SFPD Form 256)
- ☐ SFPD officer photographs
- ☐ SFPD officer weight and height descriptions
- ☐ Station Arrest Logs
- ☐ Strip search authorization form (SFPD Form 306)
- ☐ Traffic Collision Reports (CHP 555, 555-03 & 556)
- ☐ Traffic Court Report (SFPD Form 295)
- ☐ Unit orders
- ☐ Use of force logs (SFPD Form 126)
- ☐ Verification of latent fingerprint request (SFPD Form 235) (not including results)
- ☐ Action taken if information not released

CONFIDENTIAL REPORT  
FORWARDED TO HOMICIDE  
FOR APPROVAL

SFPD For. .8 (07/03)

SFDPA - 184-04 - 000100





# SAN FRANCISCO POLICE DEPARTMENT REPORT MANAGEMENT

## FAX TRANSMISSION RECORD

FAX NO: [415] 553-9848 VOICE NO: [415] 553-1038

Date 4/20/04

Agency Sent: O.C.C. Fax No: 597-7733

Attention: D. AULET

Sent by: B. FILAMOR

Incident Report no: [REDACTED]

Comments:

\_\_\_\_\_  
\_\_\_\_\_  
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Number of pages including cover sheet: 4

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HAS BEEN DISCLOSED TO \_\_\_\_\_ FOR OFFICIAL PURPOSES. THE  
SAN FRANCISCO POLICE DEPARTMENT DOES NOT AUTHORIZE FURTHER  
DISCLOSURE.

OCC CASE # 207-04DATE/TIME 4-19-04 1000 hrs.

## Report Management Section REPORT REQUEST FORM

I HEREBY REQUEST ACCESS TO THE FOLLOWING INFORMATION  
THAT IS CONTAINED IN THE FILES OF THE REPORT MANAGEMENT  
SECTION. THIS DATA IS ESSENTIAL TO PERFORM MY DUTIES AS AN  
OCC INVESTIGATOR AND SHALL BE USED FOR OFFICIAL PURPOSES  
ONLY.

UNIT/AGENCY <b>OCC</b>	NAME & I.D. NO. (Print) Dw. David Aulet	INITIALS (Sign) 
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REPORT NUMBER	VICTIM/SUSPECT (Print)	DATE OF INCIDENT	S.F. NUMBER
		4-10-04	
	"	"	
	"	"	
	"	"	
	"	"	

☐ Will Return and Pick-Up at: \_\_\_\_\_ (Time) \_\_\_\_\_ (Date)

☒ Send to: OCC

### FOR REPORT MANAGEMENT SECTION USE ONLY

\_\_\_ Hand-Delivered

\_\_\_ Mail

\_\_\_ FAX

By \_\_\_\_\_ Date \_\_\_\_\_  
(Report Management Section Member)

# OCC REPORT REQUEST

SFPD 493(01/04)



# OCC Routine Request Release Log

Date/Time: 4/20/04

Name of Requestor: BUCKET

OCC Case # 207-04

Fax to: ☐ 97-7733  
☐ Legal 553-1370

Officer handling this request:  
Name and Star #: FILAMON 1065

Date/Time

Document Released: \_\_\_\_\_

Method

Delivered: \_\_\_\_\_

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- ☐ 12500 CVC Report (SFPD Form 184(a))
- ☐ 14601 CVC Report (SFPD Form 164)
- ☐ Academy training records
- ☐ Affidavit of Termination of Investigation (SFPD Form 470)
- ☐ Airport activity logs
- ☐ Anticipated Watch Report (SFPD Form 22)
- ☐ Arrest Record/Booking Slip (Form 3800-09)
- ☐ Candlestick Park activity logs
- ☐ Cell Check Log (SFPD Form 51)
- ☐ Certificate of Release (SFPD Form 184)
- ☐ Citation log book records
- ☐ Citizen Arrest Form (SFPD Form 80)
- ☐ Citizen Complaint Investigation Memorandum
- ☐ Cold Show Admonishment (SFPD Form 488)
- ☐ Corrected Watch Report (SFPD Form 117)
- ☐ Court Protective Orders or Emergency Protective Orders
- ☐ DABOR reports (post-hearing)
- ☐ Daily Arrest logs (SFPD Form 307)
- ☐ Demonstration Memorandum (SFPD Form 77)
- ☐ Demonstration squad charts
- ☐ DMV Officer's Statement
- ☐ DMV Order of Suspension (Form 360 & 360(A))
- ☐ DMV Supplemental to Officer's Statement (Blood/Urine Test Results)
- ☐ DMV Traffic Accident Report Form
- ☐ DMV Verbal Notice by Police Officer
- ☐ Domestic Violence Response Unit Tapes

- ☐ Domestic Violence Supplemental Report forms (SFPD 480a & 480b)
- ☐ Driving Under the Influence Card (SFPD Form 462)
- ☐ Driving Under the Influence Report (SFPD Form 284A-D)
- ☐ Drug Influence Evaluation Report (SFPD Form 28)
- ☐ Drug Influence Evaluation Report (SFPD Form 28A & B)
- ☐ Event operation orders
- ☐ Field Arrest Card
- ☐ Field Interview Card (SFPD Form 114)
- ☐ Firearms Training Roster (SFPD Form 53)
- ☐ Fleet management records
- ☐ Hit and Run Record (SFPD Form 133)
- ☒ Incident Reports (including all supplemental reports) (Investigation Bureau Units or Record Management Section Only - except juvenile incident reports.)
- ☐ Immobilizer Model 3000 Checklist (or other models) (SFPD Form 15)
- ☐ Line-up Record (SFPD Form 56)
- ☐ Media footage
- ☐ Medical Screening Form (SFPD Form 54)
- ☐ Mug Shots (criminal history information tracking number to be redacted)
- ☐ Notice of Motor Vehicle Accident (SFPD Form 325)
- ☐ Officer notes
- ☐ Officer's Daily Report (Traffic Division) (SFPD Form 106)
- ☐ Overtime and Holiday Watch Report (SFPD Form 238)
- ☐ PacBell Park activity logs
- ☐ Payroll records
- ☐ Permission to Search For SFPD Form 468)

- ☐ Photographic Line-up Instructions (SFPD Form 467)
- ☐ PLES (10-B assignment) rosters
- ☐ POST training materials
- ☐ Prisoner Transfer Record (SFPD Form 78)
- ☐ Property logs (from both stations and property control) (SFPD Form 230)
- ☐ Property Receipt Form (SFPD Form 315)
- ☐ Property Release Form (SFPD Form 158)
- ☐ Public Intoxication Report (SFPD Form 69)
- ☐ Ride-along Request and Review (SFPD Form 84)
- ☐ Roll call training logs
- ☐ Secondary Employment Application (SFPD Form 156)
- ☐ SFPD Dismissal Request (SFPD Form 256)
- ☐ SFPD officer photographs
- ☐ SFPD officer weight and height descriptions
- ☐ Station Arrest Logs
- ☐ Strip search authorization form (SFPD Form 305)
- ☐ Traffic Collision Reports (CHP555, 555-03 & 556)
- ☐ Traffic Court Report (SFPD Form 295)
- ☐ Unit orders
- ☐ Use of force logs (SFPD Form 128)
- ☐ Verification of latent fingerprint request (SFPD Form 235) (not including results)
- ☐ Action taken if information not released

REPORT [REDACTED]  
RELATED TO UNCONFIDENTIAL  
REPORT [REDACTED] FORWARDED  
TO HOMICIDE SFPD Form 184-04 - 000103



SAN FRANCISCO POLICE DEPARTMENT  
REPORT MANAGEMENT SECTION  
850 BRYANT ST. ROOM 475  
SAN FRANCISCO, CALIFORNIA, 94103  
PHONE: (415) 553-1276/1277 FAX: (415) 553-9848

WE ARE REQUESTING THAT THE OFFICER IN CHARGE OF THE  
DETAILS BELOW, TO PLEASE REVIEW THE FOLLOWING SFPD  
INCIDENT REPORT.

REPORT NUMBER \_\_\_\_\_

IT HAS BEEN REQUESTED BY: O. C. C.

PLEASE CIRCLE ONE AND CHECK ONE:

   AUTO    BURGLARY    FENCING    FRAUD    GTF/SID  
   GENERAL WORKS    HOMICIDE    HIT & RUN    JUVENILE  
   ROBBERY    SEX CRIMES    NIGHT INVESTIGATION    VICE  
   PSYCH    DOMESTIC VIOLENCE    NARCOTICS    ARSON

\*\*\*\* PLEASE SANITIZE IF NEEDED AND RECOPY. THANK YOU

APPROVAL OFFICER: \_\_\_\_\_

APPROVED: \_\_\_\_\_ DISAPPROVED: \_\_\_\_\_

PLEASE FORWARD BACK TO THE REPORT MANAGEMENT SECTION:

REQUEST BY: FILAMOR DATES: 4/20/04

IF YOU HAVE ANY QUESTION PLEASE CALL ME @EXT. \_\_\_\_\_  
MY WORK HOURS ARE:

MONDAY-THURSDAY 0500-1500HRS \_\_\_\_\_  
TUESDAY-FRIDAY 0500-1500HRS \_\_\_\_\_

# OCC Routine Request Release Log

Date/Time: 4/20/04

Name of Requestor: AULET

OCC Case # 207-04

Fax to: ☐ 97-7733  
☐ Legal 553-1370

Officer handling this request:  
Name and Star #: FILAMUN 1065

Date/Time  
Document Released: \_\_\_\_\_

Method  
Delivered: \_\_\_\_\_

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- ☐ 12500 CVC Report (SFPD Form 164(a))
- ☐ 14601 CVC Report (SFPD Form 164)
- ☐ Academy training records
- ☐ Affidavit of Termination of Investigation (SFPD Form 470)
- ☐ Airport activity logs
- ☐ Anticipated Watch Report (SFPD Form 22)
- ☐ Arrest Record/Booking Slip (Form 3800-09)
- ☐ Candlestick Park activity logs
- ☐ Cell Check Log (SFPD Form 51)
- ☐ Certificate of Release (SFPD Form 184)
- ☐ Citation log book records
- ☐ Citizen Arrest Form (SFPD Form 80)
- ☐ Citizen Complaint Investigation Memorandum
- ☐ Cold Show Admonishment (SFPD Form 466)
- ☐ Corrected Watch Report (SFPD Form 117)
- ☐ Court Protective Orders or Emergency Protective Orders
- ☐ DABOR reports (post-hearing)
- ☐ Daily Arrest logs (SFPD Form 307)
- ☐ Demonstration Memorandum (SFPD Form 77)
- ☐ Demonstration squad charts
- ☐ DMV Officer's Statement
- ☐ DMV Order of Suspension (Form 360 & 360(A))
- ☐ DMV Supplemental to Officer's Statement (Blood/Urine Test Results)
- ☐ DMV Traffic Accident Report Form
- ☐ DMV Verbal Notice by Police Officer
- ☐ Domestic Violence Response Unit Tapes

- ☐ Domestic Violence Supplemental Report forms (SFPD 480a & 480b)
- ☐ Driving Under the Influence Card (SFPD Form 452)
- ☐ Driving Under the Influence Report (SFPD Form 284A-O)
- ☐ Drug Influence Evaluation Report (SFPD Form 26)
- ☐ Drug Influence Evaluation Report (SFPD Form 26A & B)
- ☐ Event operation orders
- ☐ Field Arrest Card
- ☐ Field Interview Card (SFPD Form 114)
- ☐ Firearms Training Roster (SFPD Form 53)
- ☐ Fleet management records
- ☐ Hit and Run Record (SFPD Form 133)
- ☐ Incident Reports (including all supplemental reports) (Investigation Bureau Units or Record Management Section Only - except juvenile incident reports.)
- ☐ Intoxilizer Model 5000 Checklist (or other models)(SFPD Form 15)
- ☐ Line-up Record (SFPD Form 56)
- ☐ Media footage
- ☐ Medical Screening Form (SFPD Form 54)
- ☐ Mug Shots (criminal history information tracking number to be redacted)
- ☐ Notice of Motor Vehicle Accident (SFPD Form 325)
- ☐ Officer notes
- ☐ Officer's Daily Report (Traffic Division)(SFPD Form 106)
- ☐ Overtime and Holiday Watch Report (SFPD Form 239)
- ☐ Pacific Park activity logs
- ☐ Payroll records
- ☐ Permission to Search For (SFPD Form 468)

- ☐ Photographic Line-up Instructions (SFPD Form 487)
- ☐ PLES (10-B assignment) rosters
- ☐ POST training materials
- ☐ Prisoner Transfer Record (SFPD Form 76)
- ☐ Property logs (from both stations and property control) (SFPD Form 230)
- ☐ Property Receipt Form (SFPD Form 315)
- ☐ Property Release Form (SFPD Form 158)
- ☐ Public Intoxication Report (SFPD Form 69)
- ☐ Ride-along Request and Review (SFPD Form 84)
- ☐ Roll call training logs
- ☐ Secondary Employment Application (SFPD Form 156)
- ☐ SFPD Dismissal Request (SFPD Form 256)
- ☐ SFPD officer photographs
- ☐ SFPD officer weight and height descriptions
- ☐ Station Arrest Logs
- ☐ Strip search authorization form (SFPD Form 305)
- ☐ Traffic Collision Reports (CHP555, 555-03 & 556)
- ☐ Traffic Court Report (SFPD Form 295)
- ☐ Unit orders
- ☐ Use of force logs (SFPD Form 128)
- ☐ Verification of latent fingerprint request (SFPD Form 235)(not including results)
- ☐ Action taken if information not released

REPORT  
NOT IN COMPUTER

4/20/04

SFPD Form 108 (07/03)





# SAN FRANCISCO POLICE DEPARTMENT REPORT MANAGEMENT

## FAX TRANSMISSION RECORD

FAX NO: [415] 553-9848 VOICE NO: [415] 553-1038

Date 4/20/04

Agency Sent: O.C.C.

