

OFFICE OF THE CHIEF OF POLICE

ADMINISTRATIVE ORDER NO. 12

September 14, 2017

SUBJECT: GANG INJUNCTION CHECKLIST, FORM 12.16.25 – ACTIVATED;
ARREST REPORT APPROVAL CHECKLIST, FORM 05.02.15 –
REVISED

PURPOSE: This Order activates the Gang Injunction (GI) Checklist, Form 12.16.25, to assist sworn personnel assigned to Area Gang Enforcement Details or Gang Impact Teams to ensure that Gang Injunction Packages are completed for review. This Order also revises the Arrest Report Approval Checklist, Form 05.02.15, to ensure Gang Enforcement Detail arrest reports are complete and that all the prerequisites are met before submitting the report(s) as a part of the Gang Injunction Package.

PROCEDURE:

I. GANG INJUNCTION CHECKLIST, FORM 12.16.25 – ACTIVATED. The Gang Injunction Checklist, Form 12.16.25, has been activated.

A. Use of Form. The GI Checklist is an internal Department form used to ensure all requirements are completed for the service and enforcement of GI.

B. Completion. The GI Checklist must be completed for each served individual who is subject to a GI. The form is self-explanatory.

C. Distribution.

1 – Original, maintained in the individual’s GI Package.

1 – TOTAL

II. ARREST REPORT APPROVAL CHECKLIST, FORM 05.02.15 – REVISED. Attached is the revised Arrest Report Approval Checklist, Form 05.02.15, with the revisions indicated in italics.

FORM AVAILABILITY: The activated Gang Injunction Checklist, Form 12.16.25, and the revised Arrest Report Approval Checklist, Form 05.02.15, are accessible in E-Forms on the Department’s Local Area Network (LAN) and are attached for immediate use and duplication.

AMENDMENT: This Order activates the Gang Injunction Checklist, Form 12.16.25, and revises the Arrest Report Approval Checklist, Form 05.02.15. The “Form Use” link applicable to the Gang Injunction Checklist and Arrest Report Approval Checklist has been updated and is accessible in E-Forms on the Department’s LAN.

AUDIT RESPONSIBILITY: The Commanding Officer, Audit Division, shall review this directive and determine whether an audit or inspection shall be conducted in accordance with Department Manual Section 0/080.30.



CHARLIE BECK
Chief of Police

Attachments

DISTRIBUTION "D"

ARREST REPORT APPROVAL CHECKLIST

DR #: _____

BOOKING #: _____

DATE: _____

REPORT FACE SHEET

- | | | |
|--|------------------------------|---------------------------------------|
| Automated Field Data Report (AFDR) Number on Arrest Report | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |
| Incident Number at the bottom of report | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |
| Admonition of Rights box completed (name/serial and page #, or "Not Admonished") | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |
| Use of Force box checked | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |
| All identifying numbers included (FBI, J, CII, DR, and Main #s) | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |
| Marsy's Rights Card provided and box checked | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |

NARRATIVE

- | | | |
|---|------------------------------|---------------------------------------|
| Court Information section and all other required headings included | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |
| Watch commander providing booking approval (name/serial #) | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |
| Medical Treatment documented (name of doctor and hospital) | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |
| If money was booked, all reports agree on the amount | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |
| Receipt for Property Taken into Custody, Form 10.10.00, completed for each arrestee | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |
| Property Report completed and consistent with Form 10.10.00 | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |
| Firearms Supplemental Property Report, Form 10.01.01 completed; VIPU notified | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |
| Photos, Recordings, Videos, DICV, BWV, or Digital Imaging included | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |

RELATED REPORTS

- | | | |
|--|------------------------------|---------------------------------------|
| ePCD completed and submitted to watch commander | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |
| ePCD approved by watch commander and forwarded to magistrate for review | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |
| City Attorney Disclosure Statement | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |
| Criminal History Report / CCHRS | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |
| DMV history | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |
| Request for Confidentiality of Information, Form 03.02.00 or 03.02.01 | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |
| Arrestee signed out and all fields on the detention log completed | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |
| Hate Crime Resource Pamphlet provided and box checked on Form 03.02.00 or 03.02.01 | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |
| DMV Admin Per Se form of suspension attached to DUI Arrest Report and mail to DMV | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |

GANG DETAIL ARRESTS

- | | | |
|---|------------------------------|---------------------------------------|
| Gang stamp on arrest report face sheet | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |
| Each page of arrest report reviewed and initialed by a gang supervisor on the lower right corner | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |
| Arrest report narrative indicates officers were in uniform and in a marked black/white police vehicle | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |

For gang injunction (GI) arrest only. All of the following **must** be documented/established in the arrest narrative:

- Officer received requisite training from an approved Gang City Attorney.
- Officer verified person was served with the GI **prior** to making an arrest, **include** date/time of service.
- Membership in the gang at the time of the alleged violation.
- Violation of one or more of the provisions of the GI within the specific boundaries (Safety Zone) set forth in the GI.
- Copy of GI, ROS, POS, and evidence of gang membership (FIs, prior arrest/crime reports, photos, etc.) are attached.

