

From: Todd, Amber
Sent: Wednesday, February 08, 2017 9:27 AM
To: Marcus, Nancy; Minor, Gregory
Subject: Records Request 19368 - 1731 San Pablo Ave

Importance: High

Please review and provide responsive information for the following request made anonymously and due February 23rd:

Request #19368

Please provide all documents, reports, and communications pertaining to Jimmie's Entertainment Complex (formerly located at 1731 San Pablo Ave.), including: cabaret applications and permits; ABAT reports; incident reports; declarations of nuisance; c
..more

Please provide records between 1996 and 2007. Thank you. - Requester

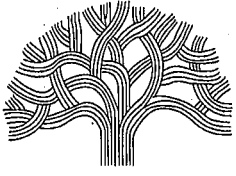
Thank you,

Amber Todd

City Administrator Analyst
Office of the City Administrator
City of Oakland

(510) 238-6369
atodd@oaklandnet.com

No Warnings
No NTA's
Business Tax issued Cabaret Permits 1996-2007



CITY OF OAKLAND
1 FRANK H. OGAWA PLAZA – OAKLAND, CALIFORNIA 94612

Office of the City Administrator
Barbara B. Killey
Assistant to the City Administrator

(510) 238-2257
FAX: (510) 238-7084

December 30, 2005

Sweet Jimmie's
c/o Jimmie Lee Ward

Dear Mr. Ward:

Pursuant to Chapter 5.02 of the Oakland Municipal Code, and based upon allegations of persistent violence and nuisance activity, the Oakland Police Department has requested this office to conduct a public hearing for the purpose of determining whether the cabaret permit issued for Sweet Jimmie's should be revoked.

A hearing has been scheduled for January 12, 2006 at 4:00 p.m. in Hearing Room 2 at City Hall, One Frank Ogawa Plaza, Oakland, CA 94612. Although public hearings conducted under this chapter are more informal than court proceedings, all parties are invited to submit evidence and testimony is given under oath. This is your opportunity to refute the allegations and you are invited and encouraged to testify at the hearing and to bring witnesses who can testify on your behalf as well. You are also welcome to utilize an attorney to present your case if you wish.

Following the hearing, based upon the preponderance of the evidence, I will issue a written decision and determination, which may result in 1) no action being taken regarding the cabaret permit, 2) the imposition of additional conditions on the permit, or 3) the revocation of the permit.

Copies of the police reports and calls for service, provided to me by the Police Department in conjunction with the hearing request, are being sent today under separate cover.

Please feel free to call me at the above number if you have any questions.

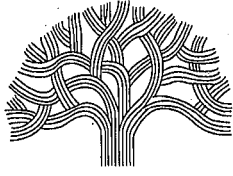
Sincerely,

Barbara B. Killey
Administrative Hearing Officer

Enclosures

cc via email: Councilmember, Nancy Nadel
Oakland Police Department Lt. Edward Poulson
Oakland Police Department Sgt. Kyle Thomas
Neighborhood Services Manager, Claudia Albano
Alcohol Beverage Action Team Sergeant, Robert P. Crawford
Alcohol Beverage Action Team Officer, Carletta Garrett
Inter Agency Coordinator, Daphne Markham
Assistant to the City Administrator, Arturo Sanchez

cc: ABC District Administrator, Andrew Gomez, 1515 Clay St. Suite 2208, Oakland,
CA 94612
Alameda County Supervising Environmental Health Specialist, Raju Matthew,
1131 Harbor Bay Parkway, Suite 250, Alameda, CA 94502-6577



CITY OF OAKLAND

1 FRANK H. OGAWA PLAZA – OAKLAND, CALIFORNIA 94612

Office of the City Administrator
Barbara B. Killey
Assistant to the City Administrator

Phone: (510) 238-2257
Fax: (510) 238-7084
Email: bkilley@oaklandnet.com

January 27, 2006

Mr. Charles Vose
Deputy City Attorney
One Frank Ogawa Plaza
Oakland, CA 94612
Hand Delivered to City Attorney's Office

Re: Administrative Hearing on Jimmie's Entertainment Complex (Jimmie's) Cabaret Permit

Dear Mr. Vose:

Thank you for calling me yesterday to inform me that you have been assigned to represent OPD in this matter. The hearing, which was originally convened on January, 12, 2006, was continued to February 1, due to the large number of police reports that were submitted in conjunction with OPD's request for the hearing. Jimmie's counsel, Dorothy Guillory has requested that all of the officers that authored the reports and some additional police personnel attend the hearing, in order to be able to question them. I have attached a copy of Ms. Guillory's letter.

As I explained to you, the Mayor convened a meeting with Jimmie's Friday, January 20, 2006, and we met again on Tuesday, January 24. We had a very productive discussion regarding Jimmie's current cabaret conditions, additional conditions that are now standard for cabarets, and specific things that the City and Jimmie's could do to ensure the peaceful but protected operation of Jimmie's in the future. I have drafted amended conditions, which I plan to present and discuss with Jimmie's and Ms. Guillory today. We are hopeful that mutually agreeable conditions will eliminate the need for the hearing. OPD has agreed to withdraw their request for a hearing if such agreement is reached.

However, we must be prepared for the contingency that the hearing will continue on Feb. 1, 2006. Therefore, I am requesting that you respond as quickly as possible to Ms. Guillory, regarding her request for the appearance of OPD personnel.

Thank you for your assistance.

Sincerely,

Barbara .B. Killey
Administrative Hearing Officer

cc via fax: Dorothy Guillory, Esq.

SWEET JIMMIE'S
Thursday, January 12, 2006

INTROS

Welcome – appreciate everyone's time

Introduce myself

Rules for hearing

Under oath

Hearsay evidence ok – not as strong but admissible

No formal cross examination – may ask questions through the hearing

officer

SWEAR ROOM

CARLETTA STARKS

Other neutral parties

Residents

Schedule next hearing

JIMMIE'S

SWEET JIMMIE'S – CITY MEETING

01/24/06

GOAL: Reach a mutual agreement on actions to be taken by Sweet Jimmie's and/or City of Oakland aimed at 1) controlling the nuisance activity and violent persons that are drawn to some of Oakland's entertainment venues and 2) reducing the general tax burden of policing to prevent or minimize these problems (@ \$4000 per night every Friday, Saturday and Sunday night)

AREAS OF DISCUSSION

1. POSSIBLE CABARET PERMIT TERMS

- **General terms currently applicable to all cabarets**
 - **Posted complaint # & complaint log**
 - **Exiting plan to minimize nuisance**
 - **Oakland guard-carded security; understanding of payment of excessive services**
 - **Monthly advance submission of activity schedule**
 - **No minors**
 - **Enforcement of smoking laws & ordinance**
 - **No leasing of premises for cabaret without advance notice and special activity permit**
 - **Compliance with terms of ABC license**
Restaurant license - Food sales must exceed liquor sales
 - **Acknowledgement that adverse impacts on peace, order, & welfare of the public or police resources are primary basis for revocation or suspension**
- **Music format**
- **Dress code**
- **Cameras**
- **Citizen's arrest**
- **Bullet-proof vests for security staff**
- **Zero tolerance policy for violation of club rules**
- **Double normal security staffing for special events**
- **3 - 6 month trial, then re-assess**
-

2. PAYMENT OR NEGOTIATION OF OUTSTANDING INVOICES

- **Start with contact listed on invoice as person to call if you have questions**
- **Must be resolved to maintain permit**
-

3. STAGGERED EXITING HOURS WITH @17TH

- **City imposed or agreement between clubs?**
-

4. EXPECTATION OF/CONTRACT FOR PAYMENT OF POLICE SERVICES

- **For special events**
 - **For normal business**
 - **On calls for service basis**
 - **Occupancy of club**
 -
 -
-

DRAFT

CABARET PERMIT CONDITIONS OF APPROVAL

1. Permittee shall not serve alcohol to any person who appears intoxicated or to minors. Further, the applicant shall take action to ensure that no alcoholic beverages are taken outside of the premises of the cabaret.
2. The occupancy of the premises shall not exceed the maximum occupancy level established and set forth in the Public Assembly Permit.
3. The standard cabaret format for Jimmie's Entertainment Complex shall be primarily blues and jazz.
4. Should Jimmie's plan a cabaret activity that would qualify as a Special Event, either through their own scheduling or through that of a promoter, as further outlined in Condition 20, Jimmie's will provide at least 2 weeks notice to the OPD Special Events Unit. OPD will confer with Jimmie's regarding the size and demographics of the expected crowd, in regard for the need for private security, OPD resources, traffic control, and crowd control. A Special Event shall be defined as any event that is expected to draw a crowd greater than the maximum occupancy level of the cabaret. Any event involving a rap or hip-hop artist will be assumed to meet the definition of Special Event.
5. Any OPD resources specifically assigned to a Special Event through mutual agreement or required at the time of the event as documented by calls for service or OPD determination of necessity for the maintenance of public safety shall be the financial responsibility of the permittee. Within 30 days of receipt, Permittee shall review, with the person designated on the invoice, any invoices with which Permittee disagrees.
6. Any and all exterior remodeling, including exterior painting shall be approved by the Director of City Planning prior to the issuance of any building permits or the installation of any exterior remodeling. All exterior modifications or painting shall be of an architectural and visual quality and character that will harmonize and enhance the surrounding area.
7. Permittee shall not expand the premises either horizontally or vertically
8. Permittee shall post on the exterior of the cabaret, in a location that is clearly visible to people outside, a sign with a phone number to call to register complaints. This phone must be staffed during all operating hours and must be capable of taking messages during non-operating hours. Permittee shall maintain a log of the complaints listing date, time, nature of complaint, and, when possible, name of complainant. Unless complainant is anonymous or leaves no contact information, Permittee shall respond to after-hours

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Jimmie's Entertainment Complex

1733 San Pablo Ave.

For the period February 1, 2006 through July 31, 2006

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- complaints within 24 hours.
9. Permittee shall meet with representatives from any neighborhood associations or group if requested, and shall meet on at least a quarterly basis with the Neighborhood Crime Prevention Council for the area that includes the cabaret premises. Permittee shall report to the City Administrator's Office regarding discussions involving the cabaret at such meetings and action taken to resolve any complaints.
 10. No later than February 28, 2006, Permittee shall submit to the City Administrator's Office a program to discourage loitering and to reduce littering, and the applicant shall put such program into effect. The litter control plan shall include at least the following:
 - a. The daily sweeping down, and washing as needed, of the frontage of the premises.
 - b. The daily collection of alcoholic beverage and fast food litter in the area immediately in front of and adjacent to the premises. All specifically designated off-street parking areas shall be kept litter free.
 - c. A plan to minimize potential nuisance effects created by exiting patrons.
 11. Permittee shall, either jointly or severally with neighboring merchants, adequately illuminate the exterior of the premises. This lighting shall not disturb adjacent residents' quiet enjoyment of their residences.
 12. Unless exempted by the Oakland Police Department, Permittee shall post **No Loitering** signs that cite the applicable City of Oakland regulation or law.
 13. Permittee or her/his designee shall take reasonable action to actively enforce the **No Loitering** plan inside and outside of the premises.
 14. Permittee shall provide adequate security to ensure the safety of patrons and the general public, and to secure the premises of the cabaret and adjacent businesses. Security staff shall be holders of valid Oakland guard cards. Permittee shall provide at least double the normal Security staff, the specific number to be agreed upon by the conference outlined in Condition number 4, for Special Events. Should excessive Oakland police resources be required to maintain order in or around the cabaret, Permittee shall be liable for the cost of these services.
 15. Permittee shall keep noise within the establishment and on the outdoor area of the Property, when it is being accessed by cabaret patrons, at a level that will not adversely affect other businesses or residents in the surrounding area.
 16. Permittee shall limit the cabaret activities to the following hours:

5:00 pm to 1:30 am

The violation of the cabaret permit condition pertaining to operating hours is an infraction, and a \$100.00 fine is assessed for this violation.
 17. At least one week prior to the end of each month Permittee shall submit to the ABAT unit of the Oakland Police Department the schedule of planned cabaret activities for the following month. As soon as possible after scheduling, Permittee shall fax notice of any

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- activities that are scheduled subsequent to submission of the monthly activities schedule.
18. Permittee shall not admit minors on the premises when conducting cabaret activities.
 19. Permittee shall abide by and enforce the California state laws and Oakland Municipal Code sections pertaining to smoking and tobacco.
 20. Permittee shall not lease the premises to others for the purposes of conducting cabaret activities without first acquiring a special activity permit and any other permits that may be necessary for the specific activity. Permittee shall notify the City of any such events according to the terms outlined in Condition 4.
 21. Permittee shall comply with all applicable state and local laws and with the terms of permittee's ABC license.
 22. Permittee shall install and/or maintain cameras such that all publicly accessible areas of the cabaret, with the exception of the bathroom facilities, may be monitored at all times of cabaret operations. An additional camera, capable of being monitored inside the cabaret, shall also be installed on the exterior of the cabaret in the area that provides the best visibility. Permittee shall conspicuously post inside the cabaret signs explaining to patrons that their activities are being monitored.
 23. Permittee shall immediately notify the Oakland Police Department of any patrons that refuse to comply with the cabaret's rules or requests made by cabaret staff regarding disorderly behavior and shall institute a program for Citizen's Arrest, based upon trespass, to hold the offending patron pending the arrival of OPD.
 24. Permittee shall enforce a dress code after 9:00 pm. No later than Feb 28, 2006, Permittee shall submit a written copy of the dress code to the Hearing Officer.
 25. The City Administrator's Office shall retain the authority to suspend or revoke this permit or impose additional conditions after notice and public hearing and a finding that:
 - a. Permittee has violated any of the conditions contained herein.
 - b. The operation of the cabaret creates a public nuisance.
 - c. Violations of other applicable state laws and City regulations exist, including the Zoning Regulations and the Building Code.
 - d. The operation of the business has adversely affected police calls-for-service in the immediate area. This will be judged by reviewing calls-for-service to the level of calls in a six-(6) month period prior to the granting of this permit. Permittee understands that the City may, at its discretion, invoice for excessive police services.
 26. Whenever reference is made to the City or City Administrator, in these permit conditions, the Hearing Officer shall be responsible for performing the actions required.
 27. Whenever reference is made to any City Official in these conditions, that City Official may appoint a designee.
 28. The City Administrator's Office shall review every ongoing permit every two years or on request to ensure compliance with the conditions contained therein. The primary basis

**Attachment to Cabaret Permit Issued to
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for the revocation or suspension of the ongoing permit is whether the cabaret activities create substantial adverse impacts on the peace, order, and welfare of the public or police resources.

30. The applicant shall surrender the permit to the City Administrator's Office within seven (7) days of suspension or revocation thereof.
31. The conditions contained herein maybe added to, changed or modified by the City Administrator or his designee in response to findings made regarding complaints from neighboring residents, City agencies or the general public.
32. The applicant shall defend, indemnify, and hold harmless the City of Oakland, or its agents, officers, and employees from any claim, action, or proceeding (including legal costs and attorney's fees) against the City or its agents, officers, or employees to attack, set aside, void, annul, this approval by the City. The City may elect, in its discretion, to participate in the defense of any action.
33. Permittee agrees to review with City currently outstanding invoices for police services, and to negotiate in good faith regarding any invoices over which there is disagreement. Prior to the expiration of this agreement, Permittee agrees to pay or to establish payment terms for any balances upon which mutual agreement has been reached.
34. The duration of these Conditions of Approval for the Cabaret Permit Issued to Jimmie's Entertainment Complex shall be February 1, 2006 through July 31, 2006. Permittee and City agree to meet during the month of July, 2006 to discuss the results of Permittee operating under these conditions and adjustments that may be needed or requested. The establishment of this time period in no way precludes the imposition of additional conditions or action through the Public Hearing process outlined in OMC Chapter 5.2.

**Jimmie Ward for
Jimmie's Entertainment Complex**

**Barbara B. Killey for
The City of Oakland**

Date

Date

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1733 San Pablo Ave.
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**CABARET PERMIT
CONDITIONS OF APPROVAL**

1. Permittee shall not serve alcohol to any person who appears intoxicated or to minors. Further, the applicant shall take action to ensure that no alcoholic beverages are taken outside of the premises of the cabaret.
2. The occupancy of the premises shall not exceed the maximum occupancy level established and set forth in the Public Assembly Permit.
3. Jimmie's Entertainment Complex agrees to limit its cabaret program format to primarily rhythm and blues, jazz, zydeco, oldies jukebox, dance and disco.
4. Should Jimmie's plan a cabaret activity that would qualify as a Special Event, including an event involving a rap or hip hop artist either through their own scheduling or through that of a promoter, as further outlined in Condition 20, Jimmie's will provide at least 2 weeks notice to the OPD Special Events Unit. OPD will confer with Jimmie's regarding the size and demographics of the expected crowd, in regard for the need for private security, OPD resources, traffic control, and crowd control. A Special Event shall be defined as any event that is expected to draw a crowd greater than the maximum occupancy level of the cabaret.
5. Any OPD resources specifically assigned to a Special Event through mutual agreement or required at the time of the event as documented by calls for service or OPD determination of necessity for the maintenance of public safety shall be the financial responsibility of the permittee.
6. Any and all exterior remodeling, including exterior painting shall be approved by the Director of City Planning prior to the issuance of any building permits or the installation of any exterior remodeling. All exterior modifications or painting shall be of an architectural and visual quality and character that will harmonize and enhance the surrounding area.
7. Permittee shall not expand the premises either horizontally or vertically
8. Permittee shall post on the exterior of the cabaret, in a location that is clearly visible to people outside, a sign with a phone number to call to register complaints. This phone must be staffed during all operating hours and must be capable of taking messages during non-operating hours. Permittee shall maintain a log of the complaints listing date, time, nature of complaint, and, when possible, name of complainant. Unless complainant is anonymous or leaves no contact information, Permittee shall respond to after-hours complaints within 24 hours.
9. Permittee shall meet with representatives from any neighborhood associations or group if requested, and shall meet on at least a quarterly basis with the Neighborhood Crime

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Prevention Council for the area that includes the cabaret premises. Permittee shall report to the City Administrator's Office regarding discussions involving the cabaret at such meetings and action taken to resolve any complaints.

10. Within 30 days of opening, Permittee shall submit to the City Administrator's Office a program to discourage loitering and to reduce littering, and the applicant shall put such program into effect. The litter control plan shall include at least the following:
 - a. The daily sweeping down, and washing as needed, of the frontage of the premises.
 - b. The daily collection of alcoholic beverage and fast food litter in the area immediately in front of and adjacent to the premises. All specifically designated off-street parking areas shall be kept litter free.
 - c. A plan to minimize potential nuisance effects created by exiting patrons.
11. Permittee shall, either jointly or severally with neighboring merchants, adequately illuminate the exterior of the premises. This lighting shall not disturb adjacent residents' quiet enjoyment of their residences.
12. Unless exempted by the Oakland Police Department, Permittee shall post **No Loitering** signs that cite the applicable City of Oakland regulation or law.
13. Permittee or her/his designee shall take reasonable action to actively enforce the **No Loitering** plan inside and outside of the premises.
14. Permittee shall provide adequate security to ensure the safety of patrons and the general public, and to secure the premises of the cabaret. Security staff shall be holders of valid Oakland guard cards. Permittee shall provide the Security staff agreed upon by the conference outlined in Condition number 4, for Special Events. Should excessive Oakland police resources be required to maintain order in or around the cabaret, **as a result of events at Jimmie's Entertainment Complex** permittee shall be **billed** for the cost of these services.
15. Permittee shall keep noise within the establishment and on the outdoor area of the Property, when it is being accessed by cabaret patrons, at a level that will not adversely affect other businesses or residents in the surrounding area.
16. Permittee shall limit the cabaret activities to the following hours:

5:00 pm to 1:30 am

The violation of the cabaret permit condition pertaining to operating hours is an infraction, and a \$100.00 fine is assessed for this violation.
17. At least one week prior to the end of each month Permittee shall submit to the ABAT unit of the Oakland Police Department the schedule of planned cabaret activities for the following month. As soon as possible after scheduling, Permittee shall fax notice of any activities that are scheduled subsequent to submission of the monthly activities schedule.
18. Permittee shall not admit minors to areas where cabaret activities are being conducted.

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Page 3**

19. Permittee shall abide by and enforce the California state laws and Oakland Municipal Code sections pertaining to smoking and tobacco.
20. Permittee shall not lease the premises to others for the purposes of conducting cabaret activities without first acquiring a special activity permit and any other permits that may be necessary for the specific activity. Permittee shall notify the City of any such events according to the terms outlined in Condition 4.
21. Permittee shall comply with all applicable state and local laws and with the terms of permittee's ABC license.
22. Permittee shall install and/or maintain cameras such that all publicly accessible areas of the cabaret, with the exception of the bathroom facilities, may be monitored at all times of cabaret operations. An additional camera, capable of being monitored inside the cabaret, shall also be installed on the exterior of the cabaret in the area that provides the best visibility. Permittee shall conspicuously post inside the cabaret signs explaining to patrons that their activities are being monitored.
23. Permittee shall immediately notify the Oakland Police Department of any patrons that refuse to comply with the cabaret's rules or requests made by cabaret staff regarding disorderly behavior and shall institute a program for Citizen's Arrest, based upon trespass, to hold the offending patron pending the arrival of OPD.
24. Permittee shall enforce a dress code after 9:00 pm
25. The City Administrator's Office shall retain the authority to suspend or revoke this permit or impose additional conditions after notice and public hearing and a finding that:
 - a. Permittee has violated any of the conditions contained herein.
 - b. The operation of the cabaret creates a public nuisance.
 - c. Violations of other applicable state laws and City regulations exist, including the Zoning Regulations and the Building Code.
 - d. The operation of the business has adversely affected police calls-for-service in the immediate area. This will be judged by reviewing calls-for-service to the level of calls in a six-(6) month period prior to the granting of this permit. Permittee understands that the City may, at its discretion, invoice for excessive police services.
26. Whenever reference is made in these conditions to the City or City Administrator, the Hearing Officer shall be responsible for the City or City Administrator performing the actions required.
27. Whenever reference is made to any City Official in these conditions, that City Official may appoint a designee.
28. The City Administrator's Office shall review every ongoing permit every two years or on request to ensure compliance with the conditions contained therein. The primary basis for the revocation or suspension of the ongoing permit is whether the cabaret activities

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create substantial adverse impacts on the peace, order, and welfare of the public or police resources.

30. The applicant shall surrender the permit to the City Administrator's Office within seven (7) days of suspension or revocation thereof.
31. The conditions contained herein maybe added to, changed or modified by the City Administrator or his designee in response to findings made regarding complaints from neighboring residents, City agencies or the general public.
32. The applicant shall defend, indemnify, and hold harmless the City of Oakland, or its agents, officers, and employees from any claim, action, or proceeding (including legal costs and attorney's fees) against the City or its agents, officers, or employees to attack, set aside, void, annul, this approval by the City. The City may elect, in its discretion, to participate in the defense of any action.
33. Permittee agrees to review with City currently outstanding invoices for police services, and the parties agree to negotiate in good faith regarding any invoices over which there is disagreement. Permittee agrees to pay or to establish payment terms, prior to the expiration of this agreement, any balances upon which mutual agreement has been reached.
34. The duration of these Conditions of Approval for the Cabaret Permit Issued to Jimmie's Entertainment Complex shall be February 1, 2006 through July 31, 2006. Permittee and City agree to meet during the month of July, 2006 to discuss the results of Permittee operating under these conditions and adjustments that may be needed. The establishment of this time period in no way precludes the imposition of additional conditions or action through the Public Hearing process outlined in OMC Chapter 5.2.

**Jimmie Ward for
Jimmie's Entertainment Complex**

**Barbara B. Killey for
The City of Oakland**

Date

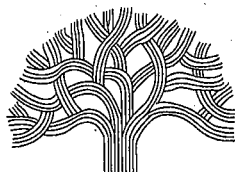
Date

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~~Oakland Police Department~~

Chief Wayne G. Tucker
Oakland Police Department

Date



CITY OF OAKLAND

1 FRANK H. OGAWA PLAZA – OAKLAND, CALIFORNIA 94612

Office of the City Administrator
Barbara B. Killey
Assistant to the City Administrator

Phone: (510) 238-2257
Fax: (510) 238-7084
Email: bkilley@oaklandnet.com

January 6, 2006

Sweet Jimmie's
c/o Jimmie Lee Ward

Dear Mr. Ward:

Enclosed is another copy of the redacted police reports presented to my office by OPD in conjunction with their request for a hearing on your cabaret permit. As I was reviewing the reports, I noticed that some pages were missing. Checking against the original of the redacted reports, I saw that some of the reports were printed on one side of the paper and some were printed on both sides. In the copy that was made for me, the second side of the two-sided reports was missing, and I am assuming that the same thing occurred in the copy that was sent to you.

I apologize for any confusion the original transmission may have caused.