Fax No: 597-7733

Attention: D. AVIET

Sent by: B. FILAMORE

Incident Report no: [REDACTED]

Comments:

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\_\_\_\_\_  
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\_\_\_\_\_

Number of pages including cover sheet: 3

THIS PUBLICATION CONTAINS MATERIAL EXEMPT FROM PUBLIC DISCLOSURE. IT  
HAS BEEN DISCLOSED TO \_\_\_\_\_ FOR OFFICIAL PURPOSES. THE  
SAN FRANCISCO POLICE DEPARTMENT DOES NOT AUTHORIZE FURTHER  
DISCLOSURE.



OCC CASE # 207-04DATE/TIME 4-19-04 1000 hrs.

## Report Management Section REPORT REQUEST FORM

I HEREBY REQUEST ACCESS TO THE FOLLOWING INFORMATION  
THAT IS CONTAINED IN THE FILES OF THE REPORT MANAGEMENT  
SECTION. THIS DATA IS ESSENTIAL TO PERFORM MY DUTIES AS AN  
OCC INVESTIGATOR AND SHALL BE USED FOR OFFICIAL PURPOSES  
ONLY.

UNIT/AGENCY <b>OCC</b>	NAME & I.D. NO. (Print) INV. David Aulet	INITIALS (Sign) 
---------------------------	---	---------------------

REPORT NUMBER	VICTIM/SUSPECT (Print)	DATE OF INCIDENT	S.F. NUMBER
		4-10-04	
	"	"	
	"	"	
	"	"	
	"	"	

☐ Will Return and Pick-Up at: \_\_\_\_\_ (Time) \_\_\_\_\_ (Date)

☒ Send to: OCC

### FOR REPORT MANAGEMENT SECTION USE ONLY

\_\_\_ Hand-Delivered

\_\_\_ Mail

\_\_\_ FAX

By \_\_\_\_\_ Date \_\_\_\_\_  
(Report Management Section Member)

# OCC REPORT REQUEST

SFPD 493(01/04)



# SAN FRANCISCO POLICE DEPARTMENT REPORT MANAGEMENT

## FAX TRANSMISSION RECORD

FAX NO: [415] 553-9848 VOICE NO: [415] 553-1038

Date 4/20/04

Agency Sent: O.C.C. Fax No: 597-7733

Attention: D. AULET

Sent by: B. FILAMORE

Incident Report no: [REDACTED]

Comments:

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Number of pages including cover sheet: 3

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OCC CASE # 207-04DATE/TIME 4-19-04 1000 hrs.

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UNIT/AGENCY <b>OCC</b>	NAME & I.D. NO. (Print) INV. David Aulet	INITIALS (Sign) 
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REPORT NUMBER	VICTIM/SUSPECT (Print)	DATE OF INCIDENT	S.F. NUMBER
		4-10-04	
	"	"	
	"	"	
	"	"	
	"	"	

☐ Will Return and Pick-Up at: \_\_\_\_\_ (Time) \_\_\_\_\_ (Date)

☒ Send to: OCC

**FOR REPORT MANAGEMENT SECTION USE ONLY**

\_\_\_ Hand-Delivered

\_\_\_ Mail

\_\_\_ FAX

By \_\_\_\_\_ Date \_\_\_\_\_  
(Report Management Section Member)

# OCC REPORT REQUEST

SFPD 493(01/04)



# OCC Routine Request Release Log

Date/Time: 4/20/04

Name of Requestor: MUET

OCC Case # 207-04

Fax to: ☐ 97-7733  
☐ Legal 553-1370

Officer handling this request:  
Name and Star #: FILAMORE 1065

Date/Time  
Document Released: \_\_\_\_\_

Method  
Delivered: \_\_\_\_\_

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- ☐ Drug Influence Evaluation Report (SFPD Form 26A & B)
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- ☐ SFPD officer weight and height descriptions
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- ☐ Verification of latent fingerprint request (SFPD Form 235) (not including results)
- ☐ Action taken if information not released

REPORT  
NOT IN COMPUTER  
4/20/04

SFPD For. 8 (07/03)

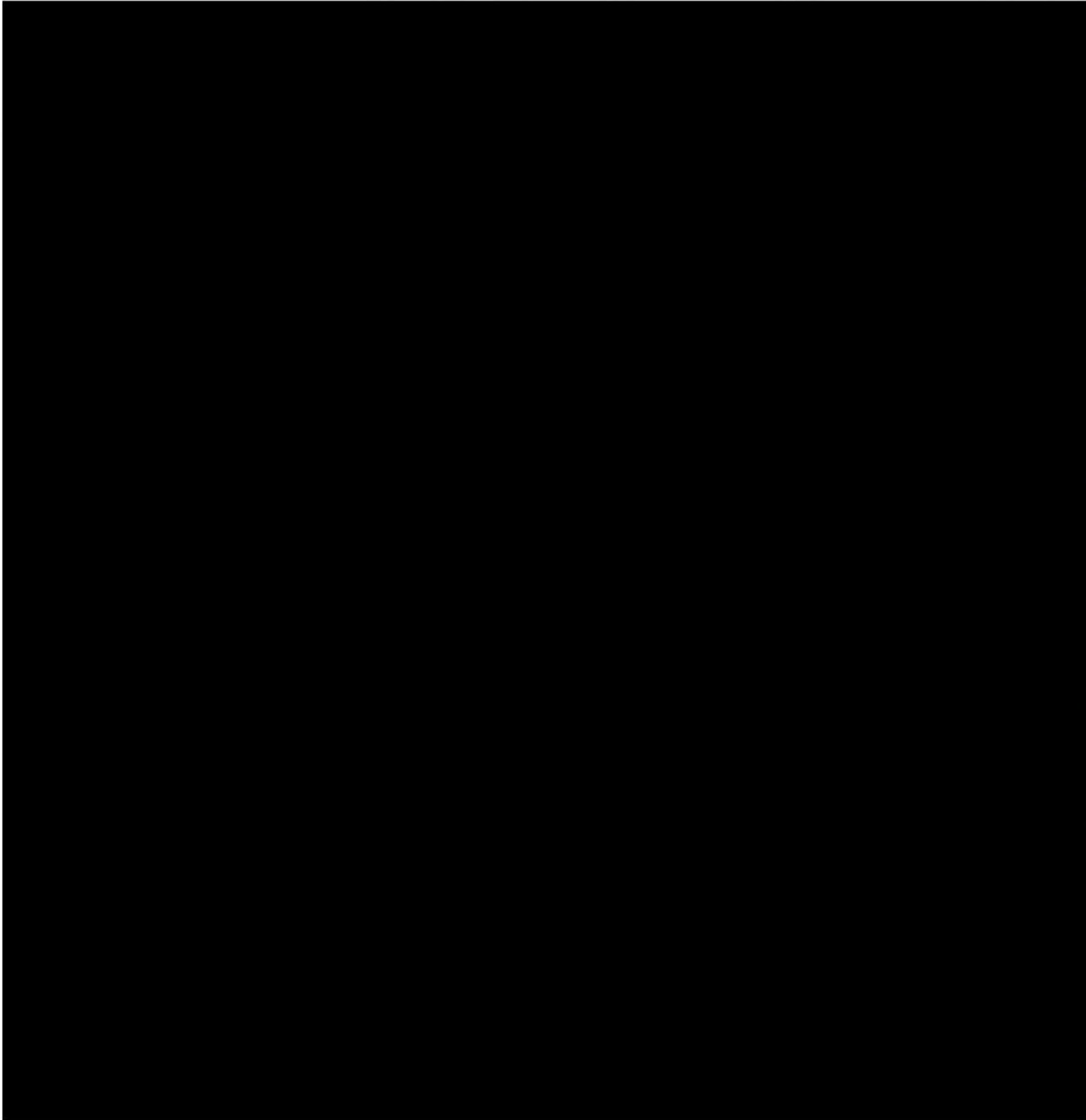
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CABLE QUERY RESPONSE

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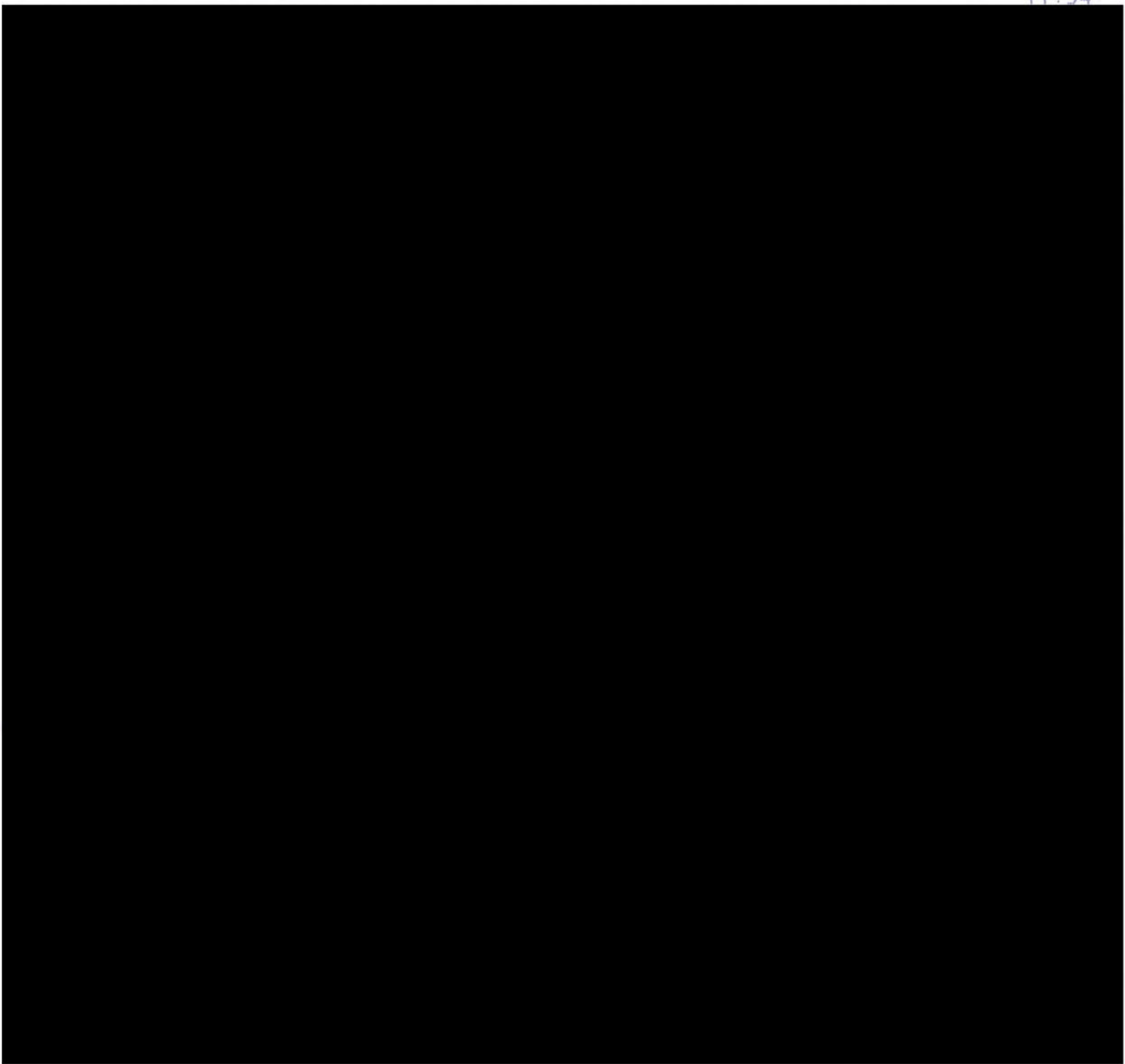


TIBURON, INC.

CABLE QUERY RESPONSE

PAGE 1

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CONFIDENTIAL

TIBURON, INC.