JUVENILE ARRESTS

- | | | |
|---|------------------------------|---------------------------------------|
| Juvenile Arrest Supplemental Report, Form 05.02.06 | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |
| Juvenile Arrest PCD completed and submitted to watch commander | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |
| Telephone calls (or refusal) documented (three within three hours; two within one hour of arrest) | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |
| Parent/Guardian notified and information listed on the face sheet | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |
| Released in compliance with the six hour rule | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |
| Gladys R. Questionnaire | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |

BOOKING RECOMMENDATION

- | | | |
|---|------------------------------|---------------------------------------|
| Booking Approval signed by the watch commander (time of inspection/interview) | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |
| Type of booking search and results documented on the Booking Approval, Form 12.31.00, and report narrative (i.e., signature/serial # of watch commander approving the search; date/time of search; name of officer conducting the search) | <input type="checkbox"/> Yes | <input type="checkbox"/> Not Required |

Watch Commander Approving _____ **Serial No.** _____

GANG INJUNCTION CHECKLIST

This form is to be maintained in the served individual's Gang Injunction Folder (GI Folder). Every checkbox must be marked accordingly by the gang officer, supervisor, and lieutenant for each phase of the GI service; if the checkbox does not apply, mark "N/A" on the checkbox. (Reference: Operations Order No. XX, *Service and Enforcement of Gang Injunction - Revised*, dated, 2017)