Sincerely,

Barbara B. Killey

~~Agreement~~

~~Dec 2003~~
10/6/03

1) put calendar to
Special Events

30 238-7196

(Football
Season)

2) 2 officers on Fri/Sat/Sun

1
Summer maintenance
7-10 heavy
persons!

3) Special Events
of 1 officers
Coordinate

4) Roads Same Impact

60	12
----	----

[illegible]

Lesson 17

2019

1111

of

Went

Went

Went

My dear Mr. Jones

15. 10. 1941

①

2

- LE CMO

7-100

- more Sec. when needed

I have to use let
we have key to open
let us know we want to

It was a very good
- program also worked
- with the DDP

no more on -
- was a good
- (you can see it)

OPD. I have been to
- meet (about the
- was a good
- (you can see it)

ABC me - at the
- and the other important
- part of the ABC (70)

Richmond
- and 3 other
- and 3 other

(7)

- 15 yr. old kid / stole car in Richmond / near parents car / person shot him (not connected to Jimmie)
- want to work w/ the City and OPD on problems

Jimmie

1) Soc. will check it to make it is locked and

2) put a car there to prevent entry with lot
at 8:30 p.m. / 9:00 p.m.

3) OPD presence helps us a lot.

- Swartz / Black Box creates a lot of problem / your system creating problems

Special Officer
Superior Court
Clerk

Richard Stone Day, June 10

- Calendar
 - 2 pp for regular
 - 2 pp for regular
 - 2 pp for regular

[Handwritten signature]

— 92 —

Black Madonna was

1. Factorial
 2. of Security
 3. to
 4. known
 5. known



⑥

✓ Monthly Calendar
of events

✓ Special Notice for

Special events

— Reg. events 1-2 ORD
wanted

— Big events / ~~big~~ 4 ORD
would be okay

✓ Calendar of Events
is the key.

— pay to ORD

— Not use but ~~for~~ ^{OK} ~~open~~

CITY OF OAKLAND
OFFICE OF THE CITY MANAGER
ONE FRANK OGAWA PLAZA
PHONE: (510) 238-6914

July 10, 2000

PERMIT NUMBER: 49459
(Revised)

This permit is subject to the appeal provisions of Section 5.02 of the Oakland Municipal Code. An appeal may be filed against the granting of this permit within 14 days of the posting of this permit in the United States mails.

Jimmie's Limousine Service, Inc.
c/o Jimmie Ward
1731 San Pablo Avenue
Oakland, CA 94612

SPECIAL ACTIVITY PERMIT FOR: JIMMIE'S LIMOUSINE SERVICE, INC.

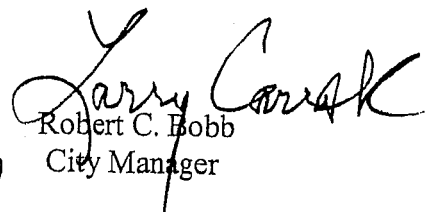
To: OPERATE A CABARET

At: 1731 SAN PABLO AVENUE

Under the Name of: JIMMIE'S ENTERTAINMENT COMPLEX

Conditions of Approval: In accordance with the provisions of existing city ordinances, this permit is issued with the following conditions:

1. Permittee shall comply with all of the conditions in the attached "Conditions of Approval".
2. Permittee shall maintain an active cabaret license through regular payment of cabaret fees to the Business License Division of the Financial Services Agency.


Robert C. Bobb
City Manager

cc: Council Member, District No. 3
Council Member At-Large
✓ City Manager
Chief of Police

cc (continued):

Fire Marshal

Office of Planning and Building, CEDA

Business License, FSA

ABAT; NSC; Vice Control; BEAT Health; OPD

ABC, 1515 Clay St., Ste. 2208, Oakland, 94612

ATTACHMENT TO:
Cabaret Permit No. 49459 (Revised)
Issued to Jimmie's Limousine Service, Inc.
July 10, 2000
Page 1

CABARET PERMIT
CONDITIONS OF APPROVAL

1. Permittee shall not serve alcohol to any person who appears intoxicated or to minors. Further, the applicant shall take action to insure that no alcoholic beverage is taken outside of the premises by patrons.
2. The occupancy of the premises shall not exceed the maximum occupancy level established and set forth in the Public Assembly Permit.
3. Any and all exterior remodeling, including exterior painting, shall be approved by the Director of City Planning prior to the issuance of any building permits or the installation of any exterior remodeling. All exterior modifications or painting shall be of an architectural and visual quality and character which will harmonize and enhance the surrounding area.
4. Permittee shall not expand the premises either horizontally or vertically.
5. Permittee shall meet with representatives from any neighborhood associations or group if requested, and report to the City Manager's Office on a quarterly basis regarding the subject of such meetings and action taken to resolve any complaints.
6. Permittee shall submit a program to discourage loitering and to reduce littering to the City Manager's Office for approval, and the applicant shall put such program into effect. The litter control plan shall include the following:
 - a. The daily sweeping down, and washing as needed, of the frontage of the premises.
 - b. The daily collection of alcoholic beverage and fast food litter in the area immediately in front of and adjacent to the premises. All specifically designated off street parking areas shall be kept litter free by applicant.
7. Permittee shall, either jointly or severally with neighboring merchants, adequately illuminate the exterior of the premises. This lighting shall not disturb adjacent residents' quiet enjoyment of their residences.

ATTACHMENT TO:
Cabaret Permit No. 49459 (Revised)
Issued to Jimmie's Limousine Service, Inc.
July 10, 2000
Page 2

8. Permittee shall post "No Loitering" signs which cites the applicable City of Oakland regulation or law.
9. Permittee or her/his designee shall actively enforce the posted "No Loitering" rules inside and outside of the premises.
10. Permittee shall provide adequate security to insure the safety of patrons and the general public, to secure the premises of the cabaret, and adjacent businesses.
11. Permittee shall keep noise within the establishment to such a level that will not adversely affect other business persons or residents in the surrounding area.
12. Permittee shall cease all cabaret activities at 2:00 A.M. and not start again until after 6:00 A.M. of the same day.
13. The City Manager's Office shall retain the authority to revoke this permit or impose additional conditions after notice and public hearing and a finding that:
 - a. Permittee has violated any of the conditions contained herein.
 - b. The operation of the cabaret creates a public nuisance.
 - c. Violations of other applicable City regulations exist, including the Zoning Regulations.
 - d. The operation of the business has adversely affected police calls-for-service in the immediate area. This will be judged by reviewing calls-for-service to the level of calls in a six-(6) month period prior to the granting of this permit.
14. **A copy of the approved conditions shall be recorded with the Alameda County Recorder's Office in a form approved by the City Manager's Office within thirty (30) days of the effective date of this approval; proof of such recording shall be provided to the City Manager's Office.**
15. Whenever reference is made in these conditions to the City or City Manager, Hearing Officer Larry Carroll shall be responsible for the City or City Manager performing the actions required.

ATTACHMENT TO:

Cabaret Permit No. 49459 (Revised)

Issued to Jimmie's Limousine Service, Inc.

July 10, 2000

Page 3

16. Whenever reference is made to any City Official in these conditions, that City Official may appoint a designate.
17. The City Manager's Office shall review this permit every two years to insure compliance with the conditions contained therein. The criteria for revocation of this permit is the same criteria for the issuance of this permit.
18. The applicant shall surrender the permit upon showing to the City Manager that any of the above provisions have been violated.
19. The conditions contained herein maybe added to, changed or modified by the City Manager or his designee in response to complaints raised by neighboring residents, City agencies or the general public.
20. The applicant shall defend, indemnify, and hold harmless the City of Oakland, or its agents, officers, and employees from any claim, action, or proceeding (including legal costs and attorney's fees) against the City or its agents, officers, or employees to attack, set aside, void, annul, this approval by the City. The City may elect, in its discretion, to participate in the defense of any action.

CRIME REPORT

Oakland Police Department
455 - 7th Street
Oakland, CA 94607-3985

ASSIGN TO:

RD #

05-066051

ROUTING

- ☒ CID

☐ YSD
☐ VICE
☐ CSD
☐ TRAFFIC
☐ D.A.
VIC/WIT
☒ ABAT

☐

Outside Reporting Agency	Case No.	Police Beat 4	CP Beat 4X	Incident No. 60
VICTIM 1		Last, First, Mid State Of California		
Home Address		City Oakland	Zip	Home/Msg. Phone
Business Address / School		City Oakland	Zip	Work Phone
Occupation	D.L. Number	State	<input type="checkbox"/> Domestic Violence <input type="checkbox"/> Victim Injured <input type="checkbox"/> Sex Assault Victim Request Conf.	
Working Hours			<input type="checkbox"/> Victim's Support <input type="checkbox"/> Resource Info Provided	

ADDITIONAL PERSON	<input checked="" type="checkbox"/> R/P <input type="checkbox"/> Parent <input type="checkbox"/> Witness 1	Last, First, Mid Sgt. K. Thomas 8069p	Sex	Race	D.O.B.	Age
Home Address		City Oakland	Zip	Home/Msg. Phone		
Business Address / School		City Oakland	Zip	Work Phone 750-4561		

LOCATION	POINT OF ENTRY	LOCATION P.O.E.	METHOD OF ENTRY	<input type="checkbox"/> BREAK GLASS	BURGLARY	WEAPON USED
<input type="checkbox"/> BANK/ATM <input type="checkbox"/> CONVENT MKT <input type="checkbox"/> GAS STATION <input type="checkbox"/> OTHER COMM. <input type="checkbox"/> RESIDENCE <input type="checkbox"/> STREET <input type="checkbox"/> MISC.	<input type="checkbox"/> DOOR <input type="checkbox"/> WINDOW <input type="checkbox"/> GARAGE <input type="checkbox"/> ADJ. PREM. <input type="checkbox"/> VENT/SKYLIGHT <input type="checkbox"/> OTHER	<input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> SIDE <input type="checkbox"/> ROOF <input type="checkbox"/> UNK.	<input type="checkbox"/> OPEN/UNLOCKED <input type="checkbox"/> FORCED SCREEN <input type="checkbox"/> CUTTING DEVICE <input type="checkbox"/> BODY FORCE <input type="checkbox"/> PRY TOOL <input type="checkbox"/> CHANNEL LOCKS <input type="checkbox"/> ATTEMPT FORCE	<input type="checkbox"/> REMOVE DOOR <input type="checkbox"/> REMOVE WINDOW <input type="checkbox"/> POSS. EMPLOYEE <input type="checkbox"/> KEY <input type="checkbox"/> WATER METER <input type="checkbox"/> NONE <input type="checkbox"/> UNK	<input type="checkbox"/> AUTO <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> OTHER <input type="checkbox"/> ALARM RESP	<input type="checkbox"/> FIREARM <input type="checkbox"/> CUT/STAB INSTR <input type="checkbox"/> HANDS, FEET, FIST <input type="checkbox"/> CHEMICAL <input type="checkbox"/> NONE <input type="checkbox"/> OTHER

<input type="checkbox"/> Gang Related	<input type="checkbox"/> Hate Crime Motivated By:	<input type="checkbox"/> Race	<input type="checkbox"/> Ethnicity	<input type="checkbox"/> Religion	<input type="checkbox"/> Sexual Orientation	<input type="checkbox"/> Physical Disability	<input type="checkbox"/> Mental Disability	<input type="checkbox"/> Gender
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CRIME	Common Name Disorderly House	Section/Subsection 25601	Code BP	Pertains To: V: 1
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Location (Address/Block No./Intersection) 1733 San Pablo Ave.		<input type="checkbox"/> OHA <input checked="" type="checkbox"/> ABC	Occurred	Date	Time	Day	VANDALISM
LOSS	<input checked="" type="checkbox"/> None	TYPE OF THEFT	On or From	22-Oct-05	15	Sat	<input type="checkbox"/> EGGED <input type="checkbox"/> BREAK WINDOW <input type="checkbox"/> SHOOT WINDOW <input type="checkbox"/> GRAFFITI <input type="checkbox"/> MAIL BOX <input type="checkbox"/> KEYING / SCRATCHING <input type="checkbox"/> SLASH TIRES <input type="checkbox"/> OTHER
(CHECK ALL THAT APPLY)		<input type="checkbox"/> PICKPOCKET <input type="checkbox"/> PURSENATCH <input type="checkbox"/> AUTO ACCESS <input type="checkbox"/> AUTO CLOUT <input type="checkbox"/> SHOPLIFTING <input type="checkbox"/> BICYCLE <input type="checkbox"/> COIN OP. DEVICE <input type="checkbox"/> FROM BUILDING <input type="checkbox"/> OTHER	To	22-Oct-05	230	Sat	
1 <input type="checkbox"/> CURRENCY / NOTES 2 <input type="checkbox"/> CLOTHING / FURS 3 <input type="checkbox"/> JEWELRY / PRECIOUS METAL 4 <input type="checkbox"/> FIREARMS 5 <input type="checkbox"/> OFFICE EQUIPMENT 6 <input type="checkbox"/> TVS, RADIO, STEREO		7 <input type="checkbox"/> HOUSEHOLD GOODS 8 <input type="checkbox"/> CONSUMABLE GOODS 9 <input type="checkbox"/> LIVESTOCK 10 <input type="checkbox"/> MOTOR VEHICLES 11 <input type="checkbox"/> MISCELLANEOUS	Reported	22 Oct 05	15	Sat	
U.C.R. CODE (LIST MOST EXPENSIVE ITEM ABOVE)			SOLVABILITY FACTORS (Check All That Apply) <input type="checkbox"/> SURVEILLANCE PHOTO <input type="checkbox"/> SERIOUS INJURY <input checked="" type="checkbox"/> EVIDENCE <input type="checkbox"/> SUSPECT IN-CUSTODY <input type="checkbox"/> NAMED SUSPECT <input checked="" type="checkbox"/> IDENTIFIABLE SUSPECT <input checked="" type="checkbox"/> R/O REQUESTS INVEST.				

☐ The VICTIM / REPORTING PARTY contacted the police department to report the THEFT / LOSS / DAMAGE of the listed property. There are no known suspects. This report is made to alert the police. No narrative was completed.

VICTIM VEHICLE		License No.	State	<input type="checkbox"/> Secured At The Scene <input type="checkbox"/> Released To The Owner <input type="checkbox"/> Hold (Unit)	<input type="checkbox"/> Towed <input type="checkbox"/> Fingerprinted <input type="checkbox"/> Stolen	Tow Number
<input type="checkbox"/> Car <input type="checkbox"/> Truck <input type="checkbox"/> Other	Year	Make	Model	Body Type	Color	Vin No.
<input type="checkbox"/> Stolen <input type="checkbox"/> Bicycle	<input type="checkbox"/> Mens <input type="checkbox"/> Womens	<input type="checkbox"/> Mtn. <input type="checkbox"/> Road	Color	Brand	Model	Speed
		License No.	Serial No.			

PROPERTY / NARRATIVE	<input type="checkbox"/> Loss <input checked="" type="checkbox"/> Evidence <input type="checkbox"/> Safekeeping <input type="checkbox"/> Recovered	Location When Stolen
Item	Qty.	<input type="checkbox"/> Interior <input type="checkbox"/> Exterior <input type="checkbox"/> Garage
Item Type, Brand, Model No., Size, Color, Marks, Etc.		Serial No.
		\$ Value

AOD and Juvenile Reporting Code (Refer to AOD Code Card)			CRIME2: Special Events Permit Required 9.52.030 OMC		
AOD	Setting (2 Digit #)	Juvenile			

Total Number Of				<input type="checkbox"/> Phone Report	Photos Taken <input type="checkbox"/> Yes <input type="checkbox"/> No	Evidence Collected <input type="checkbox"/> Yes <input type="checkbox"/> No	Tech: On Scene <input type="checkbox"/> Yes <input type="checkbox"/> No Tech Tag Left <input type="checkbox"/> Yes <input type="checkbox"/> No	Rec. Value	Loss Value	Page 1 of 5
Vict 1	Wit 0	Susp. 0	Arr. 0							
Reported By K. THOMAS		Serial No. 8069P	Watch 3	Area 2B	Supervisor LT. K. MULLNIX		Serial No.	Reviewer	Serial No.	

OPD
POLICE REPORT**SUSPECT
REPORT**OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

05-066051

CRIME Disorderly House 25601 BP	INCIDENT # 60	V1	VICTIM LAST, First, Mid. State Of California
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SUSPECT		Number	LAST, First, Mid Sweet Jimmie's Club				RELATIONSHIP TO VICTIM		IN CUSTODY THIS OFFENSE <input type="checkbox"/> Yes <input type="checkbox"/> No				
SEX	RACE	D.O.B.	AGE	HEIGHT	WEIGHT	HAIR	EYES	DL. NUMBER	PFN				
HOME ADDRESS			CITY <input type="checkbox"/> OAKLAND			ZIP		APT. NO.	HOME/MSG. PHONE				
WORK ADDRESS (Name of Business) (School) 1733 San Pablo Ave.			CITY <input checked="" type="checkbox"/> OAKLAND			OCCUPATION		WORK PHONE					
ADMONISHMENT: ADMONISHED <input type="checkbox"/> YES <input type="checkbox"/> NO REFUSED <input type="checkbox"/> YES <input type="checkbox"/> NO STATEMENT <input type="checkbox"/> YES <input type="checkbox"/> NO						<input type="checkbox"/> PROBATION COUNTY _____		Officer _____					
BY: (OFFICER/DATE/TIME)						<input type="checkbox"/> PAROLE AGENT _____		<input type="checkbox"/> PAL					
DESCRIPTION PROVIDED BY		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED											
HAIR LENGTH <input type="checkbox"/> SHORT <input type="checkbox"/> MED. (HALF EAR) <input type="checkbox"/> LONG (COVER EAR) <input type="checkbox"/> COLLAR <input type="checkbox"/> SHOULDER <input type="checkbox"/> BALD/SHAVED <input type="checkbox"/> RECEDING		HAIR STYLE <input type="checkbox"/> NATURAL / AFRO <input type="checkbox"/> BRAIDED <input type="checkbox"/> CREWCUT <input type="checkbox"/> CURLY <input type="checkbox"/> PONYTAIL <input type="checkbox"/> PUNK <input type="checkbox"/> CONSERVATIVE		FACIAL HAIR <input type="checkbox"/> NONE <input type="checkbox"/> BEARD <input type="checkbox"/> MUSTACHE <input type="checkbox"/> BEARD & MUSTACHE <input type="checkbox"/> GOATEE <input type="checkbox"/> SIDEBURNS		COMPLEXION <input type="checkbox"/> LIGHT <input type="checkbox"/> MEDIUM <input type="checkbox"/> DARK <input type="checkbox"/> FRECKLED <input type="checkbox"/> ACNE <input type="checkbox"/> POCKMARK <input type="checkbox"/> RUDDY		APPEARANCE <input type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input type="checkbox"/> UNKEMPT <input type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED <input type="checkbox"/> BIRTHMARK <input type="checkbox"/> MOLE		SPEECH <input type="checkbox"/> LOW PITCH <input type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> STUTTER <input type="checkbox"/> ACCENT TYPE _____ <input type="checkbox"/> OTHER		DEMEANOR <input type="checkbox"/> CALM <input type="checkbox"/> POLITE <input type="checkbox"/> APOLOGETIC <input type="checkbox"/> NERVOUS <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> OFFENSIVE <input type="checkbox"/> HOSTILE <input type="checkbox"/> VIOLENT	
OTHER DISTINCTIVE FEATURES <input type="checkbox"/> GOLD TOOTH <input type="checkbox"/> MISSING TEETH <input type="checkbox"/> SILVER TOOTH <input type="checkbox"/> GLASSES			<input type="checkbox"/> BODY ODOR TYPE _____ <input type="checkbox"/> LARGE EYES <input type="checkbox"/> MISSING LIMBS		WEAPON USED CAL. _____ BARREL _____ <input type="checkbox"/> BLUDGEON CLUB <input type="checkbox"/> HANDS/FEET		<input type="checkbox"/> REVOLVER <input type="checkbox"/> SEMI-AUTO PISTOL <input type="checkbox"/> SAWED OFF <input type="checkbox"/> ROCK/BRICK		<input type="checkbox"/> SHOTGUN <input type="checkbox"/> NICKEL <input type="checkbox"/> BLUE <input type="checkbox"/> CUT/STAB <input type="checkbox"/> VEHICLE		<input type="checkbox"/> RIFLE <input type="checkbox"/> BLUED		

SUSPECT		Number	LAST, First, Mid				RELATIONSHIP TO VICTIM		IN CUSTODY THIS OFFENSE <input type="checkbox"/> Yes <input type="checkbox"/> No				
SEX	RACE	D.O.B.	AGE	HEIGHT	WEIGHT	HAIR	EYES	DL. NUMBER	PFN				
HOME ADDRESS			CITY <input type="checkbox"/> OAKLAND			ZIP		APT. NO.	HOME/MSG. PHONE				
WORK ADDRESS (Name of Business) (School)			CITY <input type="checkbox"/> OAKLAND			OCCUPATION		WORK PHONE					
ADMONISHMENT: ADMONISHED <input type="checkbox"/> YES <input type="checkbox"/> NO REFUSED <input type="checkbox"/> YES <input type="checkbox"/> NO STATEMENT <input type="checkbox"/> YES <input type="checkbox"/> NO						<input type="checkbox"/> PROBATION COUNTY _____		Officer _____					
BY: (OFFICER/DATE/TIME)						<input type="checkbox"/> PAROLE AGENT _____		<input type="checkbox"/> PAL					
DESCRIPTION PROVIDED BY		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED											
HAIR LENGTH <input type="checkbox"/> SHORT <input type="checkbox"/> MED. (HALF EAR) <input type="checkbox"/> LONG (COVER EAR) <input type="checkbox"/> COLLAR <input type="checkbox"/> SHOULDER <input type="checkbox"/> BALD/SHAVED <input type="checkbox"/> RECEDING		HAIR STYLE <input type="checkbox"/> NATURAL / AFRO <input type="checkbox"/> BRAIDED <input type="checkbox"/> CREWCUT <input type="checkbox"/> CURLY <input type="checkbox"/> PONYTAIL <input type="checkbox"/> PUNK <input type="checkbox"/> CONSERVATIVE		FACIAL HAIR <input type="checkbox"/> NONE <input type="checkbox"/> BEARD <input type="checkbox"/> MUSTACHE <input type="checkbox"/> BEARD & MUSTACHE <input type="checkbox"/> GOATEE <input type="checkbox"/> SIDEBURNS		COMPLEXION <input type="checkbox"/> LIGHT <input type="checkbox"/> MEDIUM <input type="checkbox"/> DARK <input type="checkbox"/> FRECKLED <input type="checkbox"/> ACNE <input type="checkbox"/> POCKMARK <input type="checkbox"/> RUDDY		APPEARANCE <input type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input type="checkbox"/> UNKEMPT <input type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED <input type="checkbox"/> BIRTHMARK <input type="checkbox"/> MOLE		SPEECH <input type="checkbox"/> LOW PITCH <input type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> STUTTER <input type="checkbox"/> ACCENT TYPE _____ <input type="checkbox"/> OTHER		DEMEANOR <input type="checkbox"/> CALM <input type="checkbox"/> POLITE <input type="checkbox"/> APOLOGETIC <input type="checkbox"/> NERVOUS <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> OFFENSIVE <input type="checkbox"/> HOSTILE <input type="checkbox"/> VIOLENT	
OTHER DISTINCTIVE FEATURES <input type="checkbox"/> GOLD TOOTH <input type="checkbox"/> MISSING TEETH <input type="checkbox"/> SILVER TOOTH <input type="checkbox"/> GLASSES			<input type="checkbox"/> BODY ODOR TYPE _____ <input type="checkbox"/> LARGE EYES <input type="checkbox"/> MISSING LIMBS		WEAPON USED CAL. _____ BARREL _____ <input type="checkbox"/> BLUDGEON CLUB <input type="checkbox"/> HANDS/FEET		<input type="checkbox"/> REVOLVER <input type="checkbox"/> SEMI-AUTO PISTOL <input type="checkbox"/> SAWED OFF <input type="checkbox"/> ROCK/BRICK		<input type="checkbox"/> SHOTGUN <input type="checkbox"/> NICKEL <input type="checkbox"/> BLUE <input type="checkbox"/> CUT/STAB <input type="checkbox"/> VEHICLE		<input type="checkbox"/> RIFLE <input type="checkbox"/> BLUED		

SUSPECT VEHICLE		VEHICLE WAS <input type="checkbox"/> SECURED AT SCENE <input type="checkbox"/> RELEASED TO OWNER		<input type="checkbox"/> TOW (#) _____ <input type="checkbox"/> FINGERPRINTED <input type="checkbox"/> HOLD (UNIT) _____		DAMAGE DETAILS, UNIQUE FEATURES		OTHER DESCRIPTION					
OWNER				ADDRESS				CITY <input type="checkbox"/> OAKLAND ZIP		PHONE			
LIC./STATE/OR PLATE COLORS		YEAR	MAKE	MODEL	STYLE	EXTERIOR COLOR	CONDITION <input type="checkbox"/> CLEAN <input type="checkbox"/> NEW <input type="checkbox"/> DIRTY <input type="checkbox"/> POOR	INTERIOR COLOR	INTERIOR <input type="checkbox"/> CLEAN <input type="checkbox"/> ODOR <input type="checkbox"/> DIRTY <input type="checkbox"/>				
TIRES <input type="checkbox"/> STOCK <input type="checkbox"/> WIDE <input type="checkbox"/> SMALL		RIMS <input type="checkbox"/> STOCK <input type="checkbox"/> CHROME <input type="checkbox"/> MAGS <input type="checkbox"/> SPOKE		LEVEL <input type="checkbox"/> STOCK <input type="checkbox"/> LOWERED <input type="checkbox"/> RAISED <input type="checkbox"/>		ROOF <input type="checkbox"/> VINYL <input type="checkbox"/> LANDAU <input type="checkbox"/> CONV		WINDOWS <input type="checkbox"/> INTED <input type="checkbox"/> BROKEN		SEATS <input type="checkbox"/> VINYL <input type="checkbox"/> BENCH <input type="checkbox"/> CLOTH <input type="checkbox"/> BUCKET		TRANSMISSION <input type="checkbox"/> AUTOMATIC <input type="checkbox"/> MANUAL	

REPORTED BY K. THOMAS	SERIAL # 8069P	WATCH 3	DISTRICT 2B	SUPERVISOR	SERIAL #	PAGE 2 OF 4
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OPD

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #
05-066051

CRIME Disorderly House 25601 BP	π SUPPLEMENTAL	INCIDENT # 60	V 1	VICTIM LAST, First, Mid. State Of California
SUSPECT LAST, First, Mid. Sweet Jimmie's Club	INCIDENT LOCATION 1733 San Pablo Ave.		DATE OF THIS REPORT 23 Oct 05	ORIGINAL DATE REPORTED

ITEM	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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NARRATIVE: On 21 Oct 05, I (3L72) was assigned as a patrol supervisor dressed in full police uniform, driving fully marked OPD veh #1243. I responded to the area of "Sweet Jimmies" Club, 1733 San Pablo Ave. at approximately 2330 hrs. I observed a large number of persons outside the club on both sidewalks, and in the street, and heavy traffic on San Pablo Ave. I knew from prior intel that the rapper "Keith the Sneak" was performing at the club and that they were expecting a near capacity crowd. Capacity for Sweet Jimmies was reported to be approximately 500 persons, and Jimmies security estimated that approximately 400-500 people would attend the event. I observed a long line of several dozen persons waiting to get inside the club. I also made an arrest for public intoxication of an individual standing just outside the club, in the lanes of traffic, who was stopping vehicles and blocking traffic, after being flagged down by internal security.