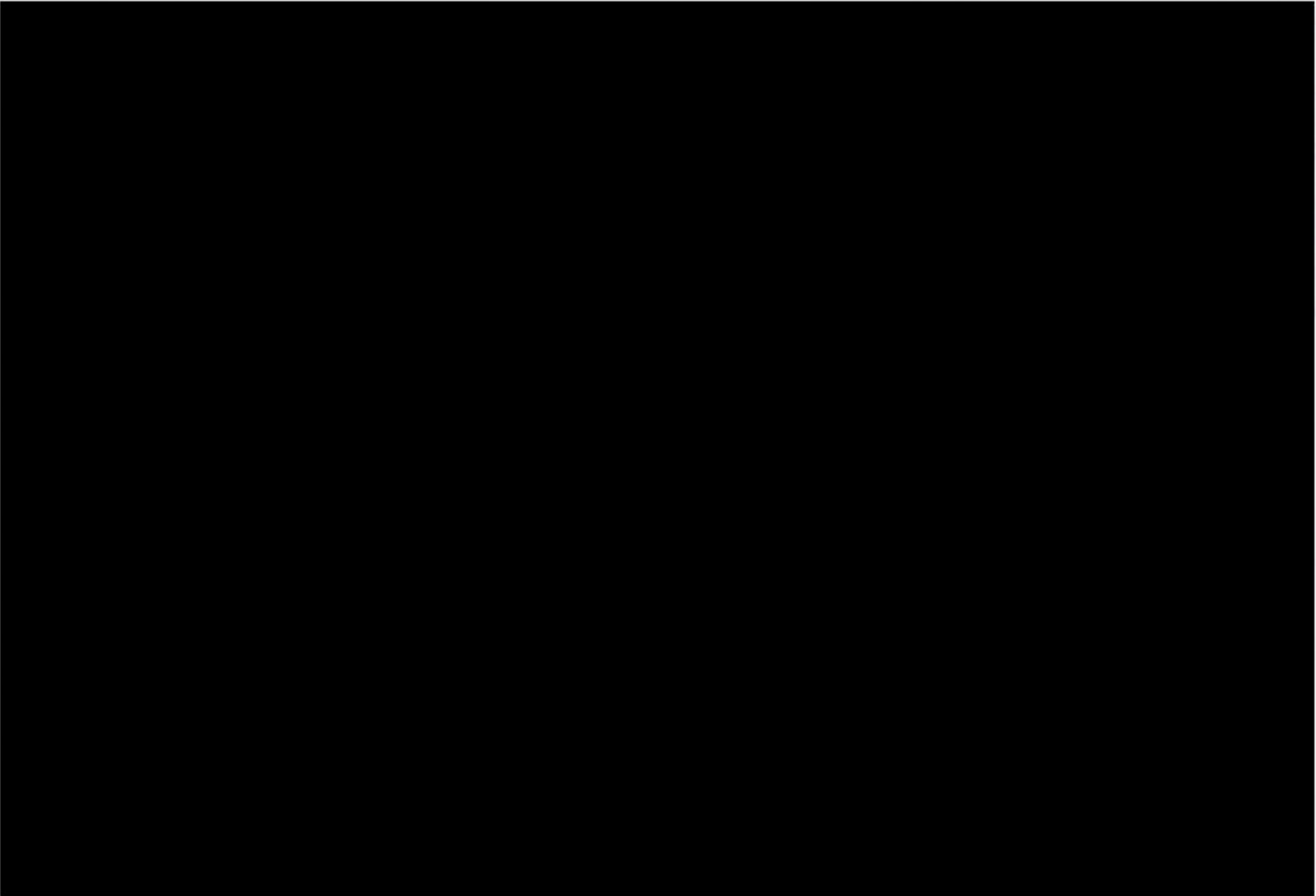
CABLE QUERY RESPONSE

PAGE 20

04/23/04

11:54

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SP IA01

SP IA01

REPORT 6789

D C X

RUN 10/04/04 @ 11:32 PAGE

1

\*\*\*\*\* END OF REPORT \*\*\*\*\*



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**HS§ 11352.      Transport and Sales of Narcotic Drugs**

(a) Except as otherwise provided in this division, every person who transports, imports into this state, sells, furnishes, administers, or gives away, or offers to transport, import into this state, sell, furnish, administer, or give away, or attempts to import into this state or transport (1) any controlled substance specified in subdivision (b), (c), or (e), or paragraph (1) of subdivision (f) of Section 11054, specified in paragraph (14), (15), or (20) of subdivision (d) of Section 11054, or specified in subdivision (b) or (c) of Section 11055, or specified in subdivision (h) of Section 11056, or (2) any controlled substance classified in Schedule III, IV, or V which is a narcotic drug, unless upon the written prescription of a physician, dentist, podiatrist, or veterinarian licensed to practice in this state, shall be punished by imprisonment in the state prison for three, four, or five years.

(b) Notwithstanding the penalty provisions of subdivision (a), any person who transports for sale any controlled substances specified in subdivision (a) within this state from one county to another noncontiguous county shall be punished by imprisonment in the state prison for three, six, or nine years.

(Amended by Stats. 2000, Ch. 8, Sec. 5. Effective March 29, 2000.)

(Amended by Stats. 1989, Ch. 1102, Sec. 1.)

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CONFIDENTIAL

TIBURON, INC.

CABLE QUERY RESPONSE

PAGE 1

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16:04

TIBURON, INC.

CABLE QUERY RESPONSE

PAGE 2

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16:04

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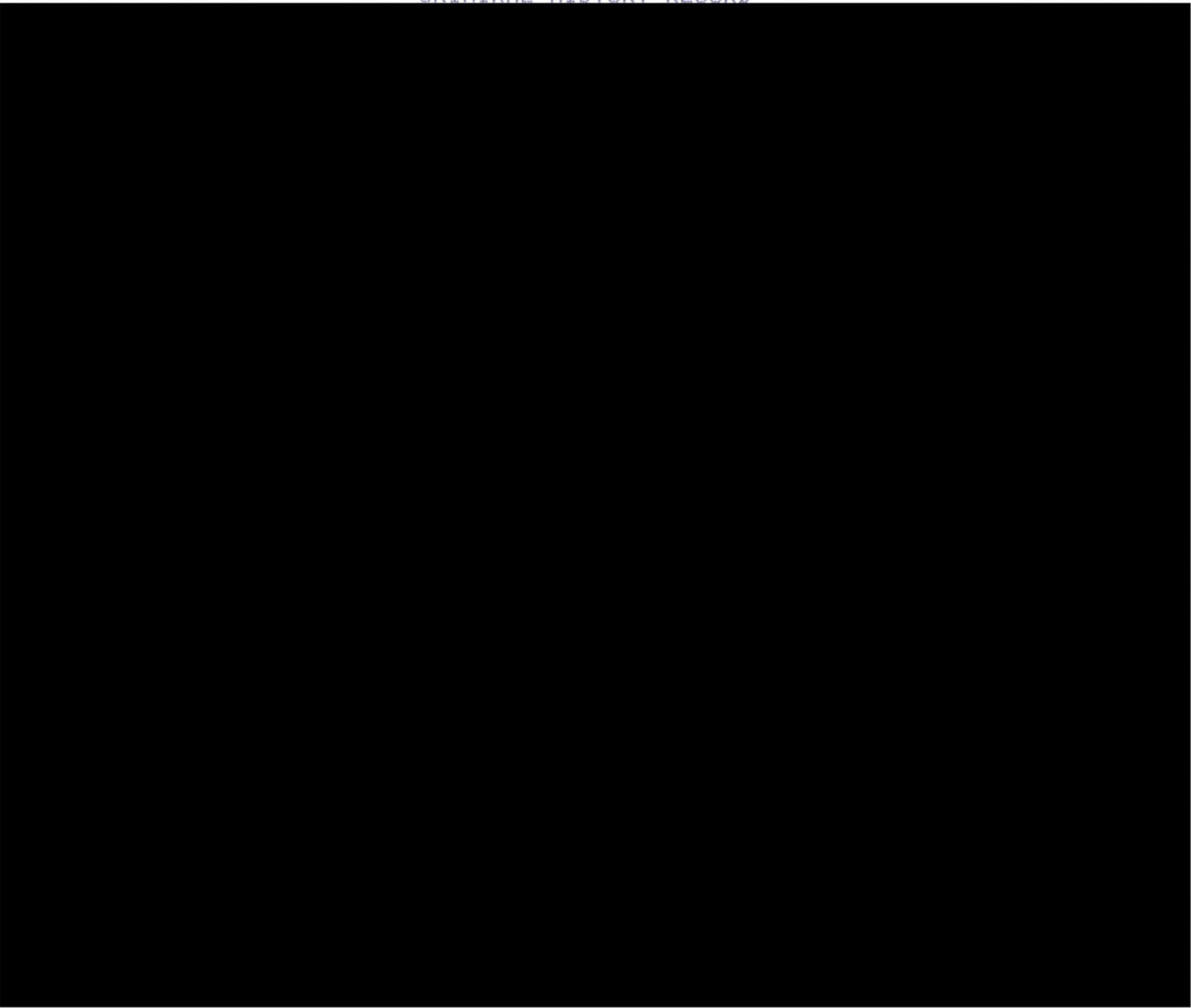




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SAN FRANCISCO POLICE DEPARTMENT  
CRIMINAL HISTORY RECORD



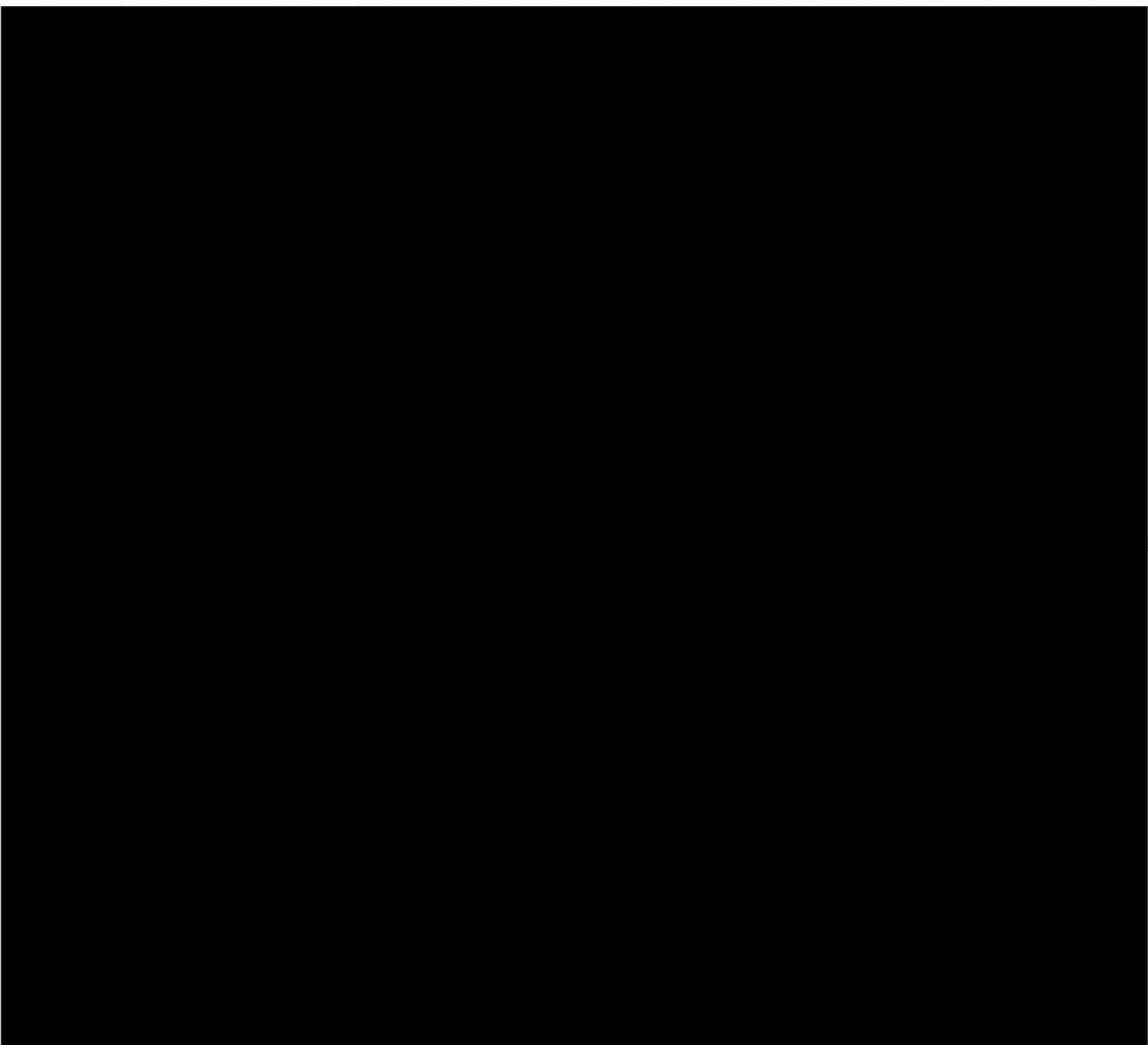
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CABLE QUERY RESPONSE