NAME: _____

DOB: _____

GANG: _____

(1A) SERVICE WORKSHEET (SW)	(2) COMPLETED RECORD OF SERVICE (ROS)	(3) COMPLETED PROOF OF SERVICE (POS)
<p>Submission to Gang City Attorney</p> <p>Gang Officer's Responsibilities:</p> <p><input type="checkbox"/> Complete SW.</p> <p><input type="checkbox"/> Attach copies of Field Interview (FI) cards, crime/arrest reports, photos and CCHRS.</p> <p><input type="checkbox"/> Fill in date SW was completed, officer's name and Serial No. completing SW.</p> <p><input type="checkbox"/> Officer has received Gang CA requisite training, Date: _____ By Gang CA: _____</p> <p><input type="checkbox"/> Submit this GI Checklist with completed SW and supporting documents to gang supervisor for review.</p> <p>Date submitted: _____</p> <p><input type="checkbox"/> Submit the supervisor approved SW and supporting documents to the Gang CA for approval of GI service.</p> <p>Officer completing SW name/serial/date: _____ ➔</p> <p>Gang Supervisor Responsibilities:</p> <p><input type="checkbox"/> Review completed SW prior to EOW but no later than the next working day. Write Initials, Serial No., and date, on the lower right corner of each page.</p> <p>Reviewing supervisor's name/serial/date: _____ ➔</p>	<p>Gang Officer's Responsibilities:</p> <p><input type="checkbox"/> Complete ROS upon service of GI.</p> <p><input type="checkbox"/> Name of person served.</p> <p><input type="checkbox"/> Gang.</p> <p><input type="checkbox"/> Moniker.</p> <p><input type="checkbox"/> AKA(s).</p> <p><input type="checkbox"/> Date of Birth (claimed).</p> <p><input type="checkbox"/> CII (or other identification number).</p> <p><input type="checkbox"/> Attach a recent (within one year) photograph of the served individual (only gang officers, gang sergeants or gang detectives may take photo, Department Manual Section 4/269.60)</p> <p><input type="checkbox"/> Document legal reason for detention or consensual encounter in "Circumstances of Contact" box.</p> <p>Note: The need to serve an individual with an injunction does not constitute a legal reason to detain that individual.</p> <p><input type="checkbox"/> If the served individual refuses to accept the GI, it is permissible to leave it at their feet. Must be documented in "Statement Made By Persons Served, Unusual Circumstances, or Other Notes" box.</p> <p>If Juvenile, document the following on the ROS:</p> <p><input type="checkbox"/> Parental notification (e.g. in-person, telephonic).</p> <p><input type="checkbox"/> Date/time of notification.</p> <p><input type="checkbox"/> Name of employee making notification.</p> <p><input type="checkbox"/> If unable to contact parent(s), notification must be made by mail and document the following on the ROS:</p> <p style="margin-left: 20px;"><input type="checkbox"/> Date of mailing.</p> <p style="margin-left: 20px;"><input type="checkbox"/> Name of employee mailing the notification.</p> <p><input type="checkbox"/> Officer has received Gang CA requisite training, Date: _____ By Gang CA: _____</p> <p><input type="checkbox"/> Submit this GI Checklist with completed ROS to a gang supervisor for review prior to EOW.</p> <p>Date submitted: _____</p> <p>Officer completing ROS name/serial/date: _____ ➔</p> <p>Gang Supervisor's Responsibilities:</p> <p><input type="checkbox"/> Review completed ROS prior to EOW but no later than the next working day. Write Initials, serial No., and date, on the lower right corner of each page.</p> <p>Reviewing supervisor's name/serial/date: _____ ➔</p>	<p>Gang Officer's Responsibilities:</p> <p><input type="checkbox"/> Complete POS upon service of GI.</p> <p><input type="checkbox"/> Name of person served.</p> <p><input type="checkbox"/> Date of service.</p> <p><input type="checkbox"/> Approximate time served.</p> <p><input type="checkbox"/> Address of service, City, and State.</p> <p><input type="checkbox"/> Officer's signature and date.</p> <p><input type="checkbox"/> Officer's printed name and serial number.</p> <p><input type="checkbox"/> Included Cover Letter, Notification Letter, Service Provider List and Removal Petition with GI served to the served individual.</p> <p><input type="checkbox"/> Officer has received Gang CA requisite training, Date: _____ By Gang CA: _____</p> <p><input type="checkbox"/> Submit this GI Checklist with completed POS to a gang supervisor for review prior to EOW.</p> <p>Date submitted: _____</p> <p>Officer completing POS name/serial/date: _____ ➔</p> <p>Gang Supervisor's Responsibilities:</p> <p><input type="checkbox"/> Review completed POS prior to EOW but no later than the next working day. Write Initials, Serial No., and date, on the lower right corner of each page.</p> <p><input type="checkbox"/> Ensure POS and ROS are forwarded to the Gang CA.</p> <p>Date submitted to Gang CA: _____</p> <p>Reviewing supervisor's name/serial/date: _____ ➔</p>
Submit Completed GI Folder to GIT OIC		
<p><input type="checkbox"/> Submit completed GI Folder to GIT OIC</p> <p>Date submitted: _____</p> <p>Supervisor/Serial No. submitting GI Folder: _____ ➔</p>		
GIT OIC RESPONSIBILITIES		
<p><input type="checkbox"/> Ensure that upon service of the injunction on a juvenile, an attempt was made to notify the juvenile's parent or guardian (Must be documented on ROS)</p> <p><input type="checkbox"/> Ensure each ROS, POS and SW includes the reviewing supervisor's initials, Serial No., and date on the bottom, right hand corner of each page.</p> <p><input type="checkbox"/> Review/approve this GI Checklist with GI Folder and sign this GI Checklist, within two days of receipt.</p> <p><u>Gang Impact Team, Officer in Charge, approving GI Checklist name/serial/date (Must be approved within two days upon receipt of completed GI Folder):</u> ➔</p>		
(1B) GANG CITY ATTORNEY APPROVED SW		
<p>Gang Officer's Responsibilities:</p> <p><input type="checkbox"/> Ensure the name of the Gang CA and approval date is on the SW (Must have approval by Gang CA prior to service of GI).</p> <p><input type="checkbox"/> Serve a copy of the GI and include the Cover Letter, Notification Letter, Service Provider List and Removal Petition.</p> <p><input type="checkbox"/> Submit this GI Checklist with the approved SW to the gang supervisor.</p> <p>Officer submitting name/serial/date: _____ ➔</p> <p>Gang Supervisor's Responsibilities:</p> <p><input type="checkbox"/> Review the SW and write initials, Serial No., and date, on the lower right corner of each page.</p> <p><input type="checkbox"/> Ensure SW is placed in GI Pre-Approval Package.</p> <p>Reviewing supervisor's name/serial/date: _____ ➔</p>	<p>Gang Officer's Responsibilities:</p> <p><input type="checkbox"/> Complete SW upon service of GI.</p> <p><input type="checkbox"/> Name of person served.</p> <p><input type="checkbox"/> Date of service.</p> <p><input type="checkbox"/> Approximate time served.</p> <p><input type="checkbox"/> Address of service, City, and State.</p> <p><input type="checkbox"/> Officer's signature and date.</p> <p><input type="checkbox"/> Officer's printed name and serial number.</p> <p><input type="checkbox"/> Included Cover Letter, Notification Letter, Service Provider List and Removal Petition with GI served to the served individual.</p> <p><input type="checkbox"/> Officer has received Gang CA requisite training, Date: _____ By Gang CA: _____</p> <p><input type="checkbox"/> Submit this GI Checklist with completed POS to a gang supervisor for review prior to EOW.</p> <p>Date submitted: _____</p> <p>Officer completing POS name/serial/date: _____ ➔</p> <p>Gang Supervisor's Responsibilities:</p> <p><input type="checkbox"/> Review completed POS prior to EOW but no later than the next working day. Write Initials, Serial No., and date, on the lower right corner of each page.</p> <p><input type="checkbox"/> Ensure POS and ROS are forwarded to the Gang CA.</p> <p>Date submitted to Gang CA: _____</p> <p>Reviewing supervisor's name/serial/date: _____ ➔</p>	