On 22 Oct 05, approximately 0010 hrs. I observed a "Sideshow" in the 1700 block of Jefferson, with multiple vehicles driving with their doors open, people hanging out and playing very loud music. I conducted a vehicle stop on one of the vehicles involved in the "Sideshow" at 18th St and Jefferson, and from my vantage point could see 18th St, San Pablo, and 17th St. were grid locked with vehicles. Based on my observations immediate action was required to preserve the peace.

I further observed approximately 200-250 people directly IFO the club, on the sidewalk to the North and South of the club, and in the streets talking to the numerous vehicle driving both North and South on San Pablo Ave. There were also larger pockets of 10-15 persons, mostly males hanging out on the various street corners across from the club. Numerous vehicles were playing very loud music, audible far in excess of 100 feet, blocking traffic, with the vehicle occupants conversing with the pedestrians. The totality of the circumstances required immediate action to preserve public safety, for both pedestrians and vehicle occupants, keep traffic flowing and keep the roadway accessible for emergency vehicles, and prevent further "Sideshow" activity.

Even though the club would not normally be shutting down for approximately 1.5 hours, the influx of people coming from the club mixed with the hundred of people already outside the club made the need for traffic control post to be established immediately. I requested all West End sideshow units to 17th St. and San Pablo Ave to conduct traffic control post, which prevented additional vehicles from entering the area around "Sweet Jimmies." I used a total of 9 officers (see detail for details) to help block and control traffic, site vehicles and pedestrians, and keep the peace IFO Sweet Jimmies Club. I also requested all Late-Tac units respond to assist with the already large crowd of people who were now standing in the roadway completely blocking all lanes of traffic at times

At approximately 0100 hrs., I observed several hundred (200-300) additional persons begin running out of "Sweet Jimmies" into the street. At Approximately 0106 hrs. OPD radio advised me that someone from inside "Sweet Jimmies" had reported that shots had been fired, and that people were fighting and trampling each other in an effort to get out of the club. I immediately requested an ERT form up at 17th St and San Pablo, and when we had enough resources we would check the club for victims. After sufficient units responded Sgt. K. Coleman and myself took approximately 15 officers into "Sweet Jimmies." As I entered the club, several dozen people were rushing out preventing ourselves from entering the club for several minutes. When enough people had been cleared out by internal security we conducted a search of the interior of the club, without locating any victims.

Reported By K. THOMAS	Serial No. 8069P	Watch 3	Area 2B	Supervisor	Serial No.	Page 3 of 3
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CRIME Disorderly House 25601 BP	π SUPPLEMENTAL	INCIDENT # 60	V 1	VICTIM LAST, First, Mid. State Of California
SUSPECT LAST, First, Mid. Sweet Jimmie's Club	INCIDENT LOCATION 1733 San Pablo Ave.		DATE OF THIS REPORT 23 Oct 05	ORIGINAL DATE REPORTED

ITEM	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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NARRATIVE CONT: Inside the club, I observed numerous tables turned upside down and the interior to be rather littered with broken cups, flyers, discs and spilled drinks, but was told that except for the tables, that it was normal after a large party. As we began to leave out of the front door to clear the crowd IFO, several people began to rush back inside the club, screaming that they were shooting outside. The officers stationed outside the front door during this time heard approximately one gunshot, confirming what the patrons were saying. As we exited people were running everywhere, and the scene was one of chaos. "Sweet Jimmies" internal security began to clear the sidewalks and I instructed the officers to hold IFO the club, and give the people a chance to leave on their own, in order to not provoke the crowd or incite anyone. After several minutes Sgt. Coleman, formed a skirmish line and cleared W/B 18th St., and San Pablo N/B on the West curb, while I formed a skirmish line and cleared out E/B 18th St and N/B San Pablo on the East curb. Several arrest were made for public intoxication, as we encountered several highly intoxicated people just outside the club, and one as she was coming out of the club. Numerous vehicles performed numerous dangerous driving violations as they left the area including, speeding, unsafe starting, and reckless driving.

As my "Sideshow" units controlled the crowd directly around Sweet Jimmies numerous vehicles began to drive recklessly and play their car stereos very loudly just outside of our traffic control posts. Myself as well as several of my units responded to the area of 19th St. and San Pablo to the liquor store, as well as the Chevron Gas Station at 18th St and Castro St., to break up the "Sideshows" which had formed at each location. All the units were then required to go to Nations Hamburgers in the 300 block of Broadway to disperse a very large crowd, many who had just left "Sweet Jimmies," including several I had personally given citations to earlier at 18th St. and Jefferson St.

Based on my observations, Sweet Jimmies was directly responsible for the attractable nuisance of the very large crowd and traffic. Sweet Jimmies security was unable to control the large number of patrons once they left the club. This group committed numerous vehicular violations, pedestrian violations, played loud music, and endangered the safety of the citizens of Oakland by, congregating in the street, fighting, reckless driving and preventing emergency vehicles from being able to traverse San Pablo Ave. safely. For the above reasons Sweet Jimmies Club, located at 1733 San Pablo Ave., is in violation of 25601 PB, Disorderly House and should have also been required to obtain a special events permit, due to the nature of the event, the amount of advertising, the number of people expected, and the popularity of the individual, a violation of 9.52.030 OMC.

See numerous supplementals for additional details.

The following officers were used for the following times;

4L1 - 0015-0230 hrs. (Ofc. F. Gysin)
4A2 - 0030-0230 hrs. (Ofc. C. Johnson / Ofc. S. Seder)
4A3 - 0015-0150 hrs. (Ofc. Trenkamp / Ofc. D. Chimpky)
4L4 - 0015-0230 hrs. (Ofc. Kemmitt)
4A4 - 0115-0230 hrs. (Ofc. D. Jim / Ofc. L. Ausmus)
4L6 - 0110-0230 hrs. (Ofc. S. Bowling)

Reported By K. THOMAS	Serial No. 8069P	Watch 3	Area 2B	Supervisor	Serial No.	Page 4 of 4
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OPD

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #
05-066051

CRIME Disorderly House 25601 BP	π SUPPLEMENTAL	INCIDENT # 60	V 1	VICTIM LAST, First, Mid. State Of California
SUSPECT LAST, First, Mid. Sweet Jimmie's Club	INCIDENT LOCATION 1733 San Pablo Ave.		DATE OF THIS REPORT 23 Oct 05	ORIGINAL DATE REPORTED

ITEM	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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NARRATIVE CONT: Sweet Jimmies directly required and used a total of 15.25 officer hours and 2.25 Sgt. hrs. for myself. This figure does not take into account the Late-Tac squad, and patrol units who were also required to respond and assist.

I was unable to videotaped "Sweet Jimmies" club.

A reported shooting took place at 1901 San Pablo, approximately 0130 hrs., which may have been related to "Sweet Jimmies." See report RD# 05-066065 by Officer M Trenkamp for details.

A reported assault victim [REDACTED] suffered several lacerations to his face, sustained while at "Sweet Jimmies," but additional information was not available from him as he went unconscious at Summit Hospital. See OPD RD#05-066061 for additional details. I later spoke to the subjects step-mother who stated [REDACTED] suffered 7 staples and 13 stiches to his face, but that he was doing better and was out of the hospital. I requested she have [REDACTED] contact OPD Investigations to complete a statement about the incident as no one was able to take oen the night of the attack.

Watch Commander E. Breshers was advised of the incident.

Reported By K. THOMAS	Serial No. 8069P	Watch 3	Area 2B	Supervisor	Serial No.	Page 5 of 5
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OPD

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 – 7th Street
Oakland, CA 94607

05-066051

CRIME 25601 B&P	<input type="checkbox"/> SUPPLEMENTAL	INCIDENT # 60	V1	VICTIM LAST, First, Mid.
SUSPECT LAST, First, Mid. "Sweet Jimmy's"	INCIDENT LOCATION 1733 San Pablo		DATE OF THIS REPORT 22 Oct 05	ORIGINAL DATE REPORTED

ITEM	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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Summary:

On 22 Oct 05, approximately 0010 hours, I was working call sign 1L71, dressed in full police uniform and driving fully marked OPD vehicle #1236. I was driving in the 1700 block of San Pablo checking on the clubs.

I observed approximately 200 – 250 people standing in the street IFO Sweet Jimmy's club (1733 San Pablo), blocking the flow of traffic. There were numerous vehicles in the 1700 block of San Pablo that were playing their music loud that could be heard from over 100 feet away, and unable to proceed Northbound on San Pablo due to the large crowd in the street, and the people leaning into vehicles and talking to the occupants of vehicles.

Sgt Thomas arrived on the scene with his squad to monitor the crowd and to clear the traffic. At approximately 0100 hours, we were at 17th St. / San Pablo, when we observed numerous people running out of the club and into the street, away from the club. A short time later, OPD radio advised that there was a shooting that occurred inside Sweet Jimmy's club.

Sgt Thomas and Sgt Coleman, with their squads assembled, went into the club to ascertain if there were any victims. I remained at 17th St to guard the police vehicles from getting vandalized and monitor the crowd of people that remained in the street and on the sidewalks.

At approximately 0135 hours, I heard one gunshot come from the area of Sweet Jimmy's club. I observed numerous people again run in all directions away from the club where the shot came from. Nobody flagged me down or advised me of anyone shooting.

I remained on the scene until approximately 0200 hours.

Reported By A. Steinberger	7819P	Serial No.	Watch 1	Area 1	Supervisor Lt. Anderson	Serial No.	Page 1 of 1
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OPD ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

05-066051

CRIME 25601 BP	SUPPLEMENTAL	INCIDENT # 60	V1	VICTIM LAST, First, Mid. SOC / City of Oakland
SUSPECT LAST, First, Mid. "Sweet Jimmie"	INCIDENT LOCATION 1700 B/LC SAN PABLO	DATE OF THIS REPORT 22 OCTOS	ORIGINAL DATE REPORTED	

ITEM #	QNTY.	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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ON 22 OCTOS AT APPROX 0015 HRS, I WAS WORKING AS SIDESHOW DETAIL 414. I RESPONDED TO THE AREA OF SWEET JIMMIE'S LOCATED AT 17th AND SAN PABLO.

WHILE THERE I WITNESSED APPROX FIVE HUNDRED VEHICLE'S CIRCLING THE CLUB. I WAS INSTRUCTED BY SGT. K. THOMAS TO BLOCK OFF TRAFFIC PREVENTING ANY MORE VEHICLE'S FROM ENTERING THE SURROUNDING STREETS AROUND THE CLUB.

THERE WERE NUMEROUS PEOPLE WALKING THROUGHOUT THE STREET AND STANDING IN THE MIDDLE OF THE STREET GATHERING CAUSING A TRAFFIC HAZARD.

AT APPROX 0130 HRS, DISPATCH STATED THAT THEY RECEIVED A PHONE CALL FROM A CALLER STATING THAT THERE HAD BEEN A SHOOTING INSIDE THE CLUB. WE ENTERED THE CLUB IN SEARCH OF ANY POSSIBLE VICTIMS. WHILE WE WERE IN THE CLUB, NUMEROUS INDIVIDUALS REMAINED IN THE CLUB CONTINUING TO DRINK ALCOHOLIC BEVERAGES AND REFUSING TO LEAVE WHEN ASKED.

I EXITED THE CLUB AFTER FINDING NO VICTIMS. I OBSERVED A MB DRINKING FROM AN OPEN BOTTLE OF LIQUOR. I PLACED THAT SUBJECT IN CUSTODY AND TRANSPORTED HIM TO NORTH COUNTY JAIL FOR PUBLIC INTOXICATION.

I RESPONDED TO ACH (WHERE I SPEKE W/ V#1 SAAD WHO HAD BEEN SHOT OUTSIDE SWEET JIMMIE'S.

REPORTED BY D. Hemmatt	SERIAL # 8425P	WATCH 3	DISTRICT 2	SUPERVISOR SGT. K. THOMAS	SERIAL #	PAGE 1 OF 1
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O P D

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

OS-066051

CRIME 25601 BB	<input checked="" type="checkbox"/> SUPPLEMENTAL	INCIDENT # 60	V1	VICTIM LAST, First, Mid. SOL / City of Oakland
SUSPECT LAST, First, Mid. "Sweet Jimmies"	INCIDENT LOCATION 1719 SAN PABLO	DATE OF THIS REPORT 22 Oct 05	ORIGINAL DATE REPORTED	

ITEM #	QNTY.	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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SUPPLEMENTAL

ON 22 OCT 05 AT APP. 0015 HOURS I WAS WORKING AS UNIT 4601. I WAS IN FULL POLICE UNIFORM DRIVING MARIKIN CAR #1073. I RESPONDED TO 17th ST & SAN PABLO TO ASSIST UNITS IN TRAFFIC & CROWD CONTROL.

I PLACED FLARES ON JEFFERSON ST, CLAY ST & SAN PABLO AVE. THE FLARES WERE PLACED TO REDUCE THE AMOUNT OF VEHICLE TRAFFIC. SOME FEW CARS STILL DROVE EITHER OVER THE FLARES, THROUGH THE CONES OR AROUND THE FULLY MARIKIN PATROL CAR THAT WERE PLACED TO CLOSE THE STREETS OFF.

A CROWD OF ABOUT 200 PEOPLE WERE STANDING IFC, SWEET JIMMIES. SUDDENLY THE CLUB SPANES TO EMPTY DUE TO GUN SHOTS HEARD INSIDE THE PREMISES. HUNDREDS OF CUSTOMERS FROM SWEET JIMMIE'S GATHERED IN THE MIDDLE OF THE STREET.

WE MADE A WALK THROUGH & CLEARED THE REMAINING PEOPLE. WE ALSO CLEARED THE STREETS MAKING VARIOUS ARRESTS FOR PUBLIC INTOXICATION & OPEN ALCOHOLIC BEVERAGES IN PUBLIC.

WE RETURNED TO TRAFFIC CONTROL POST TO CLEAR THE AREA OF THE HUNDREDS OF CARS THAT WERE TRYING TO STAGE A SIDE SHOW.

REPORTED BY F. CYSIN	SERIAL # 8589F	WATCH 3	DISTRICT 1	SUPERVISOR SGT RIBBS	SERIAL # 7553P	PAGE 1 OF 1
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OPD **ADDITIONAL INFORMATION REPORT**

OAKLAND POLICE DEPARTMENT
 455 - 7th Street
 Oakland, CA 94607

RD #

05-066051

CRIME 25601 BP	<input type="checkbox"/> SUPPLEMENTAL	INCIDENT # 060	V1	VICTIM LAST, First, Mid. SOL / City of Oakland
SUSPECT LAST, First Mid. 'Sweet Jimmies'	INCIDENT LOCATION 1700 BLK SAN PABLO	DATE OF THIS REPORT 220505	ORIGINAL DATE REPORTED	

ITEM #	QNTY.	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
<p><i>Summary:</i></p> <p>ON 220505, AT ABOUT 0030, I WAS WORKING AS OPD PATROL UNIT 4A2W/OFL S. SEDER 8532P. WE WERE WORKING AS A SIDESHOW TRAFFIC UNIT AND WERE ADVISED TO BLOCK E/B TRAFFIC ON 17TH ST FROM SAN PABLO.</p> <p>ONCE AT OUR TRAFFIC POST I OBSERVED ABOUT 100-200 VEHICLES RUNNING RED LIGHTS, HANGING OUT OF MOVING VEHICLES, & IMP/ TRAFFIC.</p> <p>I ALSO NOTICED ABOUT 100-300 PEOPLE IN THE MIDDLE OF THE STREETS & SIDEWALKS. AS WE WERE AT OUR TRAFFIC POST AT ABOUT 0105 I NOTICED HUNDREDS OF PEOPLE RUNNING OUT OF SWEET JIMMIE'S SAYING THEIR SHOOTING IN THEIR. AFTER SEEING THE PEOPLE RUN OUT OF THE CLUB A CALL CAME INTO DISPATCH FROM INSIDE THE CLUB SAYING THAT SOMEONE WAS SHOT.</p> <p>AFTER LEAVING THE CLUB WE WERE DIRECTED TO CONDUCT TRAFFIC ENF/IN AND AROUND THE CLUB. UPON CONDUCTING TRAFFIC ENF/WE NOTICED NUMEROUS TRAFFIC VIOLATION AND WROTE MULTIPLE TRAFFIC CITES. I ALSO NOTICED THAT THE VEHICLE TRAFFIC WAS VERY THICK AND SLOW MOVING.</p>				

REPORTED BY C. JOHNSON	SERIAL # 8517P	WATCH 3	DISTRICT 1	SUPERVISOR SGT L. RIGGS	SERIAL # 7553P	PAGE 1 OF 1
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O P D

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

OS-066051

CRIME 25601 39	SUPPLEMENTAL 60	INCIDENT # V1	VICTIM Soc / City & Oakland
SUSPECT "Sweet Jimmies"	INCIDENT LOCATION 1733 San Pablo	DATE OF THIS REPORT 22 OCT 05	ORIGINAL DATE REPORTED

ITEM #	QNTY.	PROPERTY (and/or NARRATIVE)	SERIAL #	VALUE
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SUPPLEMENTAL SUMMARY:

ON 22 OCT 05 AT ABOUT 0115 HRS OFC. D. JIM BISHOP AND I WERE ASSIGNED TO PATROL WORKING ON SPECIAL ASSIGNMENT AT SWEET JIMMIES AT 1700 BLK OF SAN PABLO AVE AS UNIT 4A5. WE WERE IN FULL POLICE UNIFORM (CLASS B) DRIVING FULLY MARKED PATROL VEHICLE 1126.

WE INITIALLY WERE DIRECTED TO CONDUCT A TRAFFIC CONTROL POST AT ABOUT 0115 HRS.

WHILE RESPONDING RADIO PUT OUT A SHOOTING (245012 PL) ON THE SECOND FLOOR.

WE WERE CLEARING OUT THE CROWD WE OBSERVED PEOPLE DRINKING IN PUBLIC, FIGHTING, CARS MAKING MULTIPLE VEHICLE VIOLATIONS, AND PEOPLE REFUSING TO LEAVE THE CLUBS. WE WERE ABLE TO RESTORE ORDER AT ABOUT 0230 HRS.

REPORTED BY L. AUSMUS	SERIAL # 8428	WATCH 3	DISTRICT SA	SUPERVISOR SGT. GUTTORFSON	SERIAL # 7734	PAGE 1	OF 1
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O P D **ADDITIONAL INFORMATION REPORT**

OAKLAND POLICE DEPARTMENT
 455 - 7th Street
 Oakland, CA 94607

RD #

05-066051

CRIME 25601 BP	[] SUPPLEMENTAL	INCIDENT # 60	V1	VICTIM LAST, First, Mid. SOC / City of Oakland
SUSPECT LAST, First, Mid. Sweet Jimmie's	INCIDENT LOCATION 1733 San Pablo	DATE OF THIS REPORT 22 OCTOS	ORIGINAL DATE REPORTED	

ITEM #	QNTY.	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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SUMMARY:

ON 22 OCTOS, AT ABOUT 0110, I RESPONDED TO "SWEET JIMMIE'S" NIGHTCLUB TO INVESTIGATE A REPORT OF GUNSHOTS. UPON ARRIVAL, I OBSERVED A LARGE UNRULY CROWD STANDING OUT FEO THE CLUB. I ALSO OBSERVED A LARGE MASS OF PATRONS EXITING THE CLUB VERY QUICKLY.

AS I WALKED IN THE 1700-1800 BLK. OF SAN PABLO, I OBSERVED SEVERAL PEOPLE W/ OPEN CONTAINERS OF LIQUOR WALKING AROUND IN THE STREET AND NUMEROUS CARS PLAYING EXCESSIVELY LOUD MUSIC.

I WAS DIRECTED TO TAKE UP A T.C.P. AT 19TH ST. & JEFFERSON, WHERE I STAYED UNTIL THE UNRULY CROWD WAS FINALLY DISPERSED AT ABOUT 0230.

REPORTED BY

S. BOWLINT

SERIAL #

8411P

WATCH

3

DISTRICT

6

SUPERVISOR

SGT. E. LEWIS

SERIAL #

PAGE

OF 1

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

05-066051

CRIME 25601 BPR	SUPPLEMENTAL	INCIDENT # 60	V1	VICTIM LAST, First, Mid. SOC/ City of Oakland
SUSPECT LAST, First Mid. Sweet Jimmy's	INCIDENT LOCATION 1733 San Pablo	DATE OF THIS REPORT 22 OCT 05	ORIGINAL DATE REPORTED	

ITEM #	QNTY.	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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SUPPLEMENTAL:

ON 22 OCT 05 AT ABOUT 0045 HRS I WAS WORKING AS OPD LATE TAC UNIT 5821 WITH MY PARTNER OFFICER H. NGUYEN 85698. AT THIS TIME WE RESPONDED TO THE AREA OF SWEET JIMMY'S TO ASSIST WITH CROWD CONTROL. UPON ARRIVAL WE MET WITH SGT. K. COLEMAN WHO TOLD US TO USE OUR PATROL CAR AND BLOCK THE NORTH ENTRANCE TO THE CHEVRON STATION AT 1700 CASTRO.

WHILE ON THIS ASSIGNMENT WE WERE FLAGGED DOWN ON A HIT AND RUN. I TOOK A REPORT FOR THIS INCIDENT.

ALSO WHILE ON THIS ASSIGNMENT WE WROTE TWO CITATIONS. ONE FOR 27007 VC (LOUD MUSIC) AND 16028 VC (NO INSURANCE) AND THE OTHER FOR 12500 VC (NO LICENSE), 27007 VC (LOUD MUSIC), AND 16028 VC (NO INSURANCE).

WE CLEARED THE SCENE AT 0230 HRS.

REPORTED BY S. BANG	SERIAL # 6543P	WATCH 1	DISTRICT TAC	SUPERVISOR SGT D. HOPKINSON	SERIAL #	PAGE	OF
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05-06651

OBI 00100

OPD ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

05-066051

CRIME 25601 OP	SUPPLEMENTAL	INCIDENT # 60	V1	VICTIM LAST, First, Mid. SOC / City of Oakland
SUSPECT LAST, First, Mid. Sweet Jimmy	INCIDENT LOCATION 17 AVE - SAN PABLO	DATE OF THIS REPORT 10/22/05	ORIGINAL DATE REPORTED	

ITEM #	QNTY.	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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SUPPLEMENTAL: ON 22 OCT 05 AT ABOUT 0105 HRS OFC. R. CHEW 8561P AND I WERE WORKING AS OPD LATE TAC UNIT 5522. WE WERE WEARING FULL POLICE UNIFORM AND DRIVING MARKED PATROL VEHICLE #1202.

WE RESPONDED TO 17 AVE - SAN PABLO (SWEET JIMMY'S CLUB) TO ASSIST OFFICERS WHO WERE DISPATCHED TO A CALL OF A FIGHT AND SHOTS FIRED IN THE CLUB. UPON ARRIVAL WE ASSISTED WITH A SEARCH OF THE CLUB WITH NEGATIVE RESULTS.