PAGE 12

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16:06

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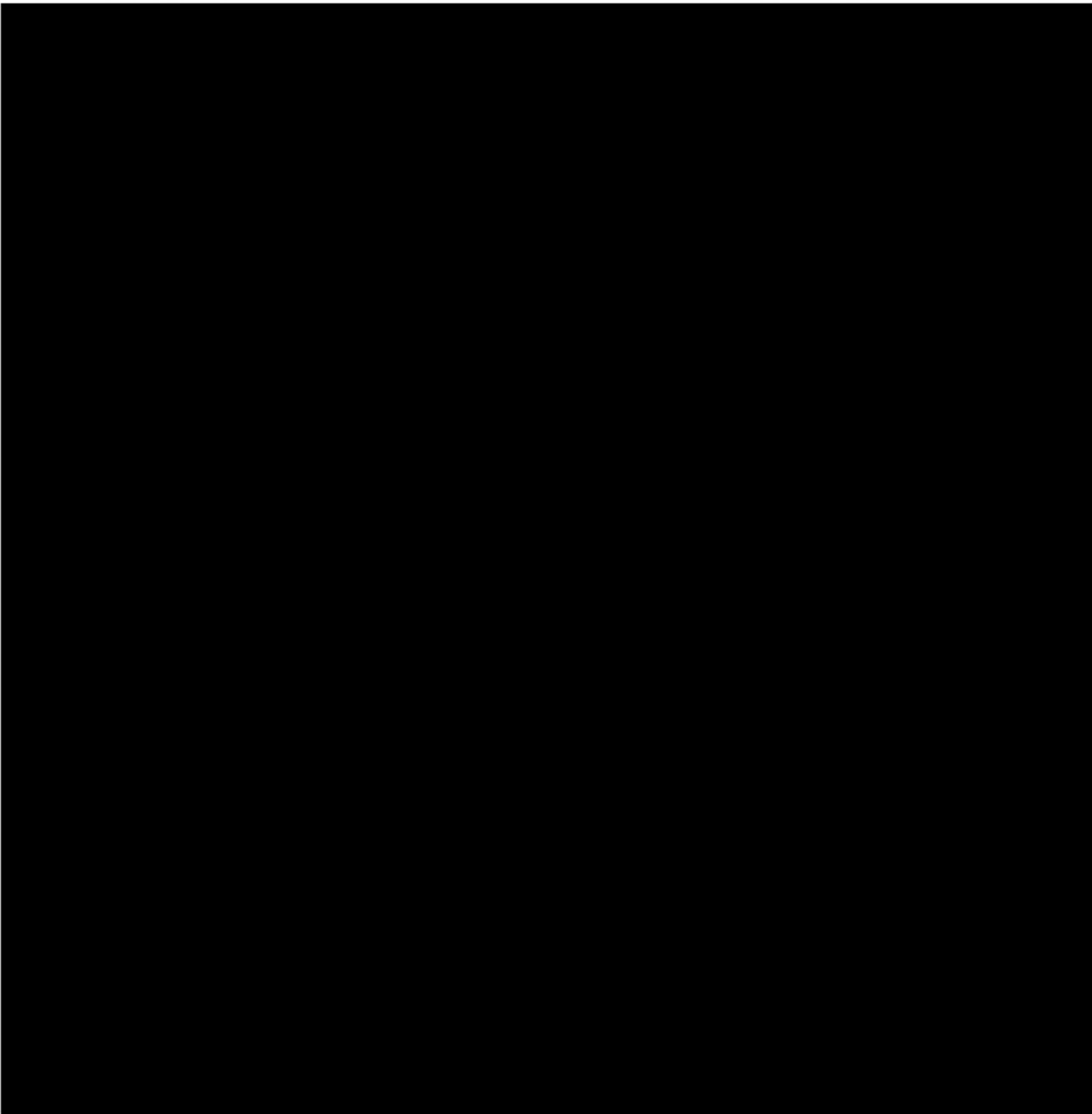
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CABLE QUERY RESPONSE

PAGE 14

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CONFIDENTIAL

SP IA01

TIBURON, INC.

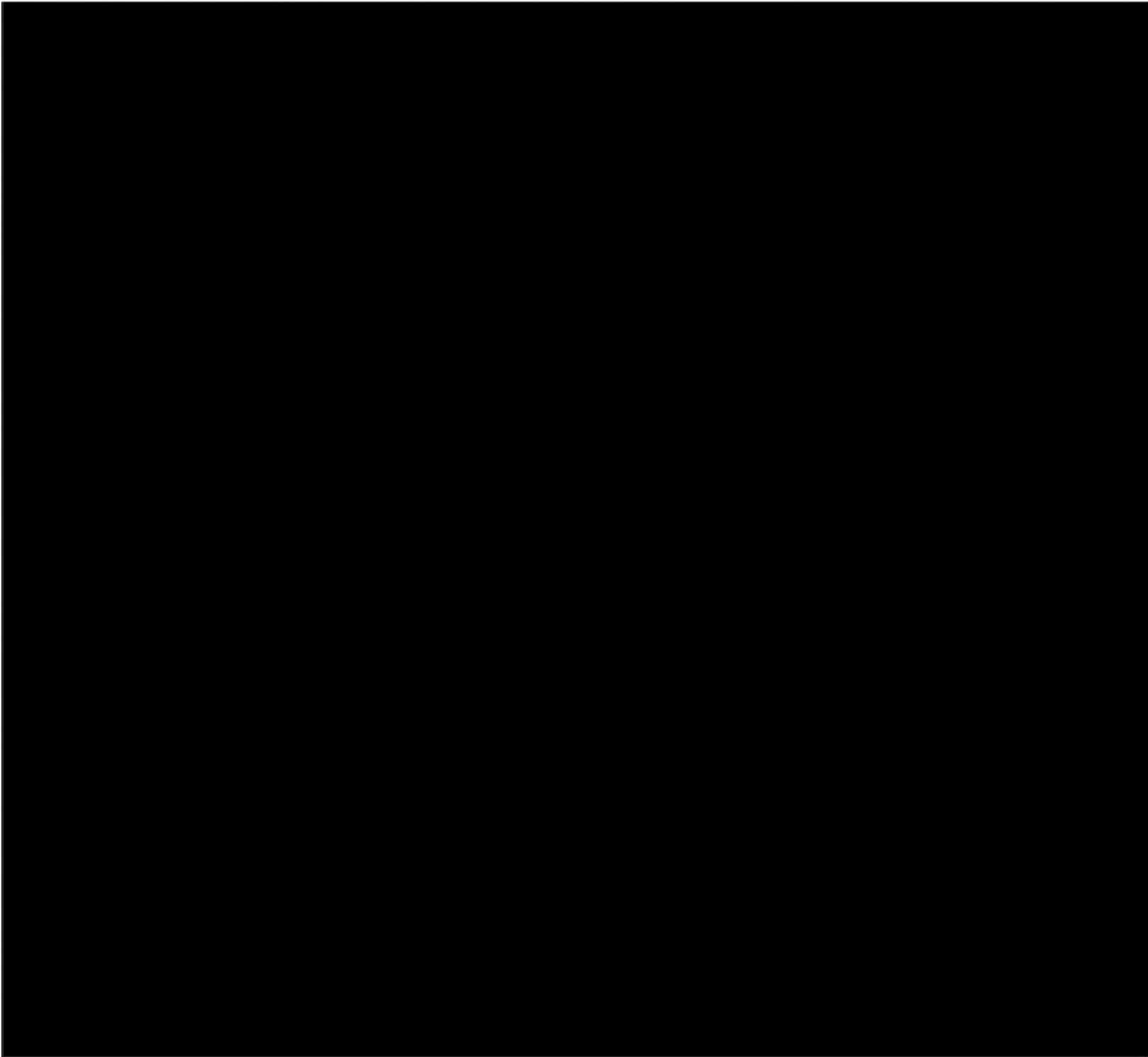
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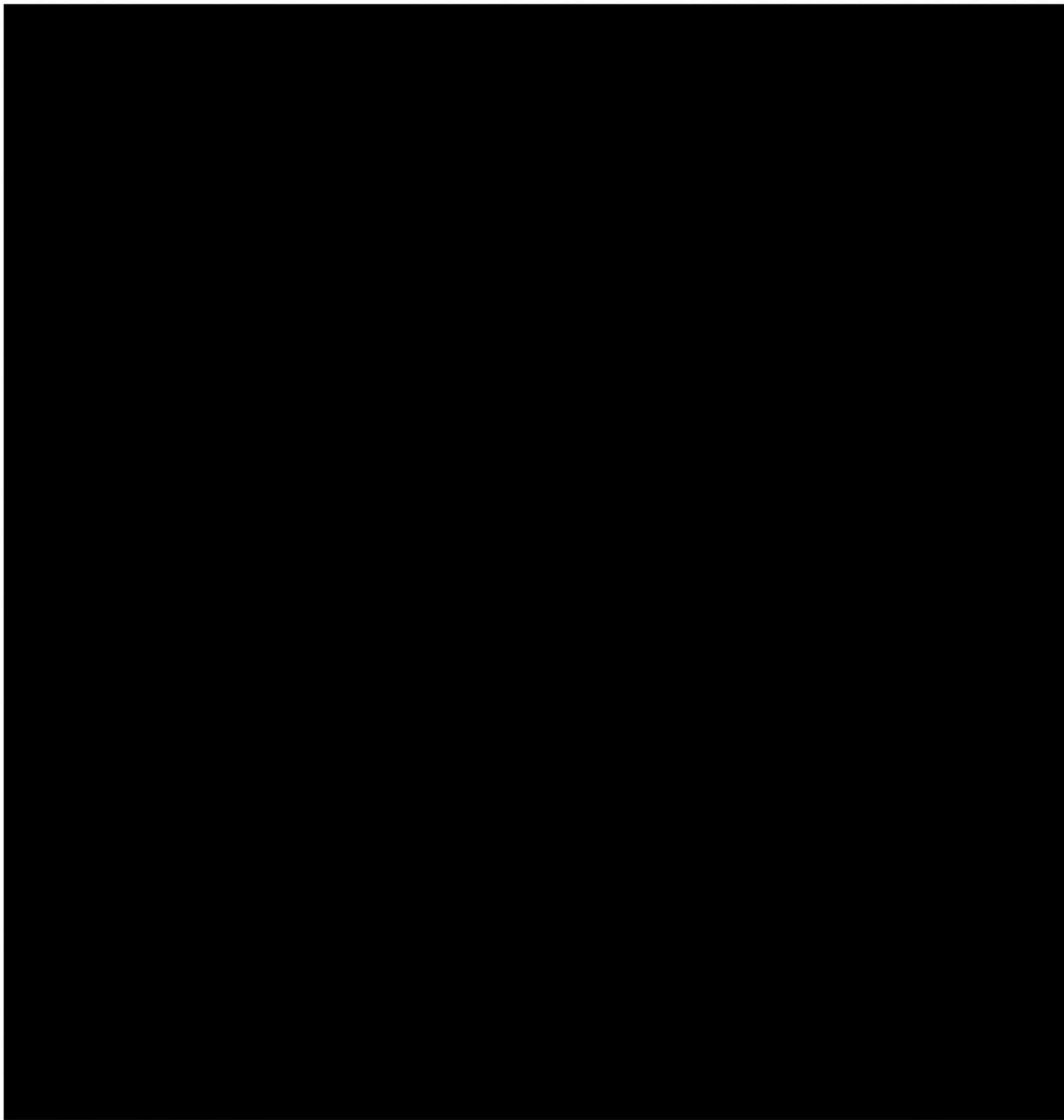


TIBURON, INC.