JACKSON, EBONY (11 NOV 74) WAS ARRESTED FOR PUBLIC INTOXICATION BY OFC F. BONIFACIO WHO WAS SCENE. OFC. CHEW AND I TRANSPORTED JACKSON TO N. COUNTY JAIL WITH OUT INCIDENT.

REPORTED BY R. TREVINO	SERIAL # 8526P	WATCH 1	DISTRICT 5	SUPERVISOR SGT D. HOPPENHOWER	SERIAL #	PAGE 1 OF 1
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OPD ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

05-066051

CRIME 25601 BR	[] SUPPLEMENTAL	INCIDENT # 60	V1	VICTIM LAST, First, Mid. Garcia, City, & Oakland
SUSPECT LAST, First Mid. "Sweet Jimmies"	INCIDENT LOCATION 1733 San Pablo	DATE OF THIS REPORT 22 OCT 05	ORIGINAL DATE REPORTED	

ITEM #	QNTY.	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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SUPPLEMENTAL SUMMARY :

ON 22 OCT 05 I WAS WORKING AS O.P.D. LATE TACTICAL UNIT 5514 WITH OFF W. PERCY #83461. WE WERE BOTH WEARING FULL POLICE UTILITY UNIFORM AND OFF. PERCY WAS DRIVING MARKED PATROL VEH #1911, I WAS THE FRONT PASSENGER.

AT APPROX. 0100 HRS. WE RESPONDED TO "SWEET JIMMIES" NIGHT CLUB LOCATED AT 17TH ST / SAN PABLO TO ASSIST OFFICERS ON SCENE WITH CROWD / TRAFFIC CONTROL. WHILE ON SCENE RADIO ADVISED OF A FIGHT INSIDE THE ESTABLISHMENT AND POSSIBLE GUNSHOTS.

A GROUP OF OFFICERS WAS ASSEMBLED, WE ENTERED THE BUSINESS TO CHECK FOR ANY POSSIBLE GUNSHOT VICTIMS AND NONE WERE LOCATED.

WHILE ATTEMPTING TO CLEAR A LARGE CROWD FROM IN FRONT OF THE BUSINESS WE ENCOUNTERED A F.B. CATOX 1.DOD AS JACKSON EBONY 11NOV74. JACKSON WAS REFUSING TO LEAVE THE AREA AND WAS OBVIOUSLY INTOXICATED. JACKSON WAS ARRESTED FOR 647(F) P.G. PUBLIC INTOXICATION AND TRANSPORTED TO NORTH COUNTY JAIL BY OFFICERS R. TREVINO AND R. CHAN.

REPORTED BY F. BONIFACIO 84261	SERIAL # 84261	WATCH 1	DISTRICT 5	SUPERVISOR SPT K. COLEMAN	SERIAL #	PAGE 1 OF 1
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3rd Watch Extension of Shift

JLS Sideshow Detail

22 Oct 05

Supervisor:

3L72 Sgt. K. Thomas 750-4561 or 1L71 Sgt. A. Steinberger 750-4588

Unit	Name	Ser #
4L1	F. Gysin	8589P
4A2	C. Johnson	8517P
	S. Seder	8532P
4A3	M. Trenkamp	8463P
	D. Chimpky	8431P
4L4	D. Kemmitt	8425P
4L5	D. Jim	8156P
	L Ausmus	8432P
4L6	S. Bowling	8411P

Total Officers: 9

Requested By: C21

----- vehicle / subject information -----

OAKLAND PD

PAGE: 000001

Requested By: C73

Date: 10/22/05 Time: 03:53

I N C I D E N T R E C A L L

Incident	Time	Type	Pri	Dispo	Address Location	Bldg Apt	Callers Name Callers Address Callers Phone	P-unit	Close Date/ Time	Operator
051022000177	03:52	COMM	2		3448 PAXTON AV		1114		Active	OPC73
					24X	CO	PCW			

Date Time

Operator

05/10/22 03:53 Incident Initiated By: OP/C73

C73

05/10/22 03:53

C73

05/10/22 03:53

C73

05/10/22 03:53 273.5A OCC'D AT [REDACTED] 21OCT05 @ 2100-2230...SUSP/EN PAZ, MATTHEW

C73

05/10/22 03:53 MB (040678) 6'0 170 BRO HAIR IN A PONYTAIL/BRO MUST, BEARD, LT COMPLEX

C73

05/10/22 03:53 WEARING A GRY JKT, WHI TSHRT, BLU JEANS...DRIVES A VOLV 4D MAR,

C73

05/10/22 03:53 BUT UNK IF SUSP LFT IN THE VEH...8583P

C73

05/10/22 03:53 Incident Associated to: LOP051022000002

07

C73

05/10/22 03:53 Incident Associated to: LOP051022000003

07

C73

=== Vehicle / Subject Information ===

OCT 22 2005
C73



SUSPECT REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

05-011437

CRIME

Disorderly House 25601 BP

INCIDENT #

18

V1

VICTIM LAST, First, Mid.

State Of California

SUSPECT		Number	LAST, First, Mid Sweet Jimmie's Club				RELATIONSHIP TO VICTIM		IN CUSTODY THIS OFFENSE <input type="checkbox"/> Yes <input type="checkbox"/> No				
SEX	RACE	D.O.B.	AGE	HEIGHT	WEIGHT	HAIR	EYES	DL. NUMBER	PFN				
HOME ADDRESS			CITY <input type="checkbox"/> OAKLAND			ZIP		APT. NO.	HOME/MSG. PHONE				
WORK ADDRESS (Name of Business) (School) 1733 San Pablo Ave.			CITY <input checked="" type="checkbox"/> OAKLAND			OCCUPATION		WORK PHONE					
ADMONISHMENT: ADMONISHED <input type="checkbox"/> YES <input type="checkbox"/> NO REFUSED <input type="checkbox"/> YES <input type="checkbox"/> NO STATEMENT <input type="checkbox"/> YES <input type="checkbox"/> NO						<input type="checkbox"/> PROBATION COUNTY _____		Officer _____					
BY: (OFFICER/DATE/TIME) _____						<input type="checkbox"/> PAROLE AGENT _____		<input type="checkbox"/> PAL					
DESCRIPTION PROVIDED BY		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED											
HAIR LENGTH <input type="checkbox"/> SHORT <input type="checkbox"/> MED. (HALF EAR) <input type="checkbox"/> LONG (COVER EAR) <input type="checkbox"/> COLLAR <input type="checkbox"/> SHOULDER <input type="checkbox"/> BALD/SHAVED <input type="checkbox"/> RECEEDING		HAIR STYLE <input type="checkbox"/> NATURAL / AFRO <input type="checkbox"/> BRAIDED <input type="checkbox"/> CREWCUT <input type="checkbox"/> CURLY <input type="checkbox"/> PONYTAIL <input type="checkbox"/> PUNK <input type="checkbox"/> CONSERVATIVE		FACIAL HAIR <input type="checkbox"/> NONE <input type="checkbox"/> BEARD <input type="checkbox"/> MUSTACHE <input type="checkbox"/> BEARD & MUSTACHE <input type="checkbox"/> GOATEE <input type="checkbox"/> SIDEBURNS		COMPLEXION <input type="checkbox"/> LIGHT <input type="checkbox"/> MEDIUM <input type="checkbox"/> DARK <input type="checkbox"/> FRECKLED <input type="checkbox"/> ACNE <input type="checkbox"/> POCKMARK <input type="checkbox"/> BUDDY		APPEARANCE <input type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input type="checkbox"/> UNKEMPT <input type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED <input type="checkbox"/> BIRTHMARK <input type="checkbox"/> MOLE		SPEECH <input type="checkbox"/> LOW PITCH <input type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> STUTTER <input type="checkbox"/> ACCENT TYPE _____ <input type="checkbox"/> OTHER		DEMEANOR <input type="checkbox"/> CALM <input type="checkbox"/> POLITE <input type="checkbox"/> APOLOGETIC <input type="checkbox"/> NERVOUS <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> OFFENSIVE <input type="checkbox"/> HOSTILE <input type="checkbox"/> VIOLENT	
OTHER DISTINCTIVE FEATURES <input type="checkbox"/> GOLD TOOTH <input type="checkbox"/> MISSING TEETH <input type="checkbox"/> SILVER TOOTH <input type="checkbox"/> GLASSES			<input type="checkbox"/> BODY ODOR TYPE _____ <input type="checkbox"/> LARGE EYES <input type="checkbox"/> MISSING LIMBS		WEAPON USED CAL _____ BARREL _____ <input type="checkbox"/> BLUDGEON CLUB <input type="checkbox"/> HANDS/FEET		<input type="checkbox"/> REVOLVER <input type="checkbox"/> SEMI-AUTO PISTOL <input type="checkbox"/> SAWED OFF <input type="checkbox"/> SHOTGUN <input type="checkbox"/> ROCK/BRICK		<input type="checkbox"/> RIFLE <input type="checkbox"/> BLUED <input type="checkbox"/> CUT/STAB <input type="checkbox"/> VEHICLE				

SUSPECT		Number	LAST, First, Mid				RELATIONSHIP TO VICTIM		IN CUSTODY THIS OFFENSE <input type="checkbox"/> Yes <input type="checkbox"/> No				
SEX	RACE	D.O.B.	AGE	HEIGHT	WEIGHT	HAIR	EYES	DL. NUMBER	PFN				
HOME ADDRESS			CITY <input type="checkbox"/> OAKLAND			ZIP		APT. NO.	HOME/MSG. PHONE				
WORK ADDRESS (Name of Business) (School)			CITY <input type="checkbox"/> OAKLAND			OCCUPATION		WORK PHONE					
ADMONISHMENT: ADMONISHED <input type="checkbox"/> YES <input type="checkbox"/> NO REFUSED <input type="checkbox"/> YES <input type="checkbox"/> NO STATEMENT <input type="checkbox"/> YES <input type="checkbox"/> NO						<input type="checkbox"/> PROBATION COUNTY _____		Officer _____					
BY: (OFFICER/DATE/TIME) _____						<input type="checkbox"/> PAROLE AGENT _____		<input type="checkbox"/> PAL					
DESCRIPTION PROVIDED BY		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED											
HAIR LENGTH <input type="checkbox"/> SHORT <input type="checkbox"/> MED. (HALF EAR) <input type="checkbox"/> LONG (COVER EAR) <input type="checkbox"/> COLLAR <input type="checkbox"/> SHOULDER <input type="checkbox"/> BALD/SHAVED <input type="checkbox"/> RECEEDING		HAIR STYLE <input type="checkbox"/> NATURAL / AFRO <input type="checkbox"/> BRAIDED <input type="checkbox"/> CREWCUT <input type="checkbox"/> CURLY <input type="checkbox"/> PONYTAIL <input type="checkbox"/> PUNK <input type="checkbox"/> CONSERVATIVE		FACIAL HAIR <input type="checkbox"/> NONE <input type="checkbox"/> BEARD <input type="checkbox"/> MUSTACHE <input type="checkbox"/> BEARD & MUSTACHE <input type="checkbox"/> GOATEE <input type="checkbox"/> SIDEBURNS		COMPLEXION <input type="checkbox"/> LIGHT <input type="checkbox"/> MEDIUM <input type="checkbox"/> DARK <input type="checkbox"/> FRECKLED <input type="checkbox"/> ACNE <input type="checkbox"/> POCKMARK <input type="checkbox"/> BUDDY		APPEARANCE <input type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input type="checkbox"/> UNKEMPT <input type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED <input type="checkbox"/> BIRTHMARK <input type="checkbox"/> MOLE		SPEECH <input type="checkbox"/> LOW PITCH <input type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> STUTTER <input type="checkbox"/> ACCENT TYPE _____ <input type="checkbox"/> OTHER		DEMEANOR <input type="checkbox"/> CALM <input type="checkbox"/> POLITE <input type="checkbox"/> APOLOGETIC <input type="checkbox"/> NERVOUS <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> OFFENSIVE <input type="checkbox"/> HOSTILE <input type="checkbox"/> VIOLENT	
OTHER DISTINCTIVE FEATURES <input type="checkbox"/> GOLD TOOTH <input type="checkbox"/> MISSING TEETH <input type="checkbox"/> SILVER TOOTH <input type="checkbox"/> GLASSES			<input type="checkbox"/> BODY ODOR TYPE _____ <input type="checkbox"/> LARGE EYES <input type="checkbox"/> MISSING LIMBS		WEAPON USED CAL _____ BARREL _____ <input type="checkbox"/> BLUDGEON CLUB <input type="checkbox"/> HANDS/FEET		<input type="checkbox"/> REVOLVER <input type="checkbox"/> SEMI-AUTO PISTOL <input type="checkbox"/> SAWED OFF <input type="checkbox"/> SHOTGUN <input type="checkbox"/> ROCK/BRICK		<input type="checkbox"/> RIFLE <input type="checkbox"/> BLUED <input type="checkbox"/> CUT/STAB <input type="checkbox"/> VEHICLE				

SUSPECT VEHICLE		VEHICLE WAS <input type="checkbox"/> SECURED AT SCENE <input type="checkbox"/> RELEASED TO OWNER		<input type="checkbox"/> TOW (#) _____ <input type="checkbox"/> FINGERPRINTED <input type="checkbox"/> HOLD (UNIT) _____		DAMAGE DETAILS, UNIQUE FEATURES		OTHER DESCRIPTION											
OWNER				ADDRESS				CITY <input type="checkbox"/> OAKLAND		ZIP		PHONE							
LIC./STATE/OR PLATE COLORS				YEAR		MAKE		MODEL		STYLE		EXTERIOR COLOR		CONDITION <input type="checkbox"/> CLEAN <input type="checkbox"/> NEW <input type="checkbox"/> DIRTY <input type="checkbox"/> POOR		INTERIOR COLOR		INTERIOR <input type="checkbox"/> CLEAN <input type="checkbox"/> ODOR <input type="checkbox"/> DIRTY <input type="checkbox"/>	
TIRES <input type="checkbox"/> STOCK <input type="checkbox"/> WIDE <input type="checkbox"/> SMALL		RIMS <input type="checkbox"/> STOCK <input type="checkbox"/> CHROME <input type="checkbox"/> MAGS <input type="checkbox"/> SPOKE		LEVEL <input type="checkbox"/> STOCK <input type="checkbox"/> LOWERED <input type="checkbox"/> RAISED <input type="checkbox"/>		ROOF <input type="checkbox"/> VINYL <input type="checkbox"/> LANDAU <input type="checkbox"/> CONV		WINDOWS <input type="checkbox"/> INTED <input type="checkbox"/> BROKEN		SEATS <input type="checkbox"/> VINYL <input type="checkbox"/> BENCH <input type="checkbox"/> CLOTH <input type="checkbox"/> BUCKET		TRANSMISSION <input type="checkbox"/> AUTOMATIC <input type="checkbox"/> MANUAL							
REPORTED BY K. THOMAS		SERIAL # 8069P		WATCH 3		DISTRICT 2B		SUPERVISOR		SERIAL #		PAGE 2 OF 4							

GN TO: **AVOAT**

05-011437

ORI 00109

CRIME Disorderly House 25601 BP	π SUPPLEMENTAL	INCIDENT # 94	V 1	VICTIM LAST, First, Mid. State Of California
SUSPECT LAST, First, Mid. Sweet Jimmie's Club	INCIDENT LOCATION 1733 San Pablo Ave.	DATE OF THIS REPORT 22 Oct 05	ORIGINAL DATE REPORTED	

ITEM	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL, SIZE, COLOR, MARKS, ETC.	SERIAL #	VALUE
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NARRATIVE CONT: Based on my observations, which the videotape shows much of, Sweet Jimmies was directly responsible for the attractable nuisance of the very large crowd and traffic. Sweet Jimmies security was unable to control the large number of patrons once they left the club. This group committed numerous vehicular violations, pedestrian violations, played loud music, vandalized a business, and endangered the safety of the citizens of Oakland by, congregating in the street, reckless driving and preventing emergency vehicles from being able to traverse San Pablo Ave. safely. For these reasons Sweet Jimmies, located at 1733 San Pablo Ave., is in violation of 25601 PB, Disorderly House.

Reported By K. THOMAS	Serial No. 8069P	Watch 3	Area 2B	Supervisor	Serial No.	Page 4 of 4
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CRIME Disorderly House 25601 BP	INCIDENT # 94	V 1	VICTIM LAST, First, Mid. State Of California
SUSPECT LAST, First, Mid. Sweet Jimmie's Club	INCIDENT LOCATION 1733 San Pablo Ave.	DATE OF THIS REPORT 22 Oct 05	ORIGINAL DATE REPORTED

ITEM	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC.	SERIAL #	VALUE
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NARRATIVE: On 5 Mar 05, I (3L72) was assigned as a patrol supervisor dressed in full police uniform, driving fully marked OPD veh #1243. I was working a 3rd Watch extension of shift for West end sideshow. I was in the area of Sweet Jimmies Club, 1733 San Pablo Ave. at approximately 0130 hrs. I observed a large number of persons outside the club on both sidewalks, the street, and heavy traffic on San Pablo Ave. I also noticed a large crowd gathered IFO the liquor store at [REDACTED], which from my training and experience, I know club patrons often go to before to purchase alcohol prior to entering and leaving the local clubs.

I observed approximately 100-200 people directly IFO the club, on the sidewalk to the North and South of the club, and in the streets talking to the several dozen vehicle driving both North and South on San Pablo Ave. I observed approximately 6 Harley Davison motorcycles parked directly IFO the club. The riders of the motorcycles were consistently revving their engines and playing very loud music from the stereos they had on their bikes. I could hear them far in excess of 300 feet. (my approximate distance away) The riders left the club, racing down the street and stopped at the liquor store at [REDACTED] parked and continued to play loud music and rev their engines. Numerous other vehicles were playing very loud music, audible far in excess of 100 feet, blocking traffic, with the vehicle occupants conversing with the pedestrians. The sweet Jimmies security officers had blocked off both N/B and S/B San Pablo Ave in an effort to prevent any vehicles from driving IFO the club, however many vehicles drove around the cones, or came through the side street, 18th St., next to the front entrance of Sweet Jimmies. Traffic on E/B 17th St. had also come to a standstill, due to vehicles stopping IFO @17 Club, which is located at [REDACTED]

At approximately 0130 hrs. OPD Radio advised that the windows to the Oakland Homeless Project, [REDACTED] were being broken out by people coming out of the club. This location is next to Sweet Jimmies. I later contacted several residents of the shelter and they advised that the person who runs the place named "Elgo" would need to make the report and that he would later phone the police to do so. They also stated that in addition to two windows being broken out, a door on the 18th St. side of the building was kicked in.

At approximately 0145 hrs. I observed several hundred (200-300) additional persons leaving the club and congregate IFO the club entrance and sidewalks directly adjacent to it. This increased the already large crowd of people who were now standing in the roadway completely blocking all lanes of traffic at times. This became a very dangerous situation as the vehicles leaving the club and driving recklessly were interspersed with the club patrons standing in the street. Numerous vehicles performed numerous dangerous driving violations as they left the area including, speeding, unsafe starting, and reckless driving. I could see the club security attempting to push the crowd away from the club entrance, using their flashlights and yelling, but they seemed to have little effect on the crowd dispersing. Several motor officers and officers assigned to JLS Sideshow responded and began traffic control posts in order to reduce the reckless driving, open up the roadways and allow for emergency equipment to be able to use the thoroughfares of San Pablo Ave. and 17th St.

At approximately 0215 hrs. a large number of the vehicles relocated the Chevron Station at [REDACTED] OPD Officers relocated as a group and I observed many of the vehicles involved in the "Sideshow" at the Chevron Station had just left the area of Sweet Jimmies and @Club 17.

Reported By K. THOMAS	Serial No. 8069P	Watch 3	Area 2B	Supervisor	Serial No.	Page 3 of 3
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CRIME Disorderly House 25601 BP	INCIDENT # 94	V1	VICTIM LAST, First, Mid. State Of California
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SUSPECT		Number	LAST, First, Mid Sweet Jimmie's Club				RELATIONSHIP TO VICTIM		IN CUSTODY THIS OFFENSE <input type="checkbox"/> Yes <input type="checkbox"/> No				
SEX	RACE	D.O.B.	AGE	HEIGHT	WEIGHT	HAIR	EYES	DL. NUMBER	PFN				
HOME ADDRESS			CITY <input type="checkbox"/> OAKLAND			ZIP		APT. NO.	HOME/MSG. PHONE				
WORK ADDRESS (Name of Business) (School) 1733 San Pablo Ave.			CITY <input checked="" type="checkbox"/> OAKLAND			OCCUPATION		WORK PHONE					
ADMONISHMENT: ADMONISHED <input type="checkbox"/> YES <input type="checkbox"/> NO REFUSED <input type="checkbox"/> YES <input type="checkbox"/> NO STATEMENT <input type="checkbox"/> YES <input type="checkbox"/> NO						<input type="checkbox"/> PROBATION COUNTY _____ Officer _____ <input type="checkbox"/> PAROLE AGENT _____ <input type="checkbox"/> PAL		BY: (OFFICER/DATE/TIME) _____					
DESCRIPTION PROVIDED BY		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED											
HAIR LENGTH <input type="checkbox"/> SHORT <input type="checkbox"/> MED. (HALF EAR) <input type="checkbox"/> LONG (COVER EAR) <input type="checkbox"/> COLLAR <input type="checkbox"/> SHOULDER <input type="checkbox"/> BALD/SHAVED <input type="checkbox"/> RECEDING		HAIR STYLE <input type="checkbox"/> NATURAL / AFRO <input type="checkbox"/> BRAIDED <input type="checkbox"/> CREWCUT <input type="checkbox"/> CURLY <input type="checkbox"/> PONYTAIL <input type="checkbox"/> PUNK <input type="checkbox"/> CONSERVATIVE		FACIAL HAIR <input type="checkbox"/> NONE <input type="checkbox"/> BEARD <input type="checkbox"/> MUSTACHE <input type="checkbox"/> BEARD & MUSTACHE <input type="checkbox"/> GOATEE <input type="checkbox"/> SIDEBURNS		COMPLEXION <input type="checkbox"/> LIGHT <input type="checkbox"/> MEDIUM <input type="checkbox"/> DARK <input type="checkbox"/> FRECKLED <input type="checkbox"/> ACNE <input type="checkbox"/> POCKMARK <input type="checkbox"/> RUDDY		APPEARANCE <input type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input type="checkbox"/> UNKEMPT <input type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED <input type="checkbox"/> BIRTHMARK <input type="checkbox"/> MOLE		SPEECH <input type="checkbox"/> LOW PITCH <input type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> STUTTER <input type="checkbox"/> ACCENT TYPE _____ <input type="checkbox"/> OTHER		DEMEANOR <input type="checkbox"/> CALM <input type="checkbox"/> POLITE <input type="checkbox"/> APOLOGETIC <input type="checkbox"/> NERVOUS <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> OFFENSIVE <input type="checkbox"/> HOSTILE <input type="checkbox"/> VIOLENT	
OTHER DISTINCTIVE FEATURES		<input type="checkbox"/> BODY ODOR TYPE _____ <input type="checkbox"/> LARGE EYES <input type="checkbox"/> MISSING LIMBS		WEAPON USED CAL. _____ BARREL _____ <input type="checkbox"/> BLUDGEON CLUB <input type="checkbox"/> HANDS/FEET		<input type="checkbox"/> REVOLVER <input type="checkbox"/> SEMI-AUTO PISTOL <input type="checkbox"/> SHOTGUN <input type="checkbox"/> RIFLE <input type="checkbox"/> SAWED OFF <input type="checkbox"/> NICKEL <input type="checkbox"/> BLUE <input type="checkbox"/> ROCK/BRICK <input type="checkbox"/> CUT/STAB <input type="checkbox"/> VEHICLE		<input type="checkbox"/> GOLD TOOTH <input type="checkbox"/> MISSING TEETH <input type="checkbox"/> SILVER TOOTH <input type="checkbox"/> GLASSES					

SUSPECT		Number	LAST, First, Mid				RELATIONSHIP TO VICTIM		IN CUSTODY THIS OFFENSE <input type="checkbox"/> Yes <input type="checkbox"/> No				
SEX	RACE	D.O.B.	AGE	HEIGHT	WEIGHT	HAIR	EYES	DL. NUMBER	PFN				
HOME ADDRESS			CITY <input type="checkbox"/> OAKLAND			ZIP		APT. NO.	HOME/MSG. PHONE				
WORK ADDRESS (Name of Business) (School)			CITY <input type="checkbox"/> OAKLAND			OCCUPATION		WORK PHONE					
ADMONISHMENT: ADMONISHED <input type="checkbox"/> YES <input type="checkbox"/> NO REFUSED <input type="checkbox"/> YES <input type="checkbox"/> NO STATEMENT <input type="checkbox"/> YES <input type="checkbox"/> NO						<input type="checkbox"/> PROBATION COUNTY _____ Officer _____ <input type="checkbox"/> PAROLE AGENT _____ <input type="checkbox"/> PAL		BY: (OFFICER/DATE/TIME) _____					
DESCRIPTION PROVIDED BY		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED											
HAIR LENGTH <input type="checkbox"/> SHORT <input type="checkbox"/> MED. (HALF EAR) <input type="checkbox"/> LONG (COVER EAR) <input type="checkbox"/> COLLAR <input type="checkbox"/> SHOULDER <input type="checkbox"/> BALD/SHAVED <input type="checkbox"/> RECEDING		HAIR STYLE <input type="checkbox"/> NATURAL / AFRO <input type="checkbox"/> BRAIDED <input type="checkbox"/> CREWCUT <input type="checkbox"/> CURLY <input type="checkbox"/> PONYTAIL <input type="checkbox"/> PUNK <input type="checkbox"/> CONSERVATIVE		FACIAL HAIR <input type="checkbox"/> NONE <input type="checkbox"/> BEARD <input type="checkbox"/> MUSTACHE <input type="checkbox"/> BEARD & MUSTACHE <input type="checkbox"/> GOATEE <input type="checkbox"/> SIDEBURNS		COMPLEXION <input type="checkbox"/> LIGHT <input type="checkbox"/> MEDIUM <input type="checkbox"/> DARK <input type="checkbox"/> FRECKLED <input type="checkbox"/> ACNE <input type="checkbox"/> POCKMARK <input type="checkbox"/> RUDDY		APPEARANCE <input type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input type="checkbox"/> UNKEMPT <input type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED <input type="checkbox"/> BIRTHMARK <input type="checkbox"/> MOLE		SPEECH <input type="checkbox"/> LOW PITCH <input type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> STUTTER <input type="checkbox"/> ACCENT TYPE _____ <input type="checkbox"/> OTHER		DEMEANOR <input type="checkbox"/> CALM <input type="checkbox"/> POLITE <input type="checkbox"/> APOLOGETIC <input type="checkbox"/> NERVOUS <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> OFFENSIVE <input type="checkbox"/> HOSTILE <input type="checkbox"/> VIOLENT	
OTHER DISTINCTIVE FEATURES		<input type="checkbox"/> BODY ODOR TYPE _____ <input type="checkbox"/> LARGE EYES <input type="checkbox"/> MISSING LIMBS		WEAPON USED CAL. _____ BARREL _____ <input type="checkbox"/> BLUDGEON CLUB <input type="checkbox"/> HANDS/FEET		<input type="checkbox"/> REVOLVER <input type="checkbox"/> SEMI-AUTO PISTOL <input type="checkbox"/> SHOTGUN <input type="checkbox"/> RIFLE <input type="checkbox"/> SAWED OFF <input type="checkbox"/> NICKEL <input type="checkbox"/> BLUE <input type="checkbox"/> ROCK/BRICK <input type="checkbox"/> CUT/STAB <input type="checkbox"/> VEHICLE		<input type="checkbox"/> GOLD TOOTH <input type="checkbox"/> MISSING TEETH <input type="checkbox"/> SILVER TOOTH <input type="checkbox"/> GLASSES					

SUSPECT VEHICLE		VEHICLE WAS <input type="checkbox"/> SECURED AT SCENE <input type="checkbox"/> FINGERPRINTED <input type="checkbox"/> RELEASED TO OWNER <input type="checkbox"/> HOLD (UNIT) _____		<input type="checkbox"/> TOW (#) _____ DAMAGE DETAILS, UNIQUE FEATURES		OTHER DESCRIPTION					
OWNER			ADDRESS			CITY <input type="checkbox"/> OAKLAND		ZIP		PHONE	
LIC./STATE/OR PLATE COLORS		YEAR	MAKE	MODEL	STYLE	EXTERIOR COLOR	CONDITION <input type="checkbox"/> CLEAN <input type="checkbox"/> NEW <input type="checkbox"/> DIRTY <input type="checkbox"/> POOR	INTERIOR COLOR	INTERIOR <input type="checkbox"/> CLEAN <input type="checkbox"/> ODOR <input type="checkbox"/> DIRTY <input type="checkbox"/>		
TIRES <input type="checkbox"/> STOCK <input type="checkbox"/> WIDE <input type="checkbox"/> SMALL		RIMS <input type="checkbox"/> STOCK <input type="checkbox"/> CHROME <input type="checkbox"/> MAGS <input type="checkbox"/> SPOKE		LEVEL <input type="checkbox"/> STOCK <input type="checkbox"/> LOWERED <input type="checkbox"/> RAISED <input type="checkbox"/>		ROOF <input type="checkbox"/> VINYL <input type="checkbox"/> LANDAU <input type="checkbox"/> CONV		WINDOWS <input type="checkbox"/> INTED <input type="checkbox"/> BROKEN		SEATS <input type="checkbox"/> VINYL <input type="checkbox"/> BENCH <input type="checkbox"/> CLOTH <input type="checkbox"/> BUCKET	
						TRANSMISSION <input type="checkbox"/> AUTOMATIC <input type="checkbox"/> MANUAL					

REPORTED BY K. THOMAS	SERIAL # 8069P	WATCH 3	DISTRICT 2B	SUPERVISOR	SERIAL #	PAGE 2 OF 4
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Oakland Police Department
455 - 7th Street
Oakland, CA 94607-3985

ASSIGN TO:

RD #

05-013166

ROUTING

☒ CID

Outside Reporting Agency

Case No.

Police Beat

CP Beat

Incident No.

4

4X

94

☐ YSD

☐ VICE

☐ CSD

☐ TRAFFIC

☐ D.A.

☐ VIC/WIT

☒ ABAT

☐

VICTIM 1

Last, First, Mid

☐ Business Name

☒ Local / State / Federal

Sex

Race

D.O.B.

Age

State Of California

Home Address

City

☐ Oakland

Zip

Home/Msg. Phone

Business Address / School

City

☐ Oakland

Zip

Work Phone

Occupation

D.L. Number

State

☐ Domestic Violence

☐ Victim Injured

☐ Sex Assault Victim Request Conf.

Working Hours

☐ Victim's Support

☐ Resource Info Provided

ADDITIONAL PERSON

☒ R/P

☐ Parent

☐ Witness

Last, First, Mid

Sgt. K. Thomas 8069p

Sex

Race

D.O.B.

Age

Home Address

City ☐ Oakland

Zip

Home/Msg. Phone

Business Address / School

City ☐ Oakland

Zip

Work Phone

OPD

LOCATION

POINT OF ENTRY

LOCATION P.O.E.

METHOD OF ENTRY

☐ BREAK GLASS

BURGLARY

WEAPON USED

☐ BANK/ATM
☐ CONVENT MKT
☐ GAS STATION
☐ OTHER COMM.
☐ RESIDENCE
☐ STREET
☐ MISC.

☐ DOOR
☐ WINDOW
☐ GARAGE
☐ ADJ. PREM.
☐ VENT/SKYLIGHT
☐ OTHER

☐ FRONT
☐ REAR
☐ SIDE
☐ ROOF
☐ UNK.

☐ OPEN/UNLOCKED
☐ FORCED SCREEN
☐ CUTTING DEVICE
☐ BODY FORCE
☐ PRY TOOL
☐ CHANNEL LOCKS
☐ ATTEMPT FORCE

☐ REMOVE DOOR
☐ REMOVE WINDOW
☐ POSS. EMPLOYEE
☐ KEY
☐ WATER METER
☐ NONE
☐ UNK

☐ AUTO
☐ RESIDENTIAL
☐ COMMERCIAL
☐ OTHER
☐ ALARM RESP

☐ FIREARM
☐ CUT/STAB INSTR
☐ HANDS, FEET, FIST
☐ CHEMICAL
☐ NONE
☐ OTHER

☐ Gang Related

☐ Hate Crime Motivated By:

☐ Race

☐ Ethnicity

☐ Religion

☐ Sexual Orientation

☐ Physical Disability

☐ Mental Disability

☐ Gender

CRIME

Common Name
Disorderly House

Section/Subsection
25601

Code
BP

Pertains To:
V: 1

Location (Address/Block No./Intersection)
733 San Pablo Ave.

☐ OHA

☒ ABC

Occurred

Date

Time

Day

VANDALISM

LOSS

☒ None

TYPE OF THEFT

(CHECK ALL THAT APPLY)

1 ☐ CURRENCY / NOTES
2 ☐ CLOTHING / FURS
3 ☐ JEWELRY / PRECIOUS METAL
4 ☐ FIREARMS
5 ☐ OFFICE EQUIPMENT
6 ☐ TVS, RADIO, STEREO

7 ☐ HOUSEHOLD GOODS
8 ☐ CONSUMABLE GOODS
9 ☐ LIVESTOCK
10 ☐ MOTOR VEHICLES
11 ☐ MISCELLANEOUS

☐ PICKPOCKET
☐ PURSENATCH
☐ AUTO ACCESS
☐ AUTO CLOUT
☐ SHOPLIFTING
☐ BICYCLE
☐ COIN OP. DEVICE
☐ FROM BUILDING
☐ OTHER

On or From

5-Mar-05

130

Sat

To

5-Mar-05

230

Sat

Reported

5 Mar 05

0130

Sat

U.C.R. CODE

(LIST MOST EXPENSIVE ITEM ABOVE)

SOLVABILITY FACTORS (Check All That Apply)

☐ SURVEILLANCE PHOTO
☐ SERIOUS INJURY
☒ EVIDENCE
☐ SUSPECT IN-CUSTODY

☐ NAMED SUSPECT
☒ IDENTIFIABLE SUSPECT
☒ R/O REQUESTS INVEST.

☐ The VICTIM / REPORTING PARTY contacted the police department to report the THEFT / LOSS / DAMAGE of the listed property. There are no known suspects. This report is made to alert the police. No narrative was completed.

VICTIM VEHICLE

License No.

State

☐ Secured At The Scene
☐ Released To The Owner
☐ Hold (Unit)

☐ Towed
☐ Fingerprinted
☐ Stolen

Tow Number

☐ Car
☐ Truck
☐ Other

Year

Make

Model

Body Type

Color

Vin No.

☐ Stolen

☐ Mens

☐ Mtn.

Color

Brand

Model

Speed

License No.

Serial No.

PROPERTY / NARRATIVE

☐ Loss

☒ Evidence

☐ Safekeeping

☐ Recovered

Location When Stolen

☐ Interior

☐ Exterior

☐ Garage

Item

Qty

Item Type, Brand, Model, No., Size, Color, Marks, Etc.

Serial No.

\$ Value

AOD and Juvenile Reporting Code (Refer to AOD Code Card)

EVIDENCE: One video tape (8mm) of incident, taken by Officer D. Chimpky. I collected from Ofc. Chimpky and I turned item into OPD Property Section.

AOD

Setting (2 Digit #)

Juvenile

Total Number Of

Vict.

Wit.

Susp.

Arr.

Phone Report

Photos Taken
☐ Yes
☐ No

Evidence Collected
☐ Yes
☐ No

Tech:
On Scene ☐ Yes ☐ No
Tech Tag Left ☐ Yes ☐ No

Rec. Value

Loss Value

Page 1 of 4

Reported By
K. THOMAS

Serial No.
8069P

Watch
3

Area
2B

Supervisor
LT. E. POULSON

Serial No.

Reviewer

Serial No.

OPD

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #
05-019404

CRIME Disorderly House 25601 BP	π SUPPLEMENTAL	INCIDENT # 17	V 1	VICTIM LAST, First, Mid. State Of California
SUSPECT LAST, First, Mid. Sweet Jimmie's Club	INCIDENT LOCATION 1733 San Pablo Ave.		DATE OF THIS REPORT 22 Oct 05	ORIGINAL DATE REPORTED

ITEM	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC.	SERIAL #	VALUE
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NARRATIVE CONT: Numerous vehicles performed numerous dangerous driving violations as they left the area including, speeding, unsafe starting, and reckless driving.

Sgt. Steinberger reported several bottles were thrown – see supplemental for additional details.

Based on my observations, Sweet Jimmies was directly responsible for the attractable nuisance of the very large crowd and traffic. Sweet Jimmies security was unable to control the large number of patrons once they left the club. This group committed numerous vehicular violations, pedestrian violations, played loud music, and endangered the safety of the citizens of Oakland by, congregating in the street, fighting, reckless driving and preventing emergency vehicles from being able to traverse San Pablo Ave. safely. For the above reasons Sweet Jimmies Club, located at 1733 San Pablo Ave., is in violation of 25601 PB, Disorderly House and should have also been required to obtain a special events permit, due to the nature of the event, the amount of advertising, the number of people expected, and the popularity of the individual, a violation of 9.52.030 OMC.

No use of forces (k-4) were required to break up the fight and to preserve the peace, only our presence.

See numerous supplementals for additional details.

The following officers were used for the following times;

- 4A1 – 0000-0230 hrs. (Ofc. C. Johnson / Ofc. S. Seder)
- 4A2 – 0000-0300 hrs. (Ofc. Trenkamp / Ofc. Kemmitt)
- 4L3 – 0000-0230 hrs. (Ofc. F. Gysin)
- 4A4 – 0030-0230 hrs. (Ofc. R. McNeely / Ofc. L. Ausmus)
- 4A5 – 0030-0230 hrs. (Ofc. S. Bowling / Ofc. Skrdlant)

Sweet Jimmies directly required and used a total of 21.5 officer hours and 2.5 Sgt. hrs. for myself.

The above stats don't include the 2 Late-Tack Sergeants, 9 Late-Tack sideshow officers, and the approximately 10 other normal patrol officers and Sgt. Steinberger who all responded to assist in breaking up the fighting and keeping the peace IFO Sweet Jimmies Club.

Reported By K. THOMAS	Serial No. 8069P	Watch 3	Area 2B	Supervisor	Serial No.	Page 4 of 4
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CRIME Disorderly House 25601 BP	π SUPPLEMENTAL	INCIDENT # 17	V 1	VICTIM LAST, First, Mid. State Of California
SUSPECT LAST, First, Mid. Sweet Jimmie's Club	INCIDENT LOCATION 1733 San Pablo Ave.		DATE OF THIS REPORT 22 Oct 05	ORIGINAL DATE REPORTED

ITEM	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL, SIZE, COLOR, MARKS, ETC.	SERIAL #	VALUE
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NARRATIVE: On 4 Apr 05, I (3L74) was assigned as a patrol supervisor dressed in full police uniform, driving fully marked OPD veh #1921. I was in the area of Sweet Jimmies Club, 1733 San Pablo Ave. at approximately 2300 hrs. I observed a large number of persons outside the club on both sidewalks, the street, and heavy traffic on San Pablo Ave. I knew from prior intel from Lt. Berlin, Poulson and several officers, that the rapper "Too Short" was performing at the club and that they were expecting a near capacity crowd. Capacity for Sweet Jimmies was reported to be approximately 500 persons, and Jimmies security estimated that approximately 400 people would attend the event. The event was also advertised on local radio stations. The rapper "Too Short" is a very well known Oakland rapper, with a large following in the Bay Area and I expected numerous persons to come out to both the club, as well as hang out around the outside before, during and after the event.

I observed approximately 100-150 people directly IFO the club, on the sidewalk to the North and South of the club, and in the streets talking to the numerous vehicle driving both North and South on San Pablo Ave. There were also small pockets of 3 to 10 persons, mostly males hanging out on the various street corners talking to the female patrons as they walked towards the club. This was occurring even though the weather was very cold and it was raining off and on. Numerous vehicles were playing very loud music, audible far in excess of 100 feet, blocking traffic, with the vehicle occupants conversing with the pedestrians. The totality of the circumstances required immediate action to preserve public safety, for both pedestrians and vehicle occupants, keep traffic flowing and keep the roadway accessible for emergency vehicles, and prevent further "Sideshow" activity.

I also knew the club would be closing down soon, so I contacted Lt. Poulson and requested a special detail be put together to control the large crowd and manage the imminent influx of people about to be let out of the club, which he approved. Nine 3rd Watch officers, who normally work West end sideshow responded to 17th St. and San Pablo Ave. to assist. Additional Late-Tac units also responded to assist with the crowd. I used a total of 9 3rd Watch holdover patrol officers to help block and control traffic, site vehicles and pedestrians, and keep the peace IFO Sweet Jimmies Club. At approximately 0200 hrs., I observed several hundred (200-300) additional persons leaving the club and congregate IFO the club entrance and sidewalks directly adjacent to it. This increased the already large crowd of people who were now standing in the roadway completely blocking all lanes of traffic at times.

At approximately 0158 hrs., a large fight broke out in the crowd at one point in the middle of the street on San Pablo at 18th St., between an unknown number of MB's and possibly Sweet Jimmies security guards who were attempting to break up the fight, requiring numerous OPD Officer's to break up the mutual combat between the parties and keep the peace. As the fight erupted, several dozen uninvolved parties all began to run towards the area of the fight, causing the officers breaking up the fight to be surrounded. I estimated that approximately 20 unk persons were yelling at the OPD officers and becoming increasingly hostile and belligerent towards our presence and of our breaking up the fight. Several responding units and myself called for additional help and for all traffic control posts officers to respond to the intersection of 18th St. and San Pablo to keep the peace. One of the fighters (David Brown, [REDACTED]) was detained and arrested for public intoxication. I was standing at the intersection of 17th St and San Pablo with Lt. E. Poulson, who was on scene, when the fight occurred.

Sweet Jimmies security began to attempt to disperse the crowd, but numerous individuals ignored their requests. I formed a skirmish line IFO Jimmies and began to walk behind Sweet Jimmies security S/B San Pablo in an attempt to get people to go to their vehicles and leave the area, which they eventually did.

Reported By K. THOMAS	Serial No. 8069P	Watch 3	Area 2B	Supervisor	Serial No.	Page 3 of 3
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OPD
POLICE REPORT**SUSPECT
REPORT**OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

05-019404

CRIME Disorderly House 25601 BP	INCIDENT # 17	V1	VICTIM LAST, First, Mid. State Of California
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SUSPECT		Number	LAST, First, Mid Sweet Jimmie's Club				RELATIONSHIP TO VICTIM		IN CUSTODY THIS OFFENSE <input type="checkbox"/> Yes <input type="checkbox"/> No				
SEX	RACE	D.O.B.	AGE	HEIGHT	WEIGHT	HAIR	EYES	DL. NUMBER	PFN				
HOME ADDRESS			CITY <input type="checkbox"/> OAKLAND			ZIP		APT. NO.	HOME/MSG. PHONE				
WORK ADDRESS (Name of Business) (School) 1733 San Pablo Ave.			CITY <input checked="" type="checkbox"/> OAKLAND			OCCUPATION		WORK PHONE					
ADMONISHMENT: ADMONISHED <input type="checkbox"/> YES <input type="checkbox"/> NO REFUSED <input type="checkbox"/> YES <input type="checkbox"/> NO STATEMENT <input type="checkbox"/> YES <input type="checkbox"/> NO						<input type="checkbox"/> PROBATION COUNTY _____		Officer _____					
BY: (OFFICER/DATE/TIME)						<input type="checkbox"/> PAROLE AGENT _____		<input type="checkbox"/> PAL					
DESCRIPTION PROVIDED BY		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED											
HAIR LENGTH <input type="checkbox"/> SHORT <input type="checkbox"/> MED. (HALF EAR) <input type="checkbox"/> LONG (COVER EAR) <input type="checkbox"/> COLLAR <input type="checkbox"/> SHOULDER <input type="checkbox"/> BALD/SHAVED <input type="checkbox"/> RECEDING		HAIR STYLE <input type="checkbox"/> NATURAL / AFRO <input type="checkbox"/> BRAIDED <input type="checkbox"/> CREWCUT <input type="checkbox"/> CURLY <input type="checkbox"/> PONYTAIL <input type="checkbox"/> PUNK <input type="checkbox"/> CONSERVATIVE		FACIAL HAIR <input type="checkbox"/> NONE <input type="checkbox"/> BEARD <input type="checkbox"/> MUSTACHE <input type="checkbox"/> BEARD & MUSTACHE <input type="checkbox"/> GOATEE <input type="checkbox"/> SIDEBURNS		COMPLEXION <input type="checkbox"/> LIGHT <input type="checkbox"/> MEDIUM <input type="checkbox"/> DARK <input type="checkbox"/> FRECKLED <input type="checkbox"/> ACNE <input type="checkbox"/> POCKMARK <input type="checkbox"/> BUDDY		APPEARANCE <input type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input type="checkbox"/> UNKEMPT <input type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED <input type="checkbox"/> BIRTHMARK <input type="checkbox"/> MOLE		SPEECH <input type="checkbox"/> LOW PITCH <input type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> STUTTER <input type="checkbox"/> ACCENT TYPE _____ <input type="checkbox"/> OTHER		DEMEANOR <input type="checkbox"/> CALM <input type="checkbox"/> POLITE <input type="checkbox"/> APOLOGETIC <input type="checkbox"/> NERVOUS <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> OFFENSIVE <input type="checkbox"/> HOSTILE <input type="checkbox"/> VIOLENT	
OTHER DISTINCTIVE FEATURES <input type="checkbox"/> GOLD TOOTH <input type="checkbox"/> MISSING TEETH <input type="checkbox"/> SILVER TOOTH <input type="checkbox"/> GLASSES		<input type="checkbox"/> BODY ODOR TYPE _____ <input type="checkbox"/> LARGE EYES <input type="checkbox"/> MISSING LIMBS		WEAPON USED CAL. _____ BARREL _____ <input type="checkbox"/> BLUDGEON CLUB <input type="checkbox"/> HANDS/FEET		<input type="checkbox"/> REVOLVER <input type="checkbox"/> SEMI-AUTO PISTOL <input type="checkbox"/> SAWED OFF <input type="checkbox"/> ROCK/BRICK		<input type="checkbox"/> SHOTGUN <input type="checkbox"/> NICKEL <input type="checkbox"/> CUT/STAB		<input type="checkbox"/> RIFLE <input type="checkbox"/> BLUED <input type="checkbox"/> VEHICLE			

SUSPECT		Number	LAST, First, Mid				RELATIONSHIP TO VICTIM		IN CUSTODY THIS OFFENSE <input type="checkbox"/> Yes <input type="checkbox"/> No				
SEX	RACE	D.O.B.	AGE	HEIGHT	WEIGHT	HAIR	EYES	DL. NUMBER	PFN				
HOME ADDRESS			CITY <input type="checkbox"/> OAKLAND			ZIP		APT. NO.	HOME/MSG. PHONE				
WORK ADDRESS (Name of Business) (School)			CITY <input type="checkbox"/> OAKLAND			OCCUPATION		WORK PHONE					
ADMONISHMENT: ADMONISHED <input type="checkbox"/> YES <input type="checkbox"/> NO REFUSED <input type="checkbox"/> YES <input type="checkbox"/> NO STATEMENT <input type="checkbox"/> YES <input type="checkbox"/> NO						<input type="checkbox"/> PROBATION COUNTY _____		Officer _____					
BY: (OFFICER/DATE/TIME)						<input type="checkbox"/> PAROLE AGENT _____		<input type="checkbox"/> PAL					
DESCRIPTION PROVIDED BY		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED											
HAIR LENGTH <input type="checkbox"/> SHORT <input type="checkbox"/> MED. (HALF EAR) <input type="checkbox"/> LONG (COVER EAR) <input type="checkbox"/> COLLAR <input type="checkbox"/> SHOULDER <input type="checkbox"/> BALD/SHAVED <input type="checkbox"/> RECEDING		HAIR STYLE <input type="checkbox"/> NATURAL / AFRO <input type="checkbox"/> BRAIDED <input type="checkbox"/> CREWCUT <input type="checkbox"/> CURLY <input type="checkbox"/> PONYTAIL <input type="checkbox"/> PUNK <input type="checkbox"/> CONSERVATIVE		FACIAL HAIR <input type="checkbox"/> NONE <input type="checkbox"/> BEARD <input type="checkbox"/> MUSTACHE <input type="checkbox"/> BEARD & MUSTACHE <input type="checkbox"/> GOATEE <input type="checkbox"/> SIDEBURNS		COMPLEXION <input type="checkbox"/> LIGHT <input type="checkbox"/> MEDIUM <input type="checkbox"/> DARK <input type="checkbox"/> FRECKLED <input type="checkbox"/> ACNE <input type="checkbox"/> POCKMARK <input type="checkbox"/> BUDDY		APPEARANCE <input type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input type="checkbox"/> UNKEMPT <input type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED <input type="checkbox"/> BIRTHMARK <input type="checkbox"/> MOLE		SPEECH <input type="checkbox"/> LOW PITCH <input type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> STUTTER <input type="checkbox"/> ACCENT TYPE _____ <input type="checkbox"/> OTHER		DEMEANOR <input type="checkbox"/> CALM <input type="checkbox"/> POLITE <input type="checkbox"/> APOLOGETIC <input type="checkbox"/> NERVOUS <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> OFFENSIVE <input type="checkbox"/> HOSTILE <input type="checkbox"/> VIOLENT	
OTHER DISTINCTIVE FEATURES <input type="checkbox"/> GOLD TOOTH <input type="checkbox"/> MISSING TEETH <input type="checkbox"/> SILVER TOOTH <input type="checkbox"/> GLASSES		<input type="checkbox"/> BODY ODOR TYPE _____ <input type="checkbox"/> LARGE EYES <input type="checkbox"/> MISSING LIMBS		WEAPON USED CAL. _____ BARREL _____ <input type="checkbox"/> BLUDGEON CLUB <input type="checkbox"/> HANDS/FEET		<input type="checkbox"/> REVOLVER <input type="checkbox"/> SEMI-AUTO PISTOL <input type="checkbox"/> SAWED OFF <input type="checkbox"/> ROCK/BRICK		<input type="checkbox"/> SHOTGUN <input type="checkbox"/> NICKEL <input type="checkbox"/> CUT/STAB		<input type="checkbox"/> RIFLE <input type="checkbox"/> BLUED <input type="checkbox"/> VEHICLE			

SUSPECT VEHICLE		VEHICLE WAS <input type="checkbox"/> SECURED AT SCENE <input type="checkbox"/> RELEASED TO OWNER		<input type="checkbox"/> TOW (#) _____ <input type="checkbox"/> FINGERPRINTED <input type="checkbox"/> HOLD (UNIT) _____		DAMAGE DETAILS, UNIQUE FEATURES		OTHER DESCRIPTION					
OWNER				ADDRESS				CITY <input type="checkbox"/> OAKLAND		ZIP		PHONE	
LIC./STATE/OR PLATE COLORS				YEAR	MAKE	MODEL	STYLE	EXTERIOR COLOR	CONDITION <input type="checkbox"/> CLEAN <input type="checkbox"/> NEW. <input type="checkbox"/> DIRTY <input type="checkbox"/> POOR	INTERIOR COLOR	INTERIOR <input type="checkbox"/> CLEAN <input type="checkbox"/> ODOR <input type="checkbox"/> DIRTY <input type="checkbox"/>		
TIRES <input type="checkbox"/> STOCK <input type="checkbox"/> WIDE <input type="checkbox"/> SMALL		RIMS <input type="checkbox"/> STOCK <input type="checkbox"/> CHROME <input type="checkbox"/> MAGS <input type="checkbox"/> SPOKE		LEVEL <input type="checkbox"/> STOCK <input type="checkbox"/> LOWERED <input type="checkbox"/> RAISED <input type="checkbox"/>		ROOF <input type="checkbox"/> VINYL <input type="checkbox"/> LANDAU <input type="checkbox"/> CONV		WINDOWS <input type="checkbox"/> INTED <input type="checkbox"/> BROKEN	SEATS <input type="checkbox"/> VINYL <input type="checkbox"/> BENCH <input type="checkbox"/> CLOTH <input type="checkbox"/> BUCKET		TRANSMISSION <input type="checkbox"/> AUTOMATIC <input type="checkbox"/> MANUAL		

REPORTED BY K. THOMAS	SERIAL # 8069P	WATCH 3	DISTRICT 2B	SUPERVISOR	SERIAL #	PAGE 2 OF 4
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Oakland Police Department
455 - 7th Street
Oakland, CA 94607-3985

ASSIGN TO:

RD #

ROUTING

☒ CID

Outside Reporting Agency

Case No.