CABLE QUERY RESPONSE

PAGE 3

04/02/04  
16:10



SP IA01

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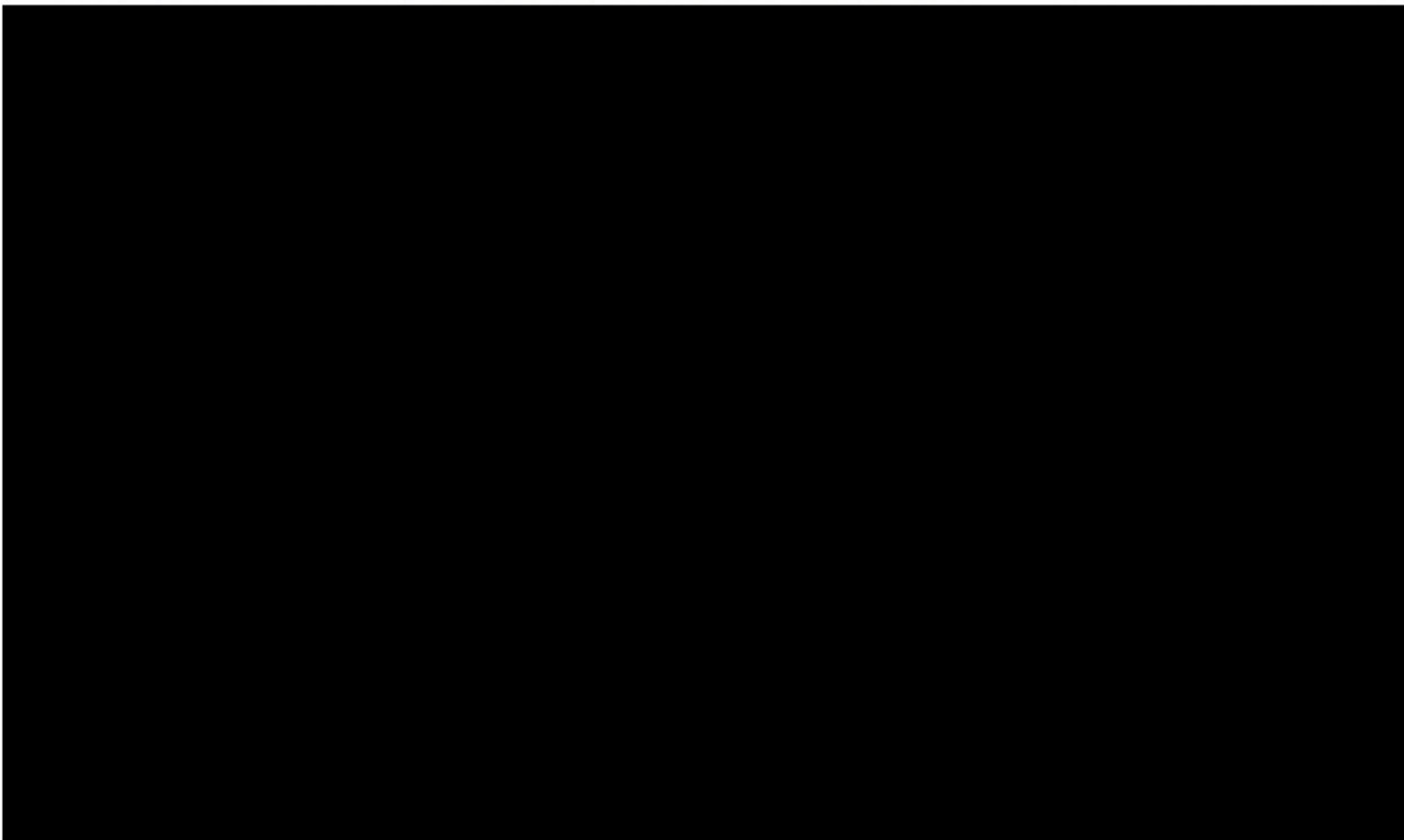
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PAGE 1

04/02/04

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TIBURON, INC.

CABLE QUERY RESPONSE

PAGE 1

11/18/04  
11:51

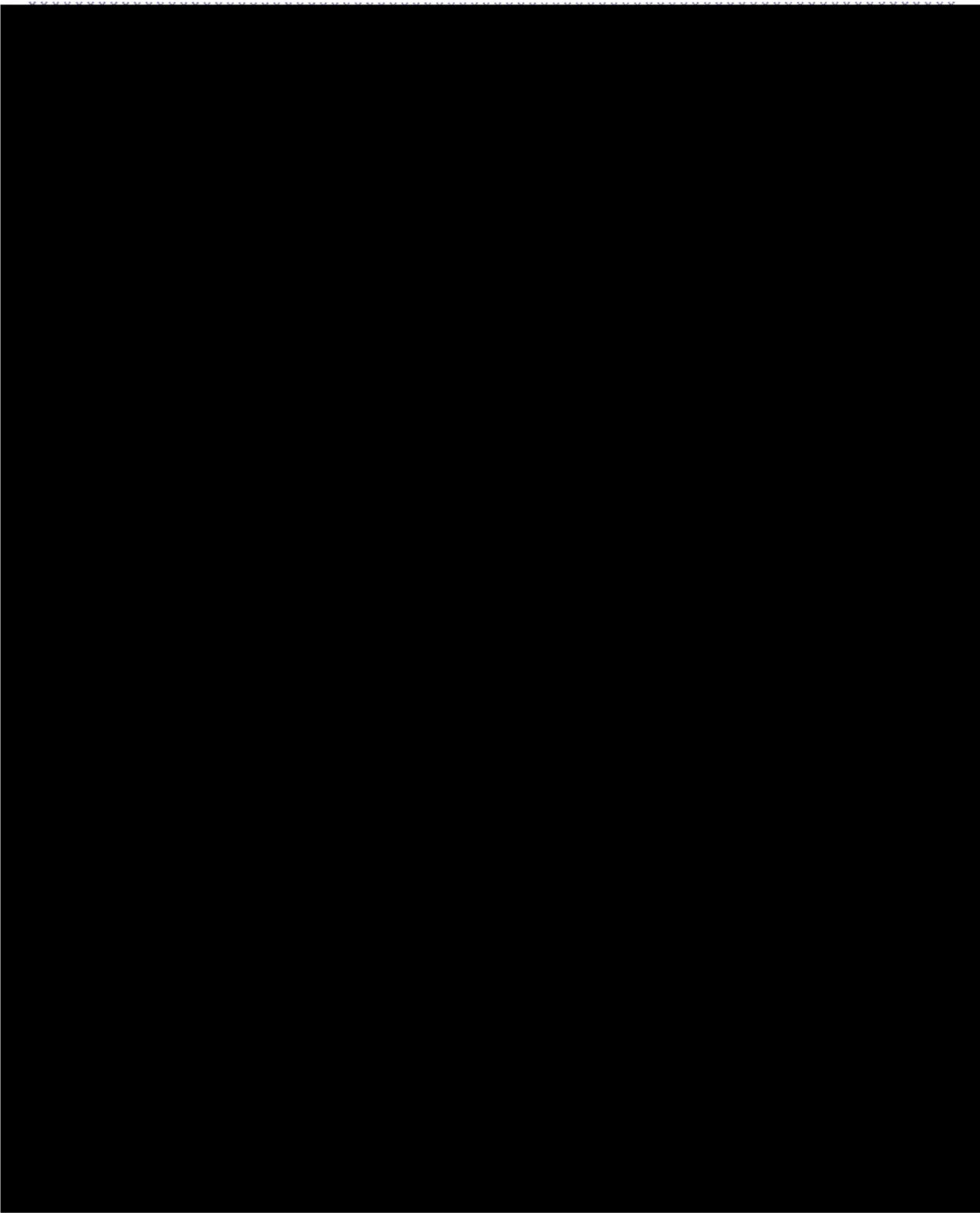
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The first part of the paper discusses the importance of understanding the underlying mechanisms of the observed phenomena. This involves a thorough review of the existing literature and a clear identification of the research gaps. The second part presents the methodology used in the study, which includes a combination of qualitative and quantitative approaches. The data collection process is described in detail, along with the statistical analysis techniques employed. The results of the study are then presented, showing the significant findings and their implications for the field. Finally, the paper concludes with a discussion of the limitations of the study and suggestions for future research.











[REDACTED]









SFDPA - 184-04 - 000134



SFDPA - 184-04 - 000135



OCC 184-04 Comp. [REDACTED]

TAKEN BY SFPD Sgt. SCOTT  
ON 2-20-04 @ TTF

SFDPA- 184-04 - 000136



080342849-02

1116 6550 SFDPA - 184-04 - 000137

Full In

Thursday 4-1-04

How Received: Person ☐ Phone ☐ Letter ☐ SFPD ☐ Mail-In ☒ Other ☐ : (specify)

### 3 Personal Information

Sex: MALE

Ethnicity: AFRICAN AMERICAN

Occupation: ACCOUNT EXECUTIVE

④ Telephone Numbers:

Home: [REDACTED]

Work: ( )

ON ELLIS BETWEEN JONES AND LEAVENWORTH

⑥ Type of Place  
STREET,  
CAR. HOSPITAL

7 District  
J

8 Day, Date, & Time Of Occurrence:

A.M. P.M.  
(Circle one)

FEB 20, 2004 FRIDAY 4:00pm

9 Incident Report or Citation No.

10 SECONDARY COMPLAINANT? Yes ☐ No ☒ Witnesses? Yes ☒ No ☐ (If "Yes" attach separate sheet of paper.)

Taped Interview? Yes ☒ No ☐ Criminal Case Pending in Relation to this matter? Yes ☒ No ☐

11 Injuries Claimed? Yes ☒ No ☐ Injuries Visible? Yes ☐ No ☒ Drug/Alcohol Related? Yes ☒ No ☐

Photos Taken? Yes ☒ No ☐ By: Photo Lab ☐ O.C.C. ☐ Other: *SPO*

Type of Injury: FACIAL LACERATION(S), ABRASIONS, etc... Medical Release Signed? Yes ☒ No ☐

12	13	14	15	16	17	18	19	20	21
Activity	Type	DISP.	Uniform	Rank	Member's Name & Star Number	Unit	Svc	Sex	Eth

SEE OCC ALLEGATION CONTINUATION FORM

SEE OLC Allegation CONTINUATION FORM

22

184-04

APPROACHED BY S.F. P.D. NARC ASK ME CAN HE SCARE FIFTY DOLLARS OF CRACK, I SUGGESTED HE GIVE ME THE MONEY. HE SAID NO. I KEPT BAWLING DOWN JONES TOWARDS ELLIS, AND SO DID HE. AS I CROSSED ELLIS AN UNKNOWN MAN ASKED THE NARC WHAT HE WANTED AND DEMAND THE MONEY, THE NARC DARTED TO OPPOSITE SIDE OF JONES. I OBSERVE THE UNKNOWN<sup>MAN</sup> FROM THE NARC ACROSS JONES, THE UNKNOWN MAN SPoke TO ANOTHER INDIVIDUAL. THE NARC AND UNKNOWN MAN WALKED BACK TOWARDS ME AND MADE TRANSACTION. POLICE OFF KASPER<sup>ER</sup> US JUMPED IN UNMARKED CAR AND LUNGED AT ME, I FLED DOWN ELLIS ST TOWARD LEAVENWORTH. I FELL/SUP IN MY BEHIND/BEHIND, OFF KASPER<sup>ER</sup> FINALLY LAUGHT UP, TACKLED ME PUT HIS LEFT HAND AROUND MY THROAT AND SAID WHILE PUNCHING ME IN THE EYE WITH SHINY OBJECT [REDACTED] I WAS PUT IN POLICE CAR [REDACTED] HUMMERED ME IN THE RIBS WITH FIST ON THE WAY TO POLICE STATION. PARAMEDICS CAME TOOK BLOOD PRESSURE AND SAID I SHOULD BE TAKEN TO GEN HOSP. [REDACTED] [REDACTED] TOOK ME TO 850 BAYVIEW, THE MEDICAL PERSON SAID US CAN RECEIVE HIM BECAUSE PARAMEDICS SIGN FROM STATING MUST GO TO GEN. HOSP, ALL THREE OFFICERS WERE IRATE AT ME IN CAR TALKING ABOUT STRIKING ME IN THE HEAD THROWING ME OFF A BRIDGE. WHILE IN HOSPITAL ALL THREE OFFICERS, [REDACTED] INSULTED ME VERBALLY AS WELL AS FEELING UNKNOWN MEDICAL STAFF I AM A RATIST TO DEMEAN AND HUMILIATE ME. WHILE FEELING DIZZY ON SEVERAL OCCASIONS I WAS DISCHARGED AND TOLD TO GET FARKING BY [REDACTED] WHEN LEAVING HOSPITAL OFF. VALERIE PUSHED MY HEAD UNTO ROOF AS I TRIED TO ENTER VEHICLE. ON NUMEROUS TIMES I HEARD ALL OFFICERS AGREE TO WHAT THE OTHERS WOULD PUT IN REPORT

*(State law passed in 1995 mandates that the following statement be provided to, read and signed by persons filing complaints. The OCC encourages the filing of a complaint by anyone who believes he or she is a victim or a witness of improper police conduct or policies.)*

ACKNOWLEDGEMENT OF COMPLAINANT (148.6 P.C.)

YOU HAVE THE RIGHT TO MAKE A COMPLAINT AGAINST A POLICE OFFICER FOR ANY IMPROPER POLICE CONDUCT. CALIFORNIA LAW REQUIRES THIS AGENCY TO HAVE A PROCEDURE TO INVESTIGATE CITIZENS' COMPLAINTS. YOU HAVE A RIGHT TO A WRITTEN DESCRIPTION OF THIS PROCEDURE. THIS AGENCY MAY FIND AFTER INVESTIGATION THAT THERE IS NOT ENOUGH EVIDENCE TO WARRANT ACTION ON YOUR COMPLAINT; EVEN IF THAT IS THE CASE, YOU HAVE THE RIGHT TO MAKE THE COMPLAINT AND HAVE IT INVESTIGATED IF YOU BELIEVE AN OFFICER BEHAVED IMPROPERLY. CITIZEN COMPLAINTS AND ANY REPORTS OR FINDINGS RELATING TO COMPLAINTS MUST BE RETAINED FOR AT LEAST FIVE YEARS. IT IS AGAINST THE LAW TO MAKE A COMPLAINT THAT YOU KNOW TO BE FALSE. IF YOU MAKE A COMPLAINT AGAINST AN OFFICER KNOWING THAT IT IS FALSE, YOU CAN BE PROSECUTED ON A MISDEMEANOR CHARGE.