Police Beat

CP Beat

Incident No.

05-019404

<input type="checkbox"/> YSD <input type="checkbox"/> VICE <input type="checkbox"/> CSD <input type="checkbox"/> TRAFFIC <input type="checkbox"/> D.A. VIC/WIT <input checked="" type="checkbox"/> ABAT <input type="checkbox"/>	VICTIM 1 Last, First, Mid State Of California Home Address City Business Address / School City Occupation D.L. Number State Working Hours	<input type="checkbox"/> Business Name <input checked="" type="checkbox"/> Local / State / Federal Sex Race D.O.B. Age Home/Msg. Phone Work Phone <input type="checkbox"/> Domestic Violence <input type="checkbox"/> Victim Injured <input type="checkbox"/> Sex Assault Victim Request Conf. <input type="checkbox"/> Victim's Support <input type="checkbox"/> Resource Info Provided
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ADDITIONAL PERSON Home Address City Business Address / School City OPD	<input checked="" type="checkbox"/> R/P <input checked="" type="checkbox"/> Parent <input checked="" type="checkbox"/> Witness / Last, First, Mid Sgt. K. Thomas 8069p Sex Race D.O.B. Age Home/Msg. Phone Work Phone
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LOCATION <input type="checkbox"/> BANK/ATM <input type="checkbox"/> CONVENT MKT <input type="checkbox"/> GAS STATION <input type="checkbox"/> OTHER COMM. <input type="checkbox"/> RESIDENCE <input type="checkbox"/> STREET <input type="checkbox"/> MISC.	POINT OF ENTRY <input type="checkbox"/> DOOR <input type="checkbox"/> WINDOW <input type="checkbox"/> GARAGE <input type="checkbox"/> ADJ. PREM. <input type="checkbox"/> VENT/SKYLIGHT <input type="checkbox"/> OTHER	LOCATION P.O.E. <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> SIDE <input type="checkbox"/> ROOF <input type="checkbox"/> UNK.	METHOD OF ENTRY <input type="checkbox"/> OPEN/UNLOCKED <input type="checkbox"/> FORCED SCREEN <input type="checkbox"/> CUTTING DEVICE <input type="checkbox"/> BODY FORCE <input type="checkbox"/> PRY TOOL <input type="checkbox"/> CHANNEL LOCKS <input type="checkbox"/> ATTEMPT FORCE	<input type="checkbox"/> BREAK GLASS <input type="checkbox"/> REMOVE DOOR <input type="checkbox"/> REMOVE WINDOW <input type="checkbox"/> POSS. EMPLOYEE <input type="checkbox"/> KEY <input type="checkbox"/> WATER METER <input type="checkbox"/> NONE <input type="checkbox"/> UNK	BURGLARY <input type="checkbox"/> AUTO <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> OTHER <input type="checkbox"/> ALARM RESP	WEAPON USED <input type="checkbox"/> FIREARM <input type="checkbox"/> CUT/STAB INSTR <input type="checkbox"/> HANDS, FEET, FIST <input type="checkbox"/> CHEMICAL <input type="checkbox"/> NONE <input type="checkbox"/> OTHER
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<input type="checkbox"/> Gang Related <input type="checkbox"/> Hate Crime Motivated By: <input type="checkbox"/> Race <input type="checkbox"/> Ethnicity <input type="checkbox"/> Religion <input type="checkbox"/> Sexual Orientation <input type="checkbox"/> Physical Disability <input type="checkbox"/> Mental Disability <input type="checkbox"/> Gender
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CRIME Common Name Disorderly House Section/Subsection 25601 Code BP Pertains To: V: 1	LOCATION Address (Address/Block No./Intersection) 33 San Pablo Ave. <input type="checkbox"/> OHA <input checked="" type="checkbox"/> ABC	LOSS <input checked="" type="checkbox"/> None TYPE OF THEFT <input type="checkbox"/> PICKPOCKET <input type="checkbox"/> PURSNEATCH <input type="checkbox"/> AUTO ACCESS <input type="checkbox"/> AUTO CLOUT <input type="checkbox"/> SHOPLIFTING <input type="checkbox"/> BICYCLE <input type="checkbox"/> COIN OP. DEVICE <input type="checkbox"/> FROM BUILDING <input type="checkbox"/> OTHER	Occurred On or From 4-Apr-05 17 Mon To 4-Apr-05 330 Mon Reported 4 Apr 05 17 Mon	SOLVABILITY FACTORS (Check All That Apply) <input type="checkbox"/> SURVEILLANCE PHOTO <input type="checkbox"/> SERIOUS INJURY <input checked="" type="checkbox"/> EVIDENCE <input type="checkbox"/> SUSPECT IN-CUSTODY <input type="checkbox"/> NAMED SUSPECT <input checked="" type="checkbox"/> IDENTIFIABLE SUSPECT <input checked="" type="checkbox"/> R/O REQUESTS INVEST.
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☐ The VICTIM / REPORTING PARTY contacted the police department to report the THEFT / LOSS / DAMAGE of the listed property. There are no known suspects. This report is made to alert the police. No narrative was completed.

VICTIM VEHICLE License No. State <input type="checkbox"/> Secured At The Scene <input type="checkbox"/> Released To The Owner <input type="checkbox"/> Hold (Unit) <input type="checkbox"/> Towed <input type="checkbox"/> Fingerprinted <input type="checkbox"/> Stolen Tow Number	<input type="checkbox"/> Car <input type="checkbox"/> Truck <input type="checkbox"/> Other Year Make Model Body Type Color Vin No. <input type="checkbox"/> Stolen <input type="checkbox"/> Bicycle <input type="checkbox"/> Mens <input type="checkbox"/> Womens <input type="checkbox"/> Mtn. <input type="checkbox"/> Road Color Brand Model Speed License No. Serial No.
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PROPERTY / NARRATIVE <input type="checkbox"/> Loss <input type="checkbox"/> Evidence <input type="checkbox"/> Safekeeping <input type="checkbox"/> Recovered Location When Stolen <input type="checkbox"/> Interior <input type="checkbox"/> Exterior <input type="checkbox"/> Garage
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Item	Qty.	Item Type, Brand, Model No., Size, Color, Marks, Etc.	Serial No.	\$ Value
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AOD and Juvenile Reporting Code (Refer to AOD Code Card)				CRIME2: Special Events Permit Required 9.52.030 OMC			
AOD	Setting (2 Digit #)	Juvenile					

Total Number Of				<input type="checkbox"/> Phone Report	Photos Taken <input type="checkbox"/> Yes <input type="checkbox"/> No	Evidence Collected <input type="checkbox"/> Yes <input type="checkbox"/> No	Tech: On Scene Tech Tag Left	Rec. Value	Loss Value	Page 1 of 4	
Vict. 1	Wit. 0	Susp. 0	Arr. 0				<input type="checkbox"/> Yes <input type="checkbox"/> No				
Reported By K. THOMAS		Serial No. 8069P		Watch 3	Area 2B	Supervisor LT. K. MULLNIX		Serial No.	Reviewer	Serial No.	

OPD

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

05-020620

CRIME DISORDERLY HOUSE 25601 BFP	SUPPLEMENTAL	INCIDENT # 165	V1	VICTIM LAST, First, Mid. STATE OF CALIFORNIA
SUSPECT LAST, First, Mid. CLUB JIMMIES	INCIDENT LOCATION 1731 SAN PABLO AVE.	DATE OF THIS REPORT 10 APR. 05	ORIGINAL DATE REPORTED	

ITEM #	QNTY.	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
SUMMARY:				
ON 10 APR 05, OFC. D. KENNITT 8425P AND I WERE WORKING AS A TWO OFFICER UNIT (4402), BOTH DRESSED IN FULL POLICE UNIFORM AND DRIVING MARKED PATROL VEHICLE NO. 1309. AT APPROX 0015 HRS. WE RESPONDED TO THE 1700 BLOCK - SAN PABLO AVE TO ASSIST ADDITIONAL SIDESHOW UNITS WITH THE REPORT OF A LARGE CROWD IFO "CLUB JIMMIES".				
UPON ARRIVAL, OFC. KENNITT AND I OBSERVED A LARGE CROWD DIRECTLY IFO. 1731 SAN PABLO AVE, "CLUB JIMMIES", APPROX. THREE (3) TO FOUR-HUNDRED (400) STANDING ON THE WEST SIDEWALK. THIS CROWD WAS MOSTLY ASSOCIATED WITH THE CLUB PATRONS STANDING IN LINE, AND SURROUNDING SIDE STREETS.				
WHILE ON SCENE, I OBSERVED CIVIL DISOBEDIENCE WHICH RESULTED IN NUMEROUS REPORTS OF FIGHTS, PUBLIC INTOXICATION, VANDALISM AND BLOCKING ROADWAYS, WHICH PREVENTED THE ACCESS OF EMERGENCY VEHICLES AND UNINVOLVED PASSING CITIZENS.				
AT APPROX. 0130 HRS. I TOWED A BLOCKING VEHICLE, IN THE [REDACTED] (TOW NO. J-2) FOR BLOCKING THE ENTIRE ROADWAY, TOW AUTHORITY [REDACTED]				
IN ADDITION, AT APPROX. 0215 HRS. "CLUB JIMMIES" RELEASED THE CLUB PATRONS, WHICH RESULTED IN PEDESTRIAN TRAFFIC BLOCKING THE ENTIRE 1600, 1700, 1800 BLOCK OF SAN PABLO AVE., AND SIDE STREETS. I THEN OBSERVED HUNDREDS OF "SIDESHOW" PARTICIPANTS, INVOLVED IN 23103 VC. ACTIVITY, 27007 VC. SOUND SYSTEM, BLOCKING ALL SURROUNDING INTERSECTIONS, INCLUDING [REDACTED] CHEVRON GAS STATION. THE SIDESHOW ACTIVITY CONTRIBUTED TO THE CLOSING OF THE CHEVRON GAS STATION FOR SAFETY REASONS, DUE TO THE UNPAID CROWD AND DANGEROUS ACTIVITY. I ALSO OVERHEARD THE REPORT OF A CROWD ATTEMPTING TO BREAK INTO THE MARKET LOCATED AT [REDACTED]				

REPORTED BY M. TRENKAMP	SERIAL # 8463p	WATCH 3	DISTRICT 2	SUPERVISOR SGT. K. THOMAS	SERIAL # 8069p	PAGE 1 OF 1
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OPD

ADDITIONAL INFORMATION REPORT

455 - 7th Street
Oakland, CA 94607

05-020620

CRIME 25601	<input checked="" type="checkbox"/> SUPPLEMENTAL BP	INCIDENT # 165	V1 V1	VICTIM LAST, First, Mid. S, C
SUSPECT LAST, First, Mid. Sincet Jimmies	INCIDENT LOCATION 12 TH ST. & JEFFERSON		DATE OF THIS REPORT 10 APR 05	ORIGINAL DATE REPORTED

ITEM #	QNTY.	PROPERTY (and/or NARRATIVE)	SERIAL #	VALUE
		ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC		
<u>SUMMARY:</u>				
ON 10APR05, AT ABOUT 0100, I WAS ASSIGNED TO THE SIDESHOW DETAIL, AND WAS ASSIGNED TO A TCP AT [REDACTED]. WHILE ASSIGNED TO THE TCP, I WITNESSED NUMEROUS VEHICLES DRIVING RECKLESSLY AND ENDANGERING OTHER VEHICLE AND PEDESTRIAN TRAFFIC IN ADDITION TO THE RECKLESS DRIVING, NUMEROUS VEHICLES STOPPED IN THE MIDDLE OF THE ROAD AND BLASTED THEIR HORN FOR SEVERAL MINUTES, CAUSING TRAFFIC TO COME TO A DEAD STOP BETWEEN [REDACTED] I ALSO OBSERVED SEVERAL PEDESTRIANS JAYWALKING CARRYING OPEN CONTAINERS OF ALCOHOLIC BEVERAGES, AND CAUSING A DISTURBANCE IFO THE LIQUOR STORE AT [REDACTED] IT TOOK RESPONDING OFFICERS SEVERAL MINUTES TO DISPERSE THE LARGE CROWD OF VEHICLES AND PEDESTRIAN TRAFFIC THAT HAD GATHERED.				
AFTER CLEARING THE TCP, I RELOCATED OUT OF THE AREA AT 0300.				
REPORTED BY	SERIAL #	WATCH	DISTRICT	SUPERVISOR
S. BRAWLEY	8411P	3	1	SGT. BRANDHOOD
			SERIAL #	PAGE 1 OF 1

O P D

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

05-020620

CRIME 25601 BP	<input checked="" type="checkbox"/> SUPPLEMENTAL	INCIDENT # 165	V1	VICTIM LAST, First, Mid. SOL
SUSPECT LAST, First, Mid. Sweet Jimmies	INCIDENT LOCATION 1700 BLK OF SAN PABLO		DATE OF THIS REPORT 10APR05	ORIGINAL DATE REPORTED

ITEM #	QNTY.	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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SUPPLEMENTAL:

ON 10APR05 AT 0030 hrs, I WAS WORKING AS OPD PATROL UNIT 446 WITH OFF. K. MURPHY, 8572P. WE WERE WORKING DIRECTED PATROL. WE WERE DISPATCHED TO THE 1700 BLK OF SAN PABLO TO SET UP A TRAFFIC CONTROL POST BLOCKING E/B TRAFFIC ON 17th ST FROM SAN PABLO. WHILE ON OUR TRAFFIC CONTROL POST, I OBSERVED AN EXCESS OF 200 PEOPLE LOITERING ON THE SIDEWALKS & STREETS SURROUNDING "SWEET JIMMIES" NIGHT CLUB. I OBSERVED THE INDIVIDUALS CONGESTING THE SIDEWALKS & VIOLATING LOCAL ORDINANCES, VEHICLE CODE VIOLATIONS & PENAL CODE VIOLATIONS (PUBLIC INTOXICATION, OPEN ALCOHOLIC CONTAINERS IN PUBLIC, JAY WALKING, DISTURBING THE PEACE, ETC.). WE CLEARED FROM OUR TRAFFIC CONTROL POST AT AROUND 0300 hrs.

REPORTED BY E. BARANGAN	SERIAL # 8544P	WATCH 3	DISTRICT 5	SUPERVISOR SGT. M. GUTTERSON	SERIAL #	PAGE 1 OF 1
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OS-020620

PROPERTY (and/or NARRATIVE)		SERIAL #		VALUE
ITEM #	QNTY.	ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
Summary:				
On 10Apr05 at about 0105hrs I was working as OPD sideshow unit 467. I responded to 17th St [REDACTED] and maintained a traffic control post blocking NIB traffic. [REDACTED]				
I observed between 300-400 vehicles in the area causing major traffic problems. I also observed numerous vehicles playing loud music in violation of 27007 V.C. I also noticed vehicles driving [REDACTED] lane and cone patterns and vehicles driving recklessly and left of the double solid yellow line.				
At about 0210hrs I observed a large crowd of vehicles stopped and blocking [REDACTED] St. Numerous vehicles were playing loud music and individuals were dancing on top of vehicles.				
I finally cleared the area at 0300hrs.				
REPORTED BY	SERIAL #	WATCH	DISTRICT	SUPERVISOR
C. Keeler	8462P	3	6	Sgt. Brendwood
PAGE 1 OF 1				

OPD ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

05-020620

CRIME 25601 BP	SUPPLEMENTAL	INCIDENT # 165	V1	VICTIM LAST, First, Mid. S.C.
SUSPECT LAST, First, Mid. Sweet Jimmies	INCIDENT LOCATION 1733 San Pablo		DATE OF THIS REPORT 10 APR 05	ORIGINAL DATE REPORTED

ITEM #	QNTY.	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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SUMMARY:

ON WAPROS, AT ABOUT ABOUT 0030, I WAS WORKING AS OPD SIDESHOWN UNIT
HAI W/ OFC S. SEDER 8532P. I WAS DIRECTED BY SGT K. THOMAS TO TAKE
UP A TRAFFIC CONTROL POST AT [REDACTED] AS I WAS AT
[REDACTED] I NOTICED 500-700 PEOPLE IN THE MIDDLE OF THE STREET
AS THE CLUB LET OUT NOT ALLOWING TRAFFIC TO GO N/S BOUND
ON SAN PABLO.

AS I WAS ON MY POST I WAS DIRECTED TO [REDACTED] TO TOW A
BLK VOLV 540 THAT WAS PARKED, LOCKED, AND UNATTENDED IN THE
MIDDLE OF THE STREET BLOCKING TRAFFIC E/B ON 18TH ST
[REDACTED]

AFTER TOWING THE BLK VEHICLE I HAD TO HELP [REDACTED]
DIRECT TRAFFIC AWAY FROM THE CLUB AND TOWARDS THE HWY.
I NOTICED ABOUT 300 VEHICLES STOPPED, BLOCKING, AND CAUSING
A LARGE TRAFFIC HAZARD NOT WANTING TO LEAVE THE
AREA. THE VEHICLES ALSO HAD THEIR DOORS OPEN AND MUSIC
BLASTING AS THE VEHICLES WERE IN MOTION.

WE FINALLY HAD THE AREA CLEARED AT ABOUT 0300.

REPORTED BY C. JOHNSON	SERIAL # 8517P	WATCH 3	DISTRICT 1	SUPERVISOR SGT L. RIGGS	SERIAL # 7553P	PAGE ____ OF ____
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CRIME Disorderly House 25601 BP	π SUPPLEMENTAL	INCIDENT # 165	V 1	VICTIM LAST, First, Mid. State Of California
SUSPECT LAST, First, Mid. Sweet Jimmie's Club	INCIDENT LOCATION 1733 San Pablo Ave.		DATE OF THIS REPORT 15 Apr 05	ORIGINAL DATE REPORTED

ITEM	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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been required to obtain a special events permit, due to the nature of the event, the amount of advertising, the number of people expected, and the popularity of the individual, a violation of 9.52.030 OMC.

See numerous supplementals for additional details.

The following officers were used for the following times;

- 4A1 - 0030-0300 hrs. (Ofc. C. Johnson / Ofc. S. Seder)
- 4A2 - 0015-0300 hrs. (Ofc. Trenkamp / Ofc. Kemmitt)
- 4A3 - 0001-0300 hrs. (Ofc. R. McNeely / Ofc. L. Ausmus)
- 4L4 - 0100-0300 hrs. (Ofc. S. Bowling)
- 4A6 - 0030-0300 hrs. (Ofc. K. Murphy / Ofc. E. Barangan)
- 4L7 - 0100-0300 hrs. (Ofc. C. Keden)

Sweet Jimmies directly required and used a total of 23.5 officer hours and 3 Sgt. hrs. for myself.

Reported By K. THOMAS	Serial No. 8069P	Watch 3	Area 2B	Supervisor	Serial No.	Page 4 of 4
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CRIME Disorderly House 25601 BP	π SUPPLEMENTAL	INCIDENT # 165	V 1	VICTIM LAST, First, Mid. State Of California
SUSPECT LAST, First, Mid. Sweet Jimmie's Club	INCIDENT LOCATION 1733 San Pablo Ave.		DATE OF THIS REPORT 15 Apr 05	ORIGINAL DATE REPORTED

ITEM	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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NARRATIVE: On 10 Apr 05, I (3L72) was assigned as a patrol supervisor dressed in full police uniform, driving fully marked OPD veh #1243. I responded to the area of Sweet Jimmies Club, 1733 San Pablo Ave. at approximately 0001 hrs. I observed a large number of persons outside the club on both sidewalks, the street, and heavy traffic on San Pablo Ave. I knew from prior intel that the rapper/R&B singer "Bobby Valantino" was performing at the club and that they were expecting a near capacity crowd. Capacity for Sweet Jimmies was reported to be approximately 500 persons, and Jimmies security estimated that approximately 400-500 people would attend the event. Ofc. R. McNeely had just informed me that traffic had come to a standstill on San Pablo IFO Sweet Jimmies and that numerous vehicles were spinning their rear tires creating loud screeching noises and clouds of smoke. Ofc. McNeeley reported that immediate action was required to preserve the peace.

I further observed approximately 100-150 people directly IFO the club, on the sidewalk to the North and South of the club, and in the streets talking to the numerous vehicle driving both North and South on San Pablo Ave. There were also larger pockets of 10-15 persons, mostly males hanging out on the various street corners across from the club. Numerous vehicles were playing very loud music, audible far in excess of 100 feet, blocking traffic, with the vehicle occupants conversing with the pedestrians. The totality of the circumstances required immediate action to preserve public safety, for both pedestrians and vehicle occupants, keep traffic flowing and keep the roadway accessible for emergency vehicles, and prevent further "Sideshow" activity.

I also knew the club would be closing down soon, so I requested all West End sideshow units to 17th St. and San Pablo Ave., due to the imminent influx of people about to be let out of the club. I used a total of 10 officers (see detail for details) to help block and control traffic, site vehicles and pedestrians, and keep the peace IFO Sweet Jimmies Club. Approximately 0130 hrs., I observed several hundred (300-400) additional persons leaving the club and congregate IFO the club entrance and sidewalks directly adjacent to it. This increased the already large crowd of people who were now standing in the roadway completely blocking all lanes of traffic at times. Numerous vehicles performed numerous dangerous driving violations as they left the area including, speeding, unsafe starting, and reckless driving.

I videotaped a portion of the club being let out with the patrons completely blocking the roadway and not leaving the area, but rather continuing to congregate IFO Sweet Jimmies for some time. See EVID item #1 for additional details.

As my "Sideshow" units controlled the crowd directly around Sweet Jimmies numerous vehicles began to drive recklessly, spin doughnuts, and play their car stereos very loudly just outside of our traffic control posts. Myself as well as several of my units responded to the area of [REDACTED], as well as the Chevron Gas Station at [REDACTED] to break up the "Sideshows."

Based on my observations, Sweet Jimmies was directly responsible for the attractable nuisance of the very large crowd and traffic. Sweet Jimmies security was unable to control the large number of patrons once they left the club. This group committed numerous vehicular violations, pedestrian violations, played loud music, and endangered the safety of the citizens of Oakland by, congregating in the street, fighting, reckless driving and preventing emergency vehicles from being able to traverse San Pablo Ave. safely. For the above reasons Sweet Jimmies Club, located at 1733 San Pablo Ave., is in violation of 25601 PB, Disorderly House and should have also

Reported By K. THOMAS	Serial No. 8069P	Watch 3	Area 2B	Supervisor	Serial No.	Page 3 of 3
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3rd Watch Extension of Shift
JLS Sideshow Detail
9 Apr 05

JLS / Eastmont

Contact 3L72 Sgt. K. Thomas [REDACTED]

Unit	Name	Ser #
4A1	S. Seder	8532P
	C. Johnson	8517P
4A2	M. Trenkamp	8463P
	D. Kemmitt	8425P
4A3	L. Ausmus	8432P
	R. Mcneely	8568P
4A4 ?? 4L4	S. Bowling	8411P
	L. Skrdlant	8411P
4A6	K. Murphy	8572P
	E. Barangan	8544P
4L7	C. Keden	8469P

OPD ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

05-020260

CRIME 25601	(*) SUPPLEMENTAL BP	INCIDENT # 185	V1	VICTIM LAST, First, Mid. S.C.
SUSPECT LAST, First Mid. Sweet	INCIDENT LOCATION Simmer	1733 San Pablo Ave	DATE OF THIS REPORT 10APR05	ORIGINAL DATE REPORTED

ITEM #	QNTY.	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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Supplemental Summary:

On 10APR05, at about 0001 hrs, I was working as JCS Sideshow Unit 461, I was driving fully marked patrol car 1728 and I was wearing full police uniform. As I was patrolling through the area of 17TH St and San Pablo Ave. While in the area I observed approximately 100 individuals in line in front of 1733 San Pablo Ave. The security personnel at 1733 San Pablo Ave had set up road cones to block all traffic going N/B and S/B on San Pablo Ave in the 1700 blk. Vehicle ran over the cones and continued to drive through the 1700 blk of San Pablo. There were approx 75 to 100 vehicles in the area. Several vehicles were playing loud music and were spinning their tires creating large clouds of smoke. I informed Sgt. K. Thomas 3672 of my observations.

Sgt. K. Thomas instructed me to conduct a traffic control post at 17TH St and Jefferson St. While I was at my traffic control post, I observed several vehicles committing vehicle code violations. I exited my vehicle on foot and cited an vehicle at [REDACTED]. While at that location I observed about 50 to 75 vehicles that had stopped in the area and the occupants got out of their vehicles and were dancing on the hoods and roofs of their vehicles. Several vehicles were playing loud music. I held my post at [REDACTED] from 0030 to 0300 hrs.

REPORTED BY R. H. Wesley	SERIAL # 8568P	WATCH 3	DISTRICT 5	SUPERVISOR Sgt. Guttorison	SERIAL #	PAGE ____ OF ____
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OPD
POLICE REPORT**SUSPECT
REPORT**OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

05-020260

CRIME Disorderly House 25601 BP				INCIDENT # 165		V1		VICTIM LAST, First, Mid. State Of California					
SUSPECT		Number		LAST, First, Mid Sweet Jimmie's Club				RELATIONSHIP TO VICTIM		IN CUSTODY THIS OFFENSE <input type="checkbox"/> Yes <input type="checkbox"/> No			
SEX	RACE	D.O.B.	AGE	HEIGHT	WEIGHT	HAIR	EYES	DL. NUMBER	PFN				
HOME ADDRESS				CITY <input type="checkbox"/> OAKLAND				ZIP		APT. NO.	HOME/MSG. PHONE		
WORK ADDRESS (Name of Business) (School) 1733 San Pablo Ave.				CITY <input checked="" type="checkbox"/> OAKLAND				OCCUPATION		WORK PHONE			
ADMONISHMENT: ADMONISHED <input type="checkbox"/> YES <input type="checkbox"/> NO REFUSED <input type="checkbox"/> YES <input type="checkbox"/> NO STATEMENT <input type="checkbox"/> YES <input type="checkbox"/> NO				<input type="checkbox"/> PROBATION COUNTY _____				Officer _____					
BY: (OFFICER/DATE/TIME)				<input type="checkbox"/> PAROLE AGENT _____				<input type="checkbox"/> PAL					
DESCRIPTION PROVIDED BY		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED											
HAIR LENGTH <input type="checkbox"/> SHORT <input type="checkbox"/> MED. (HALF EAR) <input type="checkbox"/> LONG (COVER EAR) <input type="checkbox"/> COLLAR <input type="checkbox"/> SHOULDER <input type="checkbox"/> BALD/SHAVED <input type="checkbox"/> RECEDING		HAIR STYLE <input type="checkbox"/> NATURAL / AFRO <input type="checkbox"/> BRAIDED <input type="checkbox"/> CREWCUT <input type="checkbox"/> CURLY <input type="checkbox"/> PONYTAIL <input type="checkbox"/> PUNK <input type="checkbox"/> CONSERVATIVE		FACIAL HAIR <input type="checkbox"/> NONE <input type="checkbox"/> BEARD <input type="checkbox"/> MUSTACHE <input type="checkbox"/> BEARD & MUSTACHE <input type="checkbox"/> GOATEE <input type="checkbox"/> SIDEBURNS		COMPLEXION <input type="checkbox"/> LIGHT <input type="checkbox"/> MEDIUM <input type="checkbox"/> DARK <input type="checkbox"/> FRECKLED <input type="checkbox"/> ACNE <input type="checkbox"/> POCKMARK <input type="checkbox"/> RUDDY		APPEARANCE <input type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input type="checkbox"/> UNKEMPT <input type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED <input type="checkbox"/> BIRTHMARK <input type="checkbox"/> MOLE		SPEECH <input type="checkbox"/> LOW PITCH <input type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> STUTTER <input type="checkbox"/> ACCENT TYPE _____ <input type="checkbox"/> OTHER		DEMEANOR <input type="checkbox"/> CALM <input type="checkbox"/> POLITE <input type="checkbox"/> APOLOGETIC <input type="checkbox"/> NERVOUS <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> OFFENSIVE <input type="checkbox"/> HOSTILE <input type="checkbox"/> VIOLENT	
OTHER DISTINCTIVE FEATURES <input type="checkbox"/> GOLD TOOTH <input type="checkbox"/> MISSING TEETH <input type="checkbox"/> SILVER TOOTH <input type="checkbox"/> GLASSES				<input type="checkbox"/> BODY ODOR TYPE _____ <input type="checkbox"/> LARGE EYES <input type="checkbox"/> MISSING LIMBS		WEAPON USED CAL. _____ BARREL _____ <input type="checkbox"/> BLUDGEON CLUB <input type="checkbox"/> HANDS/FEET		<input type="checkbox"/> REVOLVER <input type="checkbox"/> SEMI-AUTO PISTOL <input type="checkbox"/> SHOTGUN <input type="checkbox"/> SAWED OFF <input type="checkbox"/> NICKEL <input type="checkbox"/> RIFLE <input type="checkbox"/> ROCK/BRICK <input type="checkbox"/> CUT/STAB <input type="checkbox"/> BLUEP <input type="checkbox"/> VEHICLE					
SUSPECT		Number		LAST, First, Mid				RELATIONSHIP TO VICTIM		IN CUSTODY THIS OFFENSE <input type="checkbox"/> Yes <input type="checkbox"/> No			
SEX	RACE	D.O.B.	AGE	HEIGHT	WEIGHT	HAIR	EYES	DL. NUMBER	PFN				
HOME ADDRESS				CITY <input type="checkbox"/> OAKLAND				ZIP		APT. NO.	HOME/MSG. PHONE		
WORK ADDRESS (Name of Business) (School)				CITY <input type="checkbox"/> OAKLAND				OCCUPATION		WORK PHONE			
ADMONISHMENT: ADMONISHED <input type="checkbox"/> YES <input type="checkbox"/> NO REFUSED <input type="checkbox"/> YES <input type="checkbox"/> NO STATEMENT <input type="checkbox"/> YES <input type="checkbox"/> NO				<input type="checkbox"/> PROBATION COUNTY _____				Officer _____					
BY: (OFFICER/DATE/TIME)				<input type="checkbox"/> PAROLE AGENT _____				<input type="checkbox"/> PAL					
DESCRIPTION PROVIDED BY		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED											
HAIR LENGTH <input type="checkbox"/> SHORT <input type="checkbox"/> MED. (HALF EAR) <input type="checkbox"/> LONG (COVER EAR) <input type="checkbox"/> COLLAR <input type="checkbox"/> SHOULDER <input type="checkbox"/> BALD/SHAVED <input type="checkbox"/> RECEDING		HAIR STYLE <input type="checkbox"/> NATURAL / AFRO <input type="checkbox"/> BRAIDED <input type="checkbox"/> CREWCUT <input type="checkbox"/> CURLY <input type="checkbox"/> PONYTAIL <input type="checkbox"/> PUNK <input type="checkbox"/> CONSERVATIVE		FACIAL HAIR <input type="checkbox"/> NONE <input type="checkbox"/> BEARD <input type="checkbox"/> MUSTACHE <input type="checkbox"/> BEARD & MUSTACHE <input type="checkbox"/> GOATEE <input type="checkbox"/> SIDEBURNS		COMPLEXION <input type="checkbox"/> LIGHT <input type="checkbox"/> MEDIUM <input type="checkbox"/> DARK <input type="checkbox"/> FRECKLED <input type="checkbox"/> ACNE <input type="checkbox"/> POCKMARK <input type="checkbox"/> RUDDY		APPEARANCE <input type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input type="checkbox"/> UNKEMPT <input type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED <input type="checkbox"/> BIRTHMARK <input type="checkbox"/> MOLE		SPEECH <input type="checkbox"/> LOW PITCH <input type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> STUTTER <input type="checkbox"/> ACCENT TYPE _____ <input type="checkbox"/> OTHER		DEMEANOR <input type="checkbox"/> CALM <input type="checkbox"/> POLITE <input type="checkbox"/> APOLOGETIC <input type="checkbox"/> NERVOUS <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> OFFENSIVE <input type="checkbox"/> HOSTILE <input type="checkbox"/> VIOLENT	
OTHER DISTINCTIVE FEATURES <input type="checkbox"/> GOLD TOOTH <input type="checkbox"/> MISSING TEETH <input type="checkbox"/> SILVER TOOTH <input type="checkbox"/> GLASSES				<input type="checkbox"/> BODY ODOR TYPE _____ <input type="checkbox"/> LARGE EYES <input type="checkbox"/> MISSING LIMBS		WEAPON USED CAL. _____ BARREL _____ <input type="checkbox"/> BLUDGEON CLUB <input type="checkbox"/> HANDS/FEET		<input type="checkbox"/> REVOLVER <input type="checkbox"/> SEMI-AUTO PISTOL <input type="checkbox"/> SHOTGUN <input type="checkbox"/> SAWED OFF <input type="checkbox"/> NICKEL <input type="checkbox"/> RIFLE <input type="checkbox"/> ROCK/BRICK <input type="checkbox"/> CUT/STAB <input type="checkbox"/> BLUEP <input type="checkbox"/> VEHICLE					
SUSPECT VEHICLE		VEHICLE WAS <input type="checkbox"/> SECURED AT SCENE <input type="checkbox"/> RELEASED TO OWNER				<input type="checkbox"/> TOW (#) _____ <input type="checkbox"/> FINGERPRINTED <input type="checkbox"/> HOLD (UNIT) _____		DAMAGE DETAILS, UNIQUE FEATURES				OTHER DESCRIPTION	
OWNER				ADDRESS				CITY <input type="checkbox"/> OAKLAND		ZIP		PHONE	
LIC/STATE/OR PLATE COLORS				YEAR	MAKE	MODEL	STYLE	EXTERIOR COLOR	CONDITION <input type="checkbox"/> CLEAN <input type="checkbox"/> NEW <input type="checkbox"/> DIRTY <input type="checkbox"/> POOR	INTERIOR COLOR	INTERIOR <input type="checkbox"/> CLEAN <input type="checkbox"/> ODOR <input type="checkbox"/> DIRTY <input type="checkbox"/>		
TIRES <input type="checkbox"/> STOCK <input type="checkbox"/> WIDE <input type="checkbox"/> SMALL		RIMS <input type="checkbox"/> STOCK <input type="checkbox"/> CHROME <input type="checkbox"/> MAGS <input type="checkbox"/> SPOKE		LEVEL <input type="checkbox"/> STOCK <input type="checkbox"/> LOWERED <input type="checkbox"/> RAISED <input type="checkbox"/>		ROOF <input type="checkbox"/> VINYL <input type="checkbox"/> LANDAU <input type="checkbox"/> CONV		WINDOWS <input type="checkbox"/> INTED <input type="checkbox"/> BROKEN		SEATS <input type="checkbox"/> VINYL <input type="checkbox"/> BENCH <input type="checkbox"/> CLOTH <input type="checkbox"/> BUCKET		TRANSMISSION <input type="checkbox"/> AUTOMATIC <input type="checkbox"/> MANUAL	
REPORTED BY K. THOMAS				SERIAL # 8069P		WATCH 3	DISTRICT 2B	SUPERVISOR		SERIAL #		PAGE 2 OF 4	

CRIME REPORT

Oakland Police Department
455 - 7th Street
Oakland, CA 94607-3985

ASSIGN TO:

RD #

7571

ROUTING

☒ CID

Outside Reporting Agency

Case No.

Police Beat

CP Beat

Incident No.

05-020260

☐ YSD

☐ VICE

☐ CSD

☐ TRAFFIC

☐ D.A.

☐ VIC/WIT

☒ ABAT

☐

VICTIM 1

Last, First, Mid

☐ Business Name

☒ Local / State / Federal

Sex

Race

D.O.B.

Age

State Of California

Home Address

City

☐ Oakland

Zip

Home/Msg. Phone

Business Address / School

City

☐ Oakland

Zip

Work Phone

Occupation

D.L. Number

State

☐ Domestic Violence

☐ Victim Injured

☐ Sex Assault Victim Request Conf.

☐ Victim's Support

☐ Resource Info Provided

Working Hours

ADDITIONAL PERSON

☒ R/P

☐ Parent

☐ Witness 1

Last, First, Mid

Sgt. K. Thomas 8069p

Sex

Race

D.O.B.

Age

Home Address

City ☐ Oakland

Zip

Home/Msg. Phone

Business Address / School

City ☐ Oakland

Zip

Work Phone

OPD

LOCATION	POINT OF ENTRY	LOCATION P.O.E.	METHOD OF ENTRY	<input type="checkbox"/> BREAK GLASS	BURGLARY	WEAPON USED
<input type="checkbox"/> BANK/ATM	<input type="checkbox"/> DOOR	<input type="checkbox"/> FRONT	<input type="checkbox"/> OPEN/UNLOCKED	<input type="checkbox"/> REMOVE DOOR	<input type="checkbox"/> AUTO	<input type="checkbox"/> FIREARM
<input type="checkbox"/> CONVENT MKT	<input type="checkbox"/> WINDOW	<input type="checkbox"/> REAR	<input type="checkbox"/> FORCED SCREEN	<input type="checkbox"/> REMOVE WINDOW	<input type="checkbox"/> RESIDENTIAL	<input type="checkbox"/> CUT/STAB INSTR
<input type="checkbox"/> GAS STATION	<input type="checkbox"/> GARAGE	<input type="checkbox"/> SIDE	<input type="checkbox"/> CUTTING DEVICE	<input type="checkbox"/> POSS. EMPLOYEE	<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> HANDS, FEET, FIST
<input type="checkbox"/> OTHER COMM.	<input type="checkbox"/> ADJ. PREM.	<input type="checkbox"/> ROOF	<input type="checkbox"/> BODY FORCE	<input type="checkbox"/> KEY	<input type="checkbox"/> OTHER	<input type="checkbox"/> CHEMICAL
<input type="checkbox"/> RESIDENCE	<input type="checkbox"/> VENT/SKYLIGHT	<input type="checkbox"/> UNK.	<input type="checkbox"/> PRY TOOL	<input type="checkbox"/> WATER METER	<input type="checkbox"/> ALARM RESP	<input type="checkbox"/> NONE
<input type="checkbox"/> STREET	<input type="checkbox"/> OTHER		<input type="checkbox"/> CHANNEL LOCKS	<input type="checkbox"/> NONE		<input type="checkbox"/> OTHER
<input type="checkbox"/> MISC.			<input type="checkbox"/> ATTEMPT FORCE	<input type="checkbox"/> UNK		

<input type="checkbox"/> Gang Related	<input type="checkbox"/> Hate Crime Motivated By:	<input type="checkbox"/> Race	<input type="checkbox"/> Ethnicity	<input type="checkbox"/> Religion	<input type="checkbox"/> Sexual Orientation	<input type="checkbox"/> Physical Disability	<input type="checkbox"/> Mental Disability	<input type="checkbox"/> Gender
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CRIME	Common Name	Section/Subsection	Code	Pertains To:
	Disorderly House	25601	BP	V: 1

Location (Address/Block No./Intersection)		<input type="checkbox"/> OHA	<input checked="" type="checkbox"/> ABC	Occurred	Date	Time	Day	VANDALISM
733 San Pablo Ave.				On or From	10-Apr-05	1	Sun	<input type="checkbox"/> EGGED <input type="checkbox"/> BREAK WINDOW <input type="checkbox"/> SHOOT WINDOW <input type="checkbox"/> GRAFFITI <input type="checkbox"/> MAIL BOX <input type="checkbox"/> KEYING / SCRATCHING <input type="checkbox"/> SLASH TIRES <input type="checkbox"/> OTHER
LOSS		<input checked="" type="checkbox"/> None	TYPE OF THEFT	To	10-Apr-05	300	Sun	
(CHECK ALL THAT APPLY) 1 <input type="checkbox"/> CURRENCY / NOTES 2 <input type="checkbox"/> CLOTHING / FURS 3 <input type="checkbox"/> JEWELRY / PRECIOUS METAL 4 <input type="checkbox"/> FIREARMS 5 <input type="checkbox"/> OFFICE EQUIPMENT 6 <input type="checkbox"/> TVS, RADIO, STEREO 7 <input type="checkbox"/> HOUSEHOLD GOODS 8 <input type="checkbox"/> CONSUMABLE GOODS 9 <input type="checkbox"/> LIVESTOCK 10 <input type="checkbox"/> MOTOR VEHICLES 11 <input type="checkbox"/> MISCELLANEOUS		<input type="checkbox"/> PICKPOCKET <input type="checkbox"/> PURSENATCH <input type="checkbox"/> AUTO ACCESS <input type="checkbox"/> AUTO CLOUT <input type="checkbox"/> SHOPLIFTING <input type="checkbox"/> BICYCLE <input type="checkbox"/> COIN OP. DEVICE <input type="checkbox"/> FROM BUILDING <input type="checkbox"/> OTHER	Reported	10 Apr 05	1	Sun		
U.C.R. CODE _____ (LIST MOST EXPENSIVE ITEM ABOVE)				SOLVABILITY FACTORS (Check All That Apply) <input type="checkbox"/> SURVEILLANCE PHOTO <input type="checkbox"/> SERIOUS INJURY <input checked="" type="checkbox"/> EVIDENCE <input type="checkbox"/> SUSPECT IN-CUSTODY <input type="checkbox"/> NAMED SUSPECT <input checked="" type="checkbox"/> IDENTIFIABLE SUSPECT <input checked="" type="checkbox"/> R/O REQUESTS INVEST.				

☐ The VICTIM / REPORTING PARTY contacted the police department to report the THEFT / LOSS / DAMAGE of the listed property. There are no known suspects. This report is made to alert the police. No narrative was completed.

VICTIM VEHICLE		License No.	State	<input type="checkbox"/> Secured At The Scene <input type="checkbox"/> Released To The Owner <input type="checkbox"/> Hold (Unit)		Tow Number
<input type="checkbox"/> Car	Year	Make	Model	Body Type	Color	Vin No.
<input type="checkbox"/> Truck						
<input type="checkbox"/> Other						
<input type="checkbox"/> Stolen Bicycle	<input type="checkbox"/> Mens	<input type="checkbox"/> Min.	Color	Brand	Model	Speed
	<input type="checkbox"/> Womens	<input type="checkbox"/> Road				License No.
						Serial No.

PROPERTY / NARRATIVE	Location When Stolen
<input type="checkbox"/> Loss <input checked="" type="checkbox"/> Evidence <input type="checkbox"/> Safekeeping <input type="checkbox"/> Recovered	<input type="checkbox"/> Interior <input type="checkbox"/> Exterior <input type="checkbox"/> Garage
Item Qty.	Serial No. \$ Value
Item Type, Brand, Model No., Size, Color, Marks, Etc.	

AOD and Juvenile Reporting Code (Refer to AOD Code Card)			CRIME2: Special Events Permit Required 9.52.030 OMC		
AOD	Setting (2 Digit #)	Juvenile	EVIDENCE: One videotape, DVC, JVC, of incident taken my myself and I turned item into OPD Property Section.		

Total Number Of				<input type="checkbox"/> Phone Report	Photos Taken	Evidence Collected	Tech:	Rec. Value	Loss Value	Page 1
Vict.	Wit.	Susp.	Arr.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> On Scene <input type="checkbox"/> Tech Tag Left	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		of 4
1	0	0	0							
Reported By		Serial No.	Watch	Area	Supervisor	Serial No.	Reviewer	Serial No.		
K. THOMAS		8069P	3	2B	LT. K. MULLNIX					

CRIME Disorderly House 25601 BP	π SUPPLEMENTAL	INCIDENT # 42	V 1	VICTIM LAST, First, Mid. State Of California
SUSPECT LAST, First, Mid. Sweet Jimmie's Club	INCIDENT LOCATION 1733 San Pablo Ave.	DATE OF THIS REPORT 22 Oct 05	ORIGINAL DATE REPORTED	

ITEM	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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The following officers were used for the following times;

4L11 - 0100-0230 hrs. (Ofc. S. Seder)
 4A13 - 0130-0230 hrs. (Ofc. K. Murphy / Ofc. L. Ausmus)
 4A14 - 0100-0230 hrs. (Ofc. E. Mausz / Ofc. S. Hewison)
 4A15 - 0100-0230 hrs. (Ofc. M. Trenkamp / Ofc. D. Chimpky)

Roving

4A12 - 0130-0230 hrs. (Ofc. C. Keden / Ofc. Kemmitt)
 4A16 - 0100-0230 hrs. (Ofc. C. Gonzales / B. Ocampo)

Sweet Jimmies directly required and used a total of 14 officer hours and 1.5 Sgt. hrs. for myself.

The RD# were generated at a later date and time for reporting purposes.

[REDACTED]

Reported By K. THOMAS	Serial No. 8069P	Watch 3	Area 2B	Supervisor	Serial No.	Page 4 of 4
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CRIME Disorderly House 25601 BP	π SUPPLEMENTAL	INCIDENT # 42	V 1	VICTIM LAST, First, Mid. State Of California
SUSPECT LAST, First, Mid. Sweet Jimmie's Club	INCIDENT LOCATION 1733 San Pablo Ave.	DATE OF THIS REPORT 22 Oct 05	ORIGINAL DATE REPORTED	

ITEM	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL, #, SIZE, COLOR, MARKS, ETC.	SERIAL #	VALUE
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NARRATIVE: On 8 May 05, I (3L72) was assigned as a patrol supervisor dressed in full police uniform, driving fully marked OPD veh #1243. I responded to the area of Sweet Jimmies Club, 1733 San Pablo Ave. at approximately 0001 hrs. I observed a large number of persons outside the club on both sidewalks, the street, and heavy traffic on San Pablo Ave. I knew from prior intel that the rapper "Yuck Mouth" was performing at the club and that they were expecting a near capacity crowd. Capacity for Sweet Jimmies was reported to be approximately 500 persons, and Jimmies security estimated that approximately 300-400 people would attend the event.

At approximately 0100 hrs., I returned to Sweet Jimmies and I observed that the line to get into Sweet Jimmies still contained approximately 50-60 persons, even with the club closing in approximately 30-40 minutes. I further observed approximately 75 - 100 people directly IFO the club, on the sidewalk to the North and South of the club, and in the streets talking to the numerous vehicle driving both North and South on San Pablo Ave. There were also larger pockets of 5-10 persons, mostly males hanging out on the various street corners across from the club. Numerous vehicles were playing very loud music, audible far in excess of 100 feet, blocking traffic, with the vehicle occupants conversing with the pedestrians. The totality of the circumstances required immediate action to preserve public safety, for both pedestrians and vehicle occupants, keep traffic flowing and keep the roadway accessible for emergency vehicles, and prevent further "Sideshow" activity.

I also knew the club would be closing down soon, so I requested all West End sideshow units to 17th St. and San Pablo Ave., due to the imminent influx of people about to be let out of the club. I used a total of 11 officers (see detail for details) to help block and control traffic, site vehicles and pedestrians, and keep the peace IFO Sweet Jimmies Club. Approximately 0130 hrs., I observed several hundred (200-300) additional persons leaving the club and congregate IFO the club entrance and sidewalks directly adjacent to it. This increased the already large crowd of people who were now standing in the roadway completely blocking all lanes of traffic at times. Numerous vehicles performed numerous dangerous driving violations as they left the area including, speeding, unsafe starting, and reckless driving.