☒ I HAVE READ AND UNDERSTOOD THE ABOVE STATEMENT.

☐ THE ACKNOWLEDGMENT HAS BEEN READ TO THE COMPLAINANT.

Taken By (Name/#/Unit)/Date: OCC 4/21/04

Inv. David Aulet

Closure Approval/Date:	
------------------------	--

~~Inv. Aulet 4/1/04~~

POSTED  
12-30-04

Completely Redone 4/23/04



After you have completed this form, return it to the Office of Citizen Complaints by folding it along the lines below so that the address shows on the outside. Drop in any mailbox. NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES.

在您填妥本投訴書後，請沿摺線摺妥（地址在外），投入郵箱，寄回「公民投訴組」。在美國境內寄出，不需郵費。

Después de completar la forma, doblela sobre las líneas marcadas y deposítela en el buzón. No necesita estampilla (sello postal).

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City and County of San Francisco  
OFFICE OF CITIZEN COMPLAINTS  
875 Stevenson Street, Room 125  
San Francisco, CA 94103-0917



# Police Commission for the City and County of San Francisco OFFICE OF CITIZEN COMPLAINTS



## ~CITIZEN COMPLAINT FORM~

### INSTRUCTIONS FOR COMPLETION OF THE CITIZEN COMPLAINT FORM:

Please answer questions in blocks 2, 3, 4, 5, 8, 11, 15, 17, 20, 21 & 22. Leave all other blocks blank unless you know the information requested. Please **print** all information in **English**. If you do not have a telephone number, enter a message number or the number of a neighbor, friend or relative in block 4. If witnesses are available, write their names, addresses and telephone numbers on a separate sheet of paper and attach it to your complaint. Do not write them on the complaint form. If you do not know the officers name or badge number, include a complete physical description in the narrative (22). **Print** your narrative. Explain what happened from beginning to end. Be specific as to the nature of your complaint against each officer. Include who, what, where, when and why. If you need additional space, use separate sheets of paper and attach them to the complaint. **YOUR STATEMENT MUST BE A TRUE AND ACCURATE ACCOUNT OF THE INCIDENT** to the best of your knowledge and belief, and **must be signed** by you in block 22. If you have questions or need help, please call the OCC at (415) 597-7711 between 8:00 a.m. and 5:00 p.m., or leave a message with our answering service after 5:00 p.m. You may also contact your local neighborhood center for help. Interpreters can be provided at no charge.

### 填寫公民投訴書說明：

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**PARAAN NG PAGSAGOT SA PORMANG ITO (CITIZEN COMPLAINT o REKLAMO NG MAMAMAYAN)** Mangyaring sagutin ang mga tanong sa blokeng 2, 3, 4, 5, 8, 11, 15, 17, 20, 21, at 22. Kung wala kayo ng impormasyon hinihingi dito, paki-iwanan blanko ang blokeng hindi masagot. **Paki-ilmbag ang lahat na sagot ninyo.** Kung wala kayong telepono, paki-sulat lang ang inyong "message number", o ang numero ng inyong kapit-bahay, kaibigan, o kamaganak. Kung mayroon kayong mga saksi o testigo, isulat sa ibang papel ang kanilang mga pangalan, mga tirahan, at mga telepono at ikabit ito sa reklamo ninyo. Huwag gagamitin ang pormang ito. Kung hindi ninyo alam ang pangalan ng o ang numero ng kanyang tsapa, isama sa inyong salaysay ang hitsura at pagmumukha ng pulis. Ilmbag ang inyong salay. Liwanagin lahat ang nangyari magmula sa umpisa hanggang sa katapusan. Tiyakin o siguraduhin ang inyong sinusumbong o renireklamo. Sabihin o ilarawan kung sino, ano, saan, kailan at bakit sa pangyayari. Kung kulang ang pagsusulat dito gumamit ng ibang papel at ikabit ito sa sumbong ninyo. Sa inyong kaalaman at paniniwala, ang inilalahad ninyong nangyari ay dapat lubos na katotohanan at walang kamali-mali at kailangan ninyong pirmahan ang sumbong ito sa blokeng bilang 22. Itanong sa amin kung alinman dito ang hindi maliwanag sa inyo. Kung kailangan ninyo ng tulong, paki-tawagan kami, OCC, telepono (415) 597-7711. Maaring tawagan din ninyo ang Philippines American Consul sa telepono (415) 626-0773 sa pagitan ng alas-otso ng umaga at alas-singko ng hapon o mag-iwan ng pahatid o "message" sa aming "answering service" paglampas ng alas-singko ng hapon.



## 003 ALLEGATION CONTINUATION FORM

OCC CASE NO. 184-04

**COMPLAINANT:**

[illegible]

**DESCRIPTION:**

THIS COMPLAINT IS OF:

COMPLAINANT:

[illegible]

**DESCRIPTION:**

THIS COMPLAINT IS OF:

Unnecessary Force (UF) - The off. used excessive force during the arrest. (68)



K.I.I In

4-20-04

SFDPA - 184-04 - 000142



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# Police Commission for the City and County of San Francisco OFFICE OF CITIZEN COMPLAINTS



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**OFFICE OF CITIZEN COMPLAINTS  
COMPLAINT SUMMARY REPORT**

**DATE OF COMPLAINT:** 04/01/04 **DATE OF COMPLETION:** 12/27/04 **PAGE#** 1 of 4

**SUMMARY OF ALLEGATION #1 & 2:** [REDACTED]

**CATEGORY OF CONDUCT:** [REDACTED]

**FINDING:** [REDACTED]

**DEPT. ACTION:**

**FINDINGS OF FACT:** [REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]

**SUMMARY OF ALLEGATION # 3:** The officer used unnecessary force during the arrest.

**CATEGORY OF CONDUCT:** UF

**FINDING:** NS

**DEPT. ACTION:**

**FINDINGS OF FACT:** The complainant stated that the officer grabbed him by the throat and punched him in the face twice. The named officer stated that he punched the complainant in the face in self-defense after the complainant punched him in the nose. Several witness officers stated that the named officer punched the complainant after the complainant punched him. A civilian witness stated that the officer punched the complainant without provocation, but refused to provide a formal statement to OCC. No other civilian witnesses could be identified. There is insufficient evidence to prove or disprove the allegation.

REVISED 04/20/00



**OFFICE OF CITIZEN COMPLAINTS  
COMPLAINT SUMMARY REPORT**

**DATE OF COMPLAINT:** 04/01/04 **DATE OF COMPLETION:** 12/27/04 **PAGE#** 2 **of** 4

**SUMMARY OF ALLEGATION # 4:** [REDACTED]

**CATEGORY OF CONDUCT:** [REDACTED]

**FINDING:** [REDACTED]

**DEPT. ACTION:**

**FINDINGS OF FACT:** [REDACTED]

**SUMMARY OF ALLEGATION #5:** [REDACTED]

**CATEGORY OF CONDUCT:** [REDACTED]

**FINDING:** [REDACTED]

**DEPT. ACTION:**

**FINDINGS OF FACT:** [REDACTED]

REVISED 04/20/00



**OFFICE OF CITIZEN COMPLAINTS  
COMPLAINT SUMMARY REPORT**

**DATE OF COMPLAINT:** 04/01/04 **DATE OF COMPLETION:** 1/27/04 **PAGE#** 3 **of** 4

**SUMMARY OF ALLEGATION # 6:** [REDACTED]

**CATEGORY OF CONDUCT:** [REDACTED]

**FINDING:** [REDACTED]

**DEPT. ACTION:**

**FINDINGS OF FACT:** [REDACTED]  
[REDACTED]

**SUMMARY OF ALLEGATION #7-10:** [REDACTED]  
[REDACTED]

**CATEGORY OF CONDUCT:** [REDACTED]

**FINDING:** [REDACTED]

**DEPT. ACTION:**

**FINDINGS OF FACT:** [REDACTED]  
[REDACTED]

REVISED 04/20/00

**OFFICE OF CITIZEN COMPLAINTS  
COMPLAINT SUMMARY REPORT**

**DATE OF COMPLAINT:** 04/01/04 **DATE OF COMPLETION:** 12/27/04 **PAGE#** 4 **of** 4

**SUMMARY OF ALLEGATION # 11 & 12:** [REDACTED]

**CATEGORY OF CONDUCT:** [REDACTED]

**FINDING:** [REDACTED]

**DEPT. ACTION:**

**FINDINGS OF FACT:** [REDACTED]

**SUMMARY OF ALLEGATION #:**

**CATEGORY OF CONDUCT:**

**FINDING:**

**DEPT. ACTION:**

**FINDINGS OF FACT:**

REVISED 04/20/00

THE POLICE COMMISSION  
**OFFICE OF CITIZEN COMPLAINTS**

CITY AND COUNTY OF SAN FRANCISCO

December 29, 2004

**COPY**



Kevin Allen  
Director

RE: OCC Case No. 0184-04

Dear [REDACTED]:

The Office of Citizen Complaints has conducted an investigation of the above-referenced complaint. A summary follows of the OCC's **preliminary** findings as to each allegation:

[REDACTED]

The allegation of **Unnecessary Force** against a police officer for using unnecessary force during the arrest is **Not Sustained**.

[REDACTED]

Please refer to the attached information for definitions of these findings. If you are not satisfied with the preliminary disposition indicated above, you have the right to request an investigative hearing on this complaint. (Please see information sheet, enclosed). The OCC strongly recommends that, to assist you in determining the grounds for a hearing, you call promptly to make an appointment with the investigator in your case, **J. Wechter** at **597-7711**, to discuss the preliminary findings and to review the evidence upon which the findings are based.



Mr. [REDACTED]  
OCC Case No. 0184-04


Page 2

Your written request for a hearing must be mailed or delivered within ten (10) days of the date that you receive this letter to the following address:

**Office of Citizen Complaints  
ATTN: Investigative Hearing Coordinator  
480-2nd Street, Suite 100  
San Francisco, CA 94107**

As members of SFPD know, Department General Order 2.04 III. A.5.a. requires that, after OCC's investigation, including any investigative hearing, the OCC's investigation and findings as to sustained allegations shall be transmitted to the Chief of SFPD or the Chief's designee for review and action.

Sincerely,

  
Kevin Allen, Director  
KA: cw  
Attachment Enclosed

# OFFICE OF CITIZEN COMPLAINTS

CITY AND COUNTY OF SAN FRANCISCO

**COPY**



**Kevin Allen**  
Director

December 29, 2004

Officer Jon Kasper #68  
Narcotics Division

**RE: OCC Case No. 0184-04**

Dear Officer Kasper:

The Office of Citizen Complaints has conducted an investigation of the above-referenced complaint. A summary follows of the OCC's **preliminary** findings as to each allegation:

[REDACTED]

The allegation of **Unnecessary Force** for using unnecessary force during the arrest is **Not Sustained**.

[REDACTED]

[REDACTED]

[REDACTED]

Please refer to the attached information for definitions of these findings. If you are not satisfied with the preliminary disposition indicated above, you have the right to request an investigative hearing on this complaint. (Please see information sheet, enclosed). The OCC strongly recommends that, to assist you in determining the grounds for a hearing, you call promptly to make an appointment with the investigator in your case, **J. Wechter** at **597-7711**, to discuss the preliminary findings and to review the evidence upon which the findings are based. Your written request for a hearing must be mailed or delivered within ten (10) days of the date that you receive this letter to the following address:

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**San Francisco, CA 94107**

Officer Jon Kasper #68  
OCC Case No. 0184-04

Page 2

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Sincerely,



Kevin Allen, Director

KA: cw

cc: Commanding Officer  
Attachment Enclosed



# OFFICE OF CITIZEN COMPLAINTS

CITY AND COUNTY OF SAN FRANCISCO

December 29, 2004

**COPY**



Kevin Allen  
Director

**RE: OCC Case No. 0184-04**

Dear Officer [REDACTED]

The Office of Citizen Complaints has conducted an investigation of the above-referenced complaint. A summary follows of the OCC's **preliminary** findings as to each allegation:

[REDACTED]

Please refer to the attached information for definitions of these findings. If you are not satisfied with the preliminary disposition indicated above, you have the right to request an investigative hearing on this complaint. (Please see information sheet, enclosed). The OCC strongly recommends that, to assist you in determining the grounds for a hearing, you call promptly to make an appointment with the investigator in your case, **J. Wechter** at **597-7711**, to discuss the preliminary findings and to review the evidence upon which the findings are based. Your written request for a hearing must be mailed or delivered within ten (10) days of the date that you receive this letter to the following address:

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San Francisco, CA 94107**

As members of SFPD know, Department General Order 2.04 III. A.5.a. requires that, after OCC's investigation, including any investigative hearing, the OCC's investigation and findings as to sustained allegations shall be transmitted to the Chief of SFPD or the Chief's designee for review and action.