At approximately 145 hrs. I observed a 65 Ford, Mus, 2D, Bro, [REDACTED] parked approximately 100 feet IFO my patrol vehicle which was in the intersection of 17th St and San Pablo. The vehicle began to rev it engine very loudly and play its stereo at such a high volume I could clearly hear it well in excess of 50'. I shone my spotlight on the vehicle to get the drivers attention, but the driver continued to rev its engine and play his stereo. I could observe someone videotaping the scene around the vehicle and I was later told by several people that the person was the rapper "Yuck Mouth" who had just performed at Sweet Jimmies, and was now shooting a video. The vehicle was towed, as was one other for the same offense. One arrest was made for public intoxication, and one arrest was made for driving a stolen vehicle (RD#05-26095) by the units on scene at Sweet Jimmies.

Based on my observations, Sweet Jimmies was directly responsible for the attractable nuisance of the very large crowd and traffic. Sweet Jimmies security was unable to control the large number of patrons once they left the club. This group committed numerous vehicular violations, pedestrian violations, played loud music, and endangered the safety of the citizens of Oakland by, congregating in the street, fighting, reckless driving and preventing emergency vehicles from being able to traverse San Pablo Ave. safely. For the above reasons Sweet Jimmies Club, located at 1733 San Pablo Ave., is in violation of 25601 PB, Disorderly House.

Reported By K. THOMAS	Serial No. 8069P	Watch 3	Area 2B	Supervisor	Serial No.	Page 3 of 3
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SUSPECT REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #
05-027086

CRIME Disorderly House 25601 BP	INCIDENT # 42	V1	VICTIM LAST, First, Mid. State Of California
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SUSPECT		Number	LAST, First, Mid Sweet Jimmie's Club				RELATIONSHIP TO VICTIM		IN CUSTODY THIS OFFENSE <input type="checkbox"/> Yes <input type="checkbox"/> No	
SEX	RACE	D.O.B.	AGE	HEIGHT	WEIGHT	HAIR	EYES	DL. NUMBER	PFN	
HOME ADDRESS			CITY <input type="checkbox"/> OAKLAND			ZIP		APT. NO.	HOME/MSG. PHONE	
WORK ADDRESS (Name of Business) (School) 1733 San Pablo Ave.			CITY <input checked="" type="checkbox"/> OAKLAND			OCCUPATION		WORK PHONE		

ADMONISHMENT: ADMONISHED <input type="checkbox"/> YES <input type="checkbox"/> NO REFUSED <input type="checkbox"/> YES <input type="checkbox"/> NO STATEMENT <input type="checkbox"/> YES <input type="checkbox"/> NO				<input type="checkbox"/> PROBATION COUNTY _____ Officer _____	
BY: (OFFICER/DATE/TIME)				<input type="checkbox"/> PAROLE AGENT _____ <input type="checkbox"/> PAL	

DESCRIPTION PROVIDED BY		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED											
HAIR LENGTH <input type="checkbox"/> SHORT <input type="checkbox"/> MED. (HALF EAR) <input type="checkbox"/> LONG (COVER EAR) <input type="checkbox"/> COLLAR <input type="checkbox"/> SHOULDER <input type="checkbox"/> BALD/SHAVED <input type="checkbox"/> RECEEDING		HAIR STYLE <input type="checkbox"/> NATURAL / AFRO <input type="checkbox"/> BRAIDED <input type="checkbox"/> CREWCUT <input type="checkbox"/> CURLY <input type="checkbox"/> PONYTAIL <input type="checkbox"/> PUNK <input type="checkbox"/> CONSERVATIVE		FACIAL HAIR <input type="checkbox"/> NONE <input type="checkbox"/> BEARD <input type="checkbox"/> MUSTACHE <input type="checkbox"/> BEARD & MUSTACHE <input type="checkbox"/> GOATEE <input type="checkbox"/> SIDEBURNS		COMPLEXION <input type="checkbox"/> LIGHT <input type="checkbox"/> MEDIUM <input type="checkbox"/> DARK <input type="checkbox"/> FRECKLED <input type="checkbox"/> ACNE <input type="checkbox"/> POCKMARK <input type="checkbox"/> RUDDY		APPEARANCE <input type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input type="checkbox"/> UNKEMPT. <input type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED <input type="checkbox"/> BIRTHMARK <input type="checkbox"/> MOLE		SPEECH <input type="checkbox"/> LOW PITCH <input type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> STUTTER <input type="checkbox"/> ACCENT TYPE _____ <input type="checkbox"/> OTHER		DEMEANOR <input type="checkbox"/> CALM <input type="checkbox"/> POLITE <input type="checkbox"/> APOLOGETIC <input type="checkbox"/> NERVOUS <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> OFFENSIVE <input type="checkbox"/> HOSTILE <input type="checkbox"/> VIOLENT	
OTHER DISTINCTIVE FEATURES <input type="checkbox"/> GOLD TOOTH <input type="checkbox"/> MISSING TEETH <input type="checkbox"/> SILVER TOOTH <input type="checkbox"/> GLASSES				<input type="checkbox"/> BODY ODOR TYPE _____ <input type="checkbox"/> LARGE EYES <input type="checkbox"/> MISSING LIMBS		WEAPON USED CAL. _____ BARREL _____ <input type="checkbox"/> BLUDGEON CLUB <input type="checkbox"/> HANDS/FEET		<input type="checkbox"/> REVOLVER <input type="checkbox"/> SEMI-AUTO PISTOL <input type="checkbox"/> SAWED OFF <input type="checkbox"/> ROCK/BRICK		<input type="checkbox"/> SHOTGUN <input type="checkbox"/> NICKEL <input type="checkbox"/> CUT/STAB <input type="checkbox"/> RIFLE <input type="checkbox"/> BLUE <input type="checkbox"/> VEHICLE			

SUSPECT		Number	LAST, First, Mid				RELATIONSHIP TO VICTIM		IN CUSTODY THIS OFFENSE <input type="checkbox"/> Yes <input type="checkbox"/> No				
SEX	RACE	D.O.B.	AGE	HEIGHT	WEIGHT	HAIR	EYES	DL. NUMBER	PFN				
HOME ADDRESS			CITY <input type="checkbox"/> OAKLAND			ZIP		APT. NO.	HOME/MSG. PHONE				
WORK ADDRESS (Name of Business) (School)			CITY <input type="checkbox"/> OAKLAND			OCCUPATION		WORK PHONE					
ADMONISHMENT: ADMONISHED <input type="checkbox"/> YES <input type="checkbox"/> NO REFUSED <input type="checkbox"/> YES <input type="checkbox"/> NO STATEMENT <input type="checkbox"/> YES <input type="checkbox"/> NO				<input type="checkbox"/> PROBATION COUNTY _____ Officer _____									
BY: (OFFICER/DATE/TIME)				<input type="checkbox"/> PAROLE AGENT _____ <input type="checkbox"/> PAL									
DESCRIPTION PROVIDED BY		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED											
HAIR LENGTH <input type="checkbox"/> SHORT <input type="checkbox"/> MED. (HALF EAR) <input type="checkbox"/> LONG (COVER EAR) <input type="checkbox"/> COLLAR <input type="checkbox"/> SHOULDER <input type="checkbox"/> BALD/SHAVED <input type="checkbox"/> RECEEDING		HAIR STYLE <input type="checkbox"/> NATURAL / AFRO <input type="checkbox"/> BRAIDED <input type="checkbox"/> CREWCUT <input type="checkbox"/> CURLY <input type="checkbox"/> PONYTAIL <input type="checkbox"/> PUNK <input type="checkbox"/> CONSERVATIVE		FACIAL HAIR <input type="checkbox"/> NONE <input type="checkbox"/> BEARD <input type="checkbox"/> MUSTACHE <input type="checkbox"/> BEARD & MUSTACHE <input type="checkbox"/> GOATEE <input type="checkbox"/> SIDEBURNS		COMPLEXION <input type="checkbox"/> LIGHT <input type="checkbox"/> MEDIUM <input type="checkbox"/> DARK <input type="checkbox"/> FRECKLED <input type="checkbox"/> ACNE <input type="checkbox"/> POCKMARK <input type="checkbox"/> RUDDY		APPEARANCE <input type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input type="checkbox"/> UNKEMPT. <input type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED <input type="checkbox"/> BIRTHMARK <input type="checkbox"/> MOLE		SPEECH <input type="checkbox"/> LOW PITCH <input type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> STUTTER <input type="checkbox"/> ACCENT TYPE _____ <input type="checkbox"/> OTHER		DEMEANOR <input type="checkbox"/> CALM <input type="checkbox"/> POLITE <input type="checkbox"/> APOLOGETIC <input type="checkbox"/> NERVOUS <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> OFFENSIVE <input type="checkbox"/> HOSTILE <input type="checkbox"/> VIOLENT	
OTHER DISTINCTIVE FEATURES <input type="checkbox"/> GOLD TOOTH <input type="checkbox"/> MISSING TEETH <input type="checkbox"/> SILVER TOOTH <input type="checkbox"/> GLASSES				<input type="checkbox"/> BODY ODOR TYPE _____ <input type="checkbox"/> LARGE EYES <input type="checkbox"/> MISSING LIMBS		WEAPON USED CAL. _____ BARREL _____ <input type="checkbox"/> BLUDGEON CLUB <input type="checkbox"/> HANDS/FEET		<input type="checkbox"/> REVOLVER <input type="checkbox"/> SEMI-AUTO PISTOL <input type="checkbox"/> SAWED OFF <input type="checkbox"/> ROCK/BRICK		<input type="checkbox"/> SHOTGUN <input type="checkbox"/> NICKEL <input type="checkbox"/> CUT/STAB <input type="checkbox"/> RIFLE <input type="checkbox"/> BLUE <input type="checkbox"/> VEHICLE			

SUSPECT VEHICLE		VEHICLE WAS <input type="checkbox"/> SECURED AT SCENE <input type="checkbox"/> RELEASED TO OWNER		<input type="checkbox"/> IOW (#) _____ <input type="checkbox"/> FINGERPRINTED <input type="checkbox"/> HOLD (UNIT) _____		DAMAGE DETAILS, UNIQUE FEATURES		OTHER DESCRIPTION					
OWNER				ADDRESS				CITY <input type="checkbox"/> OAKLAND ZIP PHONE					
LIC./STATE/OR PLATE COLORS		YEAR	MAKE	MODEL	STYLE	EXTERIOR COLOR	CONDITION <input type="checkbox"/> CLEAN <input type="checkbox"/> NEW <input type="checkbox"/> DIRTY <input type="checkbox"/> POOR	INTERIOR COLOR	INTERIOR <input type="checkbox"/> CLEAN <input type="checkbox"/> ODOR <input type="checkbox"/> DIRTY <input type="checkbox"/>				
TIRES <input type="checkbox"/> STOCK <input type="checkbox"/> WIDE <input type="checkbox"/> SMALL		RIMS <input type="checkbox"/> STOCK <input type="checkbox"/> CHROME <input type="checkbox"/> MAGS <input type="checkbox"/> SPOKE		LEVEL <input type="checkbox"/> STOCK <input type="checkbox"/> LOWERED <input type="checkbox"/> RAISED <input type="checkbox"/>		ROOF <input type="checkbox"/> VINYL <input type="checkbox"/> LANDAU <input type="checkbox"/> CONV		WINDOWS <input type="checkbox"/> TINTED <input type="checkbox"/> BROKEN		SEATS <input type="checkbox"/> VINYL <input type="checkbox"/> BENCH <input type="checkbox"/> CLOTH <input type="checkbox"/> BUCKET		TRANSMISSION <input type="checkbox"/> AUTOMATIC <input type="checkbox"/> MANUAL	

REPORTED BY K. THOMAS	SERIAL # 8069P	WATCH 3	DISTRICT 2B	SUPERVISOR	SERIAL #	PAGE 2 OF 4
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CRIME REPORT

Oakland Police Department
455 - 7th Street
Oakland, CA 94607-3985

ASSIGN TO:

RD #

05-027086

ROUTING

☒ CID

☐ YSD
☐ VICE
☐ CSD
☐ TRAFFIC
☐ D.A.
VIC/WIT
☒ ABAT
☐

Outside Reporting Agency	Case No.	Police Beat 4	CP Beat 4X	Incident No. 42							
VICTIM 1		Last, First, Mid State Of California			<input type="checkbox"/> Business Name		<input checked="" type="checkbox"/> Local / State / Federal	Sex	Race	D.O.B.	Age
Home Address					City		<input type="checkbox"/> Oakland	Zip	Home/Msg. Phone		
Business Address / School					City		<input type="checkbox"/> Oakland	Zip	Work Phone		
Occupation					D.L. Number		State	<input type="checkbox"/> Domestic Violence <input type="checkbox"/> Victim Injured <input type="checkbox"/> Sex Assault Victim Request Conf.			
Working Hours								<input type="checkbox"/> Victim's Support <input type="checkbox"/> Resource Info Provided			

ADDITIONAL PERSON	<input checked="" type="checkbox"/> R/P <input type="checkbox"/> Parent <input type="checkbox"/> Witness /	Last, First, Mid Sgt. K. Thomas 8069p	Sex	Race	D.O.B.	Age
Home Address		City <input type="checkbox"/> Oakland	Zip	Home/Msg. Phone		
Business Address / School		City <input checked="" type="checkbox"/> Oakland	Zip	Work Phone		
OPD 455 7 th St		94607				

LOCATION	POINT OF ENTRY	LOCATION P.O.E.	METHOD OF ENTRY	<input type="checkbox"/> BREAK GLASS	BURGLARY	WEAPON USED
<input type="checkbox"/> BANK/ATM <input type="checkbox"/> CONVENT MKT <input type="checkbox"/> GAS STATION <input type="checkbox"/> OTHER COMM. <input type="checkbox"/> RESIDENCE <input type="checkbox"/> STREET <input type="checkbox"/> MISC.	<input type="checkbox"/> DOOR <input type="checkbox"/> WINDOW <input type="checkbox"/> GARAGE <input type="checkbox"/> ADJ. PREM. <input type="checkbox"/> VENT/SKYLIGHT <input type="checkbox"/> OTHER	<input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> SIDE <input type="checkbox"/> ROOF <input type="checkbox"/> UNK.	<input type="checkbox"/> OPEN/UNLOCKED <input type="checkbox"/> FORCED SCREEN <input type="checkbox"/> CUTTING DEVICE <input type="checkbox"/> BODY FORCE <input type="checkbox"/> PRY TOOL <input type="checkbox"/> CHANNEL LOCKS <input type="checkbox"/> ATTEMPT FORCE	<input type="checkbox"/> REMOVE DOOR <input type="checkbox"/> REMOVE WINDOW <input type="checkbox"/> POSS. EMPLOYEE <input type="checkbox"/> KEY <input type="checkbox"/> WATER METER <input type="checkbox"/> NONE <input type="checkbox"/> UNK	<input type="checkbox"/> AUTO <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> OTHER <input type="checkbox"/> ALARM RESP	<input type="checkbox"/> FIREARM <input type="checkbox"/> CUT/STAB INSTR <input type="checkbox"/> HANDS, FEET, FIST <input type="checkbox"/> CHEMICAL <input type="checkbox"/> NONE <input type="checkbox"/> OTHER

<input type="checkbox"/> Gang Related	<input type="checkbox"/> Hate Crime Motivated By:	<input type="checkbox"/> Race	<input type="checkbox"/> Ethnicity	<input type="checkbox"/> Religion	<input checked="" type="checkbox"/> Sexual Orientation	<input type="checkbox"/> Physical Disability	<input type="checkbox"/> Mental Disability	<input type="checkbox"/> Gender
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CRIME	Common Name Disorderly House	Section/Subsection 25601	Code BP	Pertains To: V: 1
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Location (Address/Block No./Intersection)	<input type="checkbox"/> OHA	<input checked="" type="checkbox"/> ABC	Occurred	Date	Time	Day	VANDALISM
733 San Pablo Ave.			On or From	8-May-05	100	Sun	<input type="checkbox"/> EGGED <input type="checkbox"/> BREAK WINDOW <input type="checkbox"/> SHOOT WINDOW <input type="checkbox"/> GRAFFITI <input type="checkbox"/> MAIL BOX <input type="checkbox"/> KEYING / SCRATCHING <input type="checkbox"/> SLASH TIRES <input type="checkbox"/> OTHER
			To	8-May-05	230	Sun	
			Reported	8 May 05	100	Sun	

LOSS	<input checked="" type="checkbox"/> None	TYPE OF THEFT	SOLVABILITY FACTORS (Check All That Apply)			
(CHECK ALL THAT APPLY)		<input type="checkbox"/> PICKPOCKET <input type="checkbox"/> PURSE/NATCH <input type="checkbox"/> AUTO ACCESS <input type="checkbox"/> AUTO CLOUT <input type="checkbox"/> SHOPLIFTING <input type="checkbox"/> BICYCLE <input type="checkbox"/> COIN OP. DEVICE <input type="checkbox"/> FROM BUILDING <input type="checkbox"/> OTHER	<input type="checkbox"/> SURVEILLANCE PHOTO <input type="checkbox"/> SERIOUS INJURY <input checked="" type="checkbox"/> EVIDENCE <input type="checkbox"/> SUSPECT IN-CUSTODY			
1 <input type="checkbox"/> CURRENCY / NOTES	7 <input type="checkbox"/> HOUSEHOLD GOODS		<input type="checkbox"/> NAMED SUSPECT			
2 <input type="checkbox"/> CLOTHING / FURS	8 <input type="checkbox"/> CONSUMABLE GOODS		<input checked="" type="checkbox"/> IDENTIFIABLE SUSPECT			
3 <input type="checkbox"/> JEWELRY / PRECIOUS METAL	9 <input type="checkbox"/> LIVESTOCK		<input checked="" type="checkbox"/> R/O REQUESTS INVEST.			
4 <input type="checkbox"/> FIREARMS	10 <input type="checkbox"/> MOTOR VEHICLES					
5 <input type="checkbox"/> OFFICE EQUIPMENT	11 <input type="checkbox"/> MISCELLANEOUS					
6 <input type="checkbox"/> TVS, RADIO, STEREO						
U.C.R. CODE		(LIST MOST EXPENSIVE ITEM ABOVE)				

☐ The VICTIM / REPORTING PARTY contacted the police department to report the THEFT / LOSS / DAMAGE of the listed property. There are no known suspects. This report is made to alert the police. No narrative was completed.

VICTIM VEHICLE	License No.	State	<input type="checkbox"/> Secured At The Scene <input type="checkbox"/> Released To The Owner <input type="checkbox"/> Hold (Unit)	<input type="checkbox"/> Towed <input type="checkbox"/> Fingerprinted <input type="checkbox"/> Stolen	Tow Number
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<input type="checkbox"/> Car	Year	Make	Model	Body Type	Color	Vin No.
<input type="checkbox"/> Truck						
<input type="checkbox"/> Other						

<input type="checkbox"/> Stolen Bicycle	<input type="checkbox"/> Mens	<input type="checkbox"/> Mtn.	Color	Brand	Model	Speed	License No.	Serial No.
<input type="checkbox"/> Womens	<input type="checkbox"/> Road							

PROPERTY / NARRATIVE	<input type="checkbox"/> Loss	<input checked="" type="checkbox"/> Evidence	<input type="checkbox"/> Safekeeping	<input type="checkbox"/> Recovered	Location When Stolen		
					<input type="checkbox"/> Interior	<input type="checkbox"/> Exterior	<input type="checkbox"/> Garage
Item	Qty.	Item Type, Brand, Model No., Size, Color, Marks, Etc.			Serial No.	\$ Value	

AOD and Juvenile Reporting Code (Refer to AOD Code Card)		
AOD	Setting (2 Digit #)	Juvenile

Total Number Of				<input type="checkbox"/> Phone Report	Photos Taken	Evidence Collected	Tech: On Scene	Rec. Value	Loss Value	Page 1 of 4
Vict	Wit	Susp.	Arr.		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No			
1	0	0	0							

Reported By K. THOMAS	Serial No. 8069P	Watch 3	Area 2B	Supervisor LT. K. MULLNIX	Serial No.	Reviewer	Serial No.
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OPD

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

CRIME Disorderly House 25601 BP	π SUPPLEMENTAL	INCIDENT # V 1	VICTIM LAST, First, Mid. State Of California
SUSPECT LAST, First, Mid. Sweet Jimmie's Club	INCIDENT LOCATION 1733 San Pablo Ave.	DATE OF THIS REPORT 22 Oct 05	ORIGINAL DATE REPORTED

ITEM	QNTY	PROPERTY (kind of NARRATIVE) ITEM TYPE / BRAND / MODEL # / SIZE / COLOR / MARKS / ETC	SERIAL #	VALUE
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number of people expected, and the popularity of the event, a violation of 9.52.030 OMC.

See numerous supplemental for additional details.

The following officers were used for the following times;

3L74 - 0030-0300 hrs. (Sgt. S. Whent)
 4A21 - 0100-0300 hrs. (Ofc. C. Johnson / Ofc. S. Seder)
 4A22 - 0030-0300 hrs. (Ofc. E. Mausz / Ofc. S. Hewison)
 4A23 - 0100-0300 hrs. (Ofc. R. Holton / Ofc. S. Bowling)
 4A24 - 0015-0300 hrs. (Ofc. F. Gysin / Ofc. D. Kemmitt)
 4A26 - 0015-0300 hrs. (Ofc. M. Trenkamp / Ofc. D. Chimpky).

1L81 - 0200-0300 hrs. (Lt. D. Downing)
 Late Tac. Squad approx. Twelve (12) Officers

Sweet Jimmies directly required and used a total of 24 Oakland Police Officer hours and 2.5 Sgt. hrs. This figure does not take into account Lt. D. Downings time nor the late Tac squad, and patrol units who were also required to respond and assist.

Reported By M. TRENKAMP	Serial No. 8463P	Watch 3	Area 2B	Supervisor	Serial No.	Page 4 of 4
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ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

CRIME Disorderly House 25601 BP	π SUPPLEMENTAL	INCIDENT # V 1	VICTIM LAST, First, Mid. State Of California
SUSPECT LAST, First, Mid. Sweet Jimmie's Club	INCIDENT LOCATION 1733 San Pablo Ave.	DATE OF THIS REPORT 22 Oct 05	ORIGINAL DATE REPORTED

ITEM	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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NARRATIVE: On 14 Aug 05, Ofc. D. Chimpky 8431P and I were working as a two officer unit 4A26, both dressed in full police uniform and driving marked patrol vehicle no. 1309. We responded to the area of Sweet Jimmies Club, 1733 San Pablo Ave. at approximately 0015 hrs. I observed a large number of persons outside the club on both sidewalks, the street, and heavy traffic on San Pablo Ave. Capacity for Sweet Jimmies was reported to be approximately 500 persons, and Jimmies security estimated that approximately 400-500 people would attend the event, some type of motorcycle after-party from the "Rough Riders" picnic. From my position IFO Sweet Jimmies I could see that traffic had come to a standstill on San Pablo and 17th St. and that numerous motorcycles were spinning their rear tires creating loud screeching noises and clouds of smoke. Ofc. Gysin also observed this and reported that immediate action was required to preserve the peace.

I further observed approximately 100-150 people directly IFO the club, on the sidewalk to the North and South of the club, and in the streets talking to the numerous vehicle driving both North and South on San Pablo Ave. There were also larger pockets of 10-15 persons, mostly males hanging out on the various street corners across from the club. Numerous vehicles were playing very loud music, audible far in excess of 100 feet, blocking traffic, with the vehicle occupants conversing with the pedestrians. In addition, I observed numerous motorcycle clubs such as; The East Bay Dragons, Rough Riders, Wicked Wheels, and Wise Guys who were all separated in individual groups across from Sweet Jimmies Club. I estimated that there were approximately 100-125 motorcycles parked in and around Sweet Jimmies. This created a highly volatile environment involving these various motorcycle groups. The totality of the circumstances required immediate action to preserve public safety, for both pedestrians and vehicle occupants, keep traffic flowing and keep the roadway accessible for emergency vehicles, and prevent further "Sideshow" activity.

I also knew the club would be closing down soon, Sgt. S Whent requested all West End sideshow units to 17th St. and San Pablo Ave., due to the imminent influx of people about to be let out of the club. We used a total of 10 officers (see detail for details) to help block and control traffic, site vehicles and pedestrians, and keep the peace IFO Sweet Jimmies Club. Approximately 0148 hrs., I observed several hundred (300-400) additional persons leaving the club and congregate IFO the club entrance and sidewalks directly adjacent to it. This increased the already large crowd of people who were now standing in the roadway completely blocking all lanes of traffic at times. Numerous vehicles and motorcycles performed numerous dangerous driving violations as they left the area including, speeding, unsafe starting, and reckless driving. Due to the overwhelming volume of club patrons, Sgt. S Whent requested additional Officers from East Oakland (Late Tac Units) and West / North Oakland units to respond and assist. Minutes later, Watch Commander Lt. D. Downing (1L81) arrived on scene with the entire Late Tac. Unit, approx. twelve officers. Lt. D. Downing then supervised the operation as he directed units to conduct traffic control posts and prevent any additional sideshow activity within the area.

Based on my observations, Sweet Jimmies was directly responsible for the attractable nuisance of the very large crowd and traffic. Sweet Jimmies security was unable to control the large number of patrons once they left the club. This group committed numerous vehicular violations, pedestrian violations, played loud music, and endangered the safety of the citizens of Oakland by, congregating in the street, fighting