Sincerely,

  
Kevin Allen, Director

KA: cw

cc: Commanding Officer

Attachment Enclosed

# OFFICE OF CITIZEN COMPLAINTS

CITY AND COUNTY OF SAN FRANCISCO

December 29, 2004

**COPY**



Kevin Allen  
Director

**RE: OCC Case No. 0184-04**

Dear [REDACTED]

The Office of Citizen Complaints has conducted an investigation of the above-referenced complaint. A summary follows of the OCC's **preliminary** findings as to each allegation:

[REDACTED]

Please refer to the attached information for definitions of these findings. If you are not satisfied with the preliminary disposition indicated above, you have the right to request an investigative hearing on this complaint. (Please see information sheet, enclosed). The OCC strongly recommends that, to assist you in determining the grounds for a hearing, you call promptly to make an appointment with the investigator in your case, **J. Wechter** at **597-7711**, to discuss the preliminary findings and to review the evidence upon which the findings are based. Your written request for a hearing must be mailed or delivered within ten (10) days of the date that you receive this letter to the following address:

**Office of Citizen Complaints  
ATTN: Investigative Hearing Coordinator  
480-2nd Street, Suite 100  
San Francisco, CA 94107**

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Sincerely,

A handwritten signature in dark ink, appearing to read "K. Allen".

Kevin Allen, Director

KA: cw

cc: Commanding Officer

Attachment Enclosed



# OFFICE OF CITIZEN COMPLAINTS

CITY AND COUNTY OF SAN FRANCISCO

December 29, 2004

**COPY**

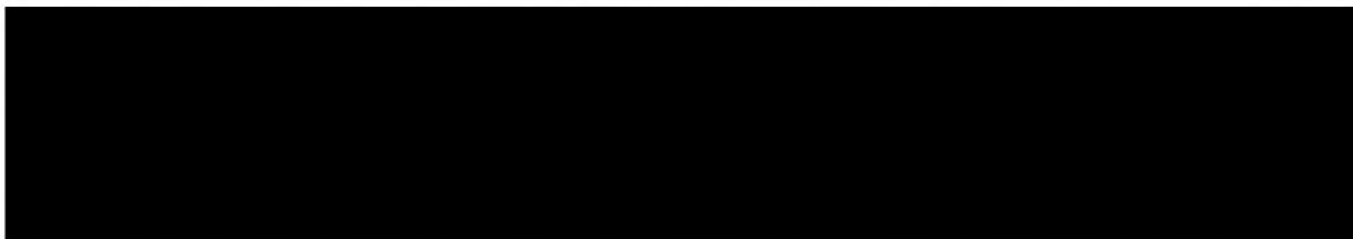


Kevin Allen  
Director

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Sincerely,

A handwritten signature in dark ink, appearing to read "K Allen".

Kevin Allen, Director

KA: cw

cc: Commanding Officer  
Attachment Enclosed



# OFFICE OF CITIZEN COMPLAINTS

CITY AND COUNTY OF SAN FRANCISCO

December 29, 2004

**COPY**



**Kevin Allen**  
Director

**RE: OCC Case No. 0184-04**

Dear [REDACTED]

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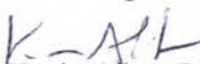
[REDACTED]

Please refer to the attached information for definitions of these findings. If you are not satisfied with the preliminary disposition indicated above, you have the right to request an investigative hearing on this complaint. (Please see information sheet, enclosed). The OCC strongly recommends that, to assist you in determining the grounds for a hearing, you call promptly to make an appointment with the investigator in your case, **J. Wechter** at 597-7711, to discuss the preliminary findings and to review the evidence upon which the findings are based. Your written request for a hearing must be mailed or delivered within ten (10) days of the date that you receive this letter to the following address:

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Sincerely,

  
Kevin Allen, Director

KA: cw

cc: Commanding Officer  
Attachment Enclosed

OFFICE OF CITIZEN COMPLAINTS  
COMPLAINT SUMMARY REPORT

DATE OF COMPLAINT: 4/1/04 DATE OF COMPLETION: PAGE# 1 of 4

Officer: [REDACTED]

SUMMARY OF ALLEGATION #1 & 2: [REDACTED]

CATEGORY OF CONDUCT: [REDACTED] FINDING: [REDACTED] DEPT. ACTION:

FINDINGS OF FACT: [REDACTED]

Officer: Off. Kasper # 68

SUMMARY OF ALLEGATION # 3: The officer used unnecessary force during the arrest

CATEGORY OF CONDUCT: UF FINDING: NS DEPT. ACTION:

**FINDINGS OF FACT:** The complainant stated that the officer grabbed him by the throat and punched him in the face twice. The named officer stated that he punched the complainant in the face in self-defense after the complainant punched him in the nose. Several witness officers stated that the named officer punched the complainant after the complainant punched him. A civilian witness stated that the officer punched the complainant without provocation, but refused to provide a formal statement to OCC. No other civilian witnesses could be identified. There is insufficient evidence to prove or disprove the allegation.

NOTES:

9KA 3

OFFICE OF CITIZEN COMPLAINTS  
COMPLAINT SUMMARY REPORT

DATE OF COMPLAINT: 4/1/04 DATE OF COMPLETION: PAGE# 2 of 4

Officer: [REDACTED]

SUMMARY OF ALLEGATION # 4 : [REDACTED]

CATEGORY OF CONDUCT: [REDACTED] FINDING: [REDACTED] DEPT. ACTION:

FINDINGS OF FACT: [REDACTED]

[REDACTED]

[REDACTED]  
SUMMARY OF ALLEGATION #5: [REDACTED]

CATEGORY OF CONDUCT: [REDACTED] FINDING: [REDACTED] DEPT. ACTION:

FINDINGS OF FACT: [REDACTED]

[REDACTED]

NOTES:

GKA



OFFICE OF CITIZEN COMPLAINTS  
COMPLAINT SUMMARY REPORT

DATE OF COMPLAINT: 4/1/04 DATE OF COMPLETION: PAGE# 3 of 4

Officer: [REDACTED]

SUMMARY OF ALLEGATION # 6 : [REDACTED]

CATEGORY OF CONDUCT: [REDACTED] FINDING: [REDACTED] DEPT. ACTION:

FINDINGS OF FACT: [REDACTED]  
[REDACTED]

Officer: [REDACTED]

SUMMARY OF ALLEGATION #7-10: [REDACTED]  
[REDACTED]

CATEGORY OF CONDUCT: [REDACTED] FINDING: [REDACTED] DEPT. ACTION:

FINDINGS OF FACT: [REDACTED]  
[REDACTED]

NOTES:

gka

OFFICE OF CITIZEN COMPLAINTS  
COMPLAINT SUMMARY REPORT

DATE OF COMPLAINT: 4/1/04 DATE OF COMPLETION: PAGE# 4 of 4

Officer: [REDACTED]

SUMMARY OF ALLEGATION # 11 & 12 : [REDACTED]

CATEGORY OF CONDUCT: [REDACTED] FINDING: [REDACTED] DEPT. ACTION:

FINDINGS OF FACT: [REDACTED]

[REDACTED]

NOTES:

*JKH*

## COMPLAINT WORK SUMMARY

OCC #

184-04

NAME

INV.

Aulet

PAGE #

1 of

DATE

ACTIVITY

4/1/04

- Rec'd 293

4/2/04

- Called C's Hm#, LMT on Female's voice mail  
 - QAIL, QRAP, QIR, QMAR, QPAL attached.  
 - Ordered IR. - Sent Comp cont. Letter.

Per AIR

the CAD# [REDACTED]

Another Subject [REDACTED]

Bm [REDACTED]

was booked w/ comp. [REDACTED]

was/is

a parolee

en route to CDC, no local address.

- HRms, QCH attached but contains no info. other than IR#.

- QIR has Lt Gill-Kehoe writing the report so:

- QUT of SNS2 (Gill-Kehoe), SNS5 (Kasper), SNS4 (Healy),  
 SNS7 (Schaffer), and SNS8 (Valdez). Only the

unit histories of Healy & Valdez reflect a CAD,  
 # 040512393 Arrest @ Jones/Ellis.

- CAD Above printed & attached. Its an original memo  
 by INS. Robert Doss (SNS1) about a citizen knocked down by units,  
 may require 408 ... Then "1 408 Bm Conscious & Breathing  
 Laceration Above Eye." Bleeding Control & Redirect 408  
 to C.J. @ the request of Lt Healy.

- QUT of INS. Doss also included. (SNS1).

4/5/04

- Although I w/in; occ Rec'd IR which lists Lt Guavero,  
 Ricardo 1162 (SNS3) as the close cover officer in this buy  
 bust transaction conducted by Lt Gill-Kehoe, and arrest made  
 by Lt Kasper but w/ assistance of Doss, Healy, and Schaffer to cuff comp.



OFFICE OF CITIZEN COMPLAINTS  
COMPLAINT WORK SUMMARY

OCC CASE #: 184-04

NAME: [REDACTED]

INV. NAME: AULET

PAGE: 2

=====

DATE & ACTIVITY (DATE & SIGN AFTER FINAL ENTRY ON EACH PAGE)

04/06/04- After reading the IR, I called CJ3, C is @ 5 north 22.  
The incident was in February, send C a letter w/ 293 to call me  
collect for his interview.  
[REDACTED]

04/06/04- The allegations so far are:

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Possibly: [REDACTED]

[REDACTED]

- Daily Arrest log of Co. J attached, [REDACTED] listed not [REDACTED]
- Co. J UOF log found in binder, this IR was not among entries.
  - OCC binder does NOT have the UOF log of Narcotics.
  - Called Lt. Parry and LM to fax me the UOF log as well as those for February and March, all 4 of which are not in OCC's binder. (Pending review of UOF, possible Added ND- for failure to make a UOF entry against. Sgt. Scott #1488 to whom the force/injuries were notified.)

4/6/04- To CG for intake review. ~~XXXX~~

4/2/04 The proposed allegations are appropriate for now after the comp interview the file will be reviewed by our legal for review. If no response from comp at Bruno by 4/15/04 visit him so that the case can be forwarded to the DI unit.

*gat*



OFFICE OF CITIZEN COMPLAINTS  
COMPLAINT WORK SUMMARY

OCC CASE #: 184-04

NAME: [REDACTED]

INV. NAME: AULET

PAGE: 3

=====

DATE & ACTIVITY (DATE & SIGN AFTER FINAL ENTRY ON EACH PAGE)

4/12/04- File placed in Inv. Barnes' (out sick) mail box by mistake. Rec'd file this morning, located UOF from Narcotics, sent by Lt. Parry via fax.

-UOF log (narcotics) is not very legible but the entry by Ins. Scott as to Q2 Kasper's use of force seem to say that "Off Kasper sustained a bloodied s????? nose . . . (The rest is not legible) Both the suspect and the officer were reported injured and a report of struck by fist was circled.

-updated 293, copied for admin, and will take comp's copy to CJ3 upon response there for interview.

04/15/04- Rec'd Polaroid of C from legal.

04/21/04- Went to CJ3, taped comp. [REDACTED] who had rec'd the OCC letter but d/n read carefully the text; hence, did not call.

-Taped (Comp. [REDACTED] CJ3 (5N22)

C stated that he is no longer facing criminal charges regarding this incident, for the charges were dropped by the D.A.

C added to the proposed allegations that his arrest was unwarranted. C stated that he was leaving Geary and Jones walking towards Ellis when a gentleman, later identified as Q2 Gill-Kehoe, approached him (not the other way around) and asked him where he could get a forty. C asked the Q2 to give him the money but the Q2 said no so C continued walking down Ellis Street. The Q2 also walked in the same direction. At the corner of Jones & Ellis St. C walked to the opposite side of Ellis street toward a corner store from where he observed the same Q2 trying to score some drugs from other people on the street. It was funny because everyone the Q2 approached would ask the Q2 to give him the money but the Q2 w/n. The Q2 then ran across the street and made a transaction with a gentleman, [REDACTED] Officers came out of a car, arrested [REDACTED] One of the officers ran toward him so he took off running on Ellis toward Leavenworth Street. C was 20 yards ahead of the Q2. However, C did hear the officers yelling something possibly "Stop police, stop police" so C stopped and sat on the ground with his hands extended out to the sides with palms open. [REDACTED]

After C sat down on the sidewalk, C could see Q2 Kasper #68 (whom he recognize from the SFPD produced photo) running toward him. C clarified that it was Q2 Kasper who punched him, not Healy. C said that Kasper grabbed C by the neck as he approached running, which caused C to go backward as Q2 Kasper punched him twice with a closed fist on the left side of his face causing a laceration on the left eyebrow that required several stitches. (See attached SFPD Polaroid of C's face @ TTF bench) C saw something shinning at the time just prior to being struck and therefore believed that Q2 Kasper either had some



OFFICE OF CITIZEN COMPLAINTS  
COMPLAINT WORK SUMMARY

OCC CASE #: 184-04

NAME: [REDACTED]

INV. NAME: AULET

PAGE: 4

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DATE & ACTIVITY	(DATE & SIGN AFTER FINAL ENTRY ON EACH PAGE)
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metal around his fist or perhaps there was something shining in the officer's background. C d/n know what the shining object was. UF-  
The off. used excessive force during the arrest. (68): DGO 5.01 I.M. UF defined.- (Medical Hippa release form updated)

C stated that as Q2 Kasper was punching him, Kasper said, [REDACTED]

[REDACTED] Q2 Kasper then ordered C to turn onto his stomach, C complied and put his hands behind his back without being told. C assumed that Q2 Kasper handcuffed him. C stated that he saw blackness; d/n know whether or not he had lost consciousness. Kasper then handcuffed him. C heard someone summoning an ambulance, but he was put 5 minutes later into an unmarked car. C stated that they all waited several minutes seated in the car for the paramedics to respond, and then driven to TTF a couple of blocks away. On the way to the station, Q2 Healy rode to his left in the back seat of the unmarked car; Q2 Valdez seated on his right side. Q2 Schaffer drove the car.

[REDACTED] knocked the fuck out!" to demean him. [REDACTED] Officers asked repeated questions such as Why did you run? and Don't look at me! All of a sudden [REDACTED] punched him several times on the left side of his torso w/o any provocation or reason while being handcuffed. [REDACTED]

[REDACTED] C was at TTF for about 30 minutes before a BM, bald headed, 50's who appeared to be a supervisor took (2) pictures of him. This BM in plainclothes was apparently counseling another BM in plainclothes, who was present during the arrest, about C's condition. C c/n hear it.

C stated that the paramedics arrived about 30 minutes after his arrival @ TTF, he was assessed by a BM attendant (driver was WM), and the BM told officers present that C needed to be taken to a hospital. One unknown uniformed Q2 at the station, Q2 Kasper, and other arresting officers in plainclothes were present when one of them said "OK," but C was instead taken to CJ9 by Q2 Valdez, Q2 Schaffer, and Q2 Healy. After one of them said "OK" to the paramedics, Q2 Kasper told his other officers that he was going to the hospital to get himself checked out. When officers arrived @ CJ9, the WM triage nurse told officers they w/n accept C due to the paramedics chart which specifically directs officers twice to take C directly to an ER. Offs. seemed disappointed by the rejection based on their facial gestures.

C stated that Q2 Schaffer drove then to SFGH, where C felt dizzy, but officers downplayed his condition to C and SFGH personnel. Offs. were [REDACTED]

At [REDACTED] admissions, someone else in SFGH told officers to let C sit down. Either Q2 Healy or Q2 Valdez, who were behind him, removed the right handcuff to allow him to sign some admission papers and when he was



OCC CASE #: 184-04

NAME: [REDACTED]  
INV. NAME: AULET  
PAGE: 5

DATE & ACTIVITY (DATE & SIGN AFTER FINAL ENTRY ON EACH PAGE)

picked up too fast, he felt dizzy again so the officers dragged C to the back into a treatment room. All four officers were congregated around the treatment room in the presence of either physician and/or nurse(s) whom he c/n see because he was cuffed to the gurney and told not to look at them (officers). C believed the doctor who evaluated him was Healy a WM in his low 30's. [REDACTED]

C was then taken out of SFGH by Healy, Valdez, Schaffer. Q2 Kasper told other that he was going to rondebue and meet them somewhere else later. [REDACTED]

After they left SFGH, while en route to CJ9,

C had a copy of the IR and contested the accuracy of the facts in the report by Q2 Gill-Kehoe #1012 leading to his arrest. C said the report was inaccurate/false. C said that whoever wrote the IR is the person who approached him. C left the corner of Geary & Jones walking toward Ellis Street, not walking down Jones Street. C denied approaching Gill-Kehoe, it was Gill-Kehoe who approached him. C denied asking anyone "what do you need?" Gill-Kehoe instead asked him if he knew where he (Q2) can get some drugs while holding two 20 dollar bills down to his right side. C denied telling the undercover Q2 (Gill-Kehoe) that he could get some (rocks for 40) and to follow him. C denied pointing to any BF seated on a fire hydrant, telling Gill-Kehoe that the BF was his lookout, his black queen, for that would be too much information to someone he d/n know. C denied introducing Gill-Kehoe to [REDACTED]. C denied having any conversation with [REDACTED] whatsoever. ([REDACTED] currently @ CJ2 jail [REDACTED], see QIR, QRAP attached) C saw Gill-Kehoe and [REDACTED] do a hand to hand transaction from about 10 yards away until Q2 Kasper ran toward him. C added to the inaccuracy allegation that he categorically denied the resistance attributed to him in the IR. In

OFFICE OF CITIZEN COMPLAINTS  
COMPLAINT WORK SUMMARY

OCC CASE #: 184-04

NAME: [REDACTED]

INV. NAME: AULET

PAGE: 6

=====

DATE & ACTIVITY (DATE & SIGN AFTER FINAL ENTRY ON EACH PAGE)

fact, C stated that Q2 Kasper was the only Q2 who had his hands on him during the arrest. Moreover, the other 3 offs. d/n reach the arrest scene until after C was already prone, handcuffed. C also stated that after Q2 Kasper punched him, Kasper jumped up, and brushed his nose with the bloodied hand to fabricate the report that C punched him there and caused a bloodied nose. C rationalized that since Q2 Kasper had struck him w/ his right fist, Kasper wiped onto himself the blood from C's eyebrow laceration. C stated that there were a crowd of people across the street; he only knew by name [REDACTED]. C stated that said witness can be located through his then court appointed counsel [REDACTED]

[REDACTED]

4/21/04- Called and LMTC for Attorney [REDACTED] private counsel who represented C on this matter, who may have contact information on alleged witness [REDACTED] (See inside cover of Comp.'s taped interview of 4/21/04 @ CJ3 for attorney's contact information)

- updated 293, gave copy to admin, mailed to C @ CJ3.
- Faxed paramedics report request w/ HIPPA form signed.
- Mailed SFGH medical record request.
- 

4/22/04- Case forwarded to DI unit.

4/26/04- Rec'd SFFD-EMT Patient chart via fax. ~~FA~~

- Rec'd call from Att. Loretta Orvitz, said only info on alleged witness is wit. [REDACTED] court docket no. [REDACTED] whom Comp. said he saw @ CJ and told him "I saw the police beat you up." ~~FA~~



OFFICE OF CITIZEN COMPLAINTS  
COMPLAINT WORK SUMMARY

OCC CASE #: 184-01  
NAME: \_\_\_\_\_  
INV: \_\_\_\_\_  
PAGE: 7

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DATE & ACTIVITY (DATE & SIGN AFTER FINAL ENTRY ON EACH PAGE)


4/26/04: Case assigned to Inv. Wechter for investigation:

- Review interview tape(s)
- Review allegations, revise as necessary
- Prepare investigation plan
- Cite/revise rules, laws, DGO's, DB's as necessary
- Submit revisions and plan for review

Intake Log and Case Tracking System updated

Logged priority "B" due 8/1/04.

D. MAXSON 04/26/2004





OFFICE OF CITIZEN COMPLAINTS  
COMPLAINT WORK SUMMARY

OCC CASE #: 184-04

NAME: [REDACTED]

INV: J. Wechter

PAGE: 8

=====

DATE & ACTIVITY (DATE & SIGN AFTER FINAL ENTRY ON EACH PAGE)

10/4/04

I ran Court History for witness [REDACTED] (Court # [REDACTED]: she is still at CJ2. I contacted [REDACTED] in person at CJ2. When I described this incident to [REDACTED] in general terms, [REDACTED] and saw him hit the defendant. [REDACTED] declined to be interviewed at that time, explaining that she would need to think about whether to give a statement to OCC. [REDACTED] said that she had already spoken to the defendant's attorney.

I called and spoke with complainant's defense attorney, [REDACTED] stated that the complainant's criminal case is resolved. [REDACTED] interviewed [REDACTED] at the SF County Jail for fifteen minutes, alone, just before the complainant's trial was scheduled to begin. [REDACTED] told [REDACTED] that she was across the street, and her attention was drawn to the complainant, who was running. [REDACTED] said the complainant get down on his hands and knees. The officer struck the complainant in the face. [REDACTED]

[REDACTED] also said that it would have been impossible for the complainant to hit the officer in the face from his position on the sidewalk. [REDACTED] said that she recognized the complainant from the street, but did not know his name. When [REDACTED] subsequently saw the complainant in court, she told him that she saw what happened to him. [REDACTED] investigator attempted to locate and interview [REDACTED] without success. [REDACTED] noted that the account that [REDACTED] gave her differed slightly from that given to [REDACTED] by the complainant, but [REDACTED] could not reveal what the complainant told her due to attorney-client confidentiality requirements.

[REDACTED] checked her written notes of her interview with [REDACTED] they consist of only three lines: across street; officer punched defendant, who was kneeling; [REDACTED] They also include [REDACTED] father's address: [REDACTED] [REDACTED] did not identify or interview any other witnesses to the incident.

11/22/04

I MRFed Officers Gill-Kehoe, Valdez, Guerrero, Healy, Kasper, Schaffer, Mullins and Insp. Doss, due 12/13/04.

12/20/04

I have received MRF responses from all the officers except Off. Mullins, who was served on 11/29/04. I called Narcotics: Mullins was off, and there was no watch commander present. I left a message for Off. Mullins.

OFFICE OF CITIZEN COMPLAINTS  
COMPLAINT WORK SUMMARY

OCC CASE #: 184-04

NAME: [REDACTED]

INV: J. Wechter

PAGE: 9

=====

DATE & ACTIVITY (DATE & SIGN AFTER FINAL ENTRY ON EACH PAGE)

12/21/04

Off. Mullins called: he delivered his MRF response to OCC on 12/3/04 (I was out that day and never received it). He will fax me a copy when he returns to work tomorrow.

dw

12/23/04

I have not received Off. Mullins MRF. I called and left a message for him, and later today, I received a faxed copy of his MRF response, dated 12/3/04.

dw

12/24/04

MRF responses received:

OFF. KASPER: Denies UF, [REDACTED] The complainant punched him in the nose, and in self-defense, he punched complainant in the face, knocking him to the ground. He and Insp. Doss, Off. Schaffer and Off. Healy placed the complainant in handcuffs after a brief struggle. They transported the complainant to Co J rather than wait for the ambulance b/c a large, hostile crowd was gathering.

OFF. SCHAFFER: Assisted in arresting complainant, who was violently resisting. Did not see any officers use force on complainant. Denies allegations. Kasper never grabbed complainant by throat, made [REDACTED]

INSP. DOSS: Saw complainant punch Kasper in the face, then Kasper punched complainant. Complainant tried to run, Kasper grabbed complainant, and complainant fell to ground. [REDACTED]  
[REDACTED] Kasper never grabbed complainant by throat, [REDACTED]

OFF. HEALY: Saw complainant punch Kasper in the face, then saw Kasper punch complainant. He, Kasper and Doss struggled with and handcuffed complainant. No grabbing of complainant's throat, [REDACTED]

OFF. GILL-KEHOE: Buy officer, not present when complainant arrested. He discussed chase and arrest of complainant and [REDACTED] with other officers to get the facts in order to prepare incident report.

OFF. VALDEZ: Arrested [REDACTED] No contact with complainant. In car when complainant transported to SFGH - [REDACTED]

OFF. GUERRERO: Close cover officer, no contact with complainant.

dw



OFFICE OF CITIZEN COMPLAINTS  
COMPLAINT WORK SUMMARY

OCC CASE #: 184-04

NAME: [REDACTED]

INV: J. Wechter

PAGE: 10

=====

**DATE & ACTIVITY (DATE & SIGN AFTER FINAL ENTRY ON EACH PAGE)**

OFF. MULLINS: Undercover buy officer. Saw Gill-Kehoe approached by complainant, saw complainant running down street pursued by officers. Did not see complainant's arrest.

*JW*

**PROPOSED FINDINGS:**

[REDACTED]

**UF: The officer used unnecessary force during the arrest: Off. Kasper # 68**

NS

The complainant stated that the officer grabbed him by the throat and punched him in the face twice. The named officer stated that he punched the complainant in the face in self-defense after the complainant punched him in the nose. Several witness officers stated that the named officer punched the complainant after the complainant punched him. A civilian witness stated that the officer punched the complainant without provocation, but refused to provide a formal statement to OCC. No other civilian witnesses could be identified. There is insufficient evidence to prove or disprove the allegation.

[REDACTED]

[REDACTED]

[REDACTED]

*JW*



OFFICE OF CITIZEN COMPLAINTS  
COMPLAINT WORK SUMMARY

OCC CASE #: 184-04

NAME: [REDACTED]

INV: J. Wechter

PAGE: 11

=====

DATE & ACTIVITY (DATE & SIGN AFTER FINAL ENTRY ON EACH PAGE)

[REDACTED]

[REDACTED]

[REDACTED]

12/27/04

Prepared CSR.

Do Director Allen for closure review.

DEC 27, 2004 Approved for closure. JKA

CTS intake

Assignment 3/03.

Left car @ home, c just showed up.

Landing porch. - walked up the ft. stairs

V if he him  
cld see him coming out  
of any apt.

Old recognize any open door.

Car 2 bks. 14th

Loft male  
5' small built.

in one, none picked, looked at  
well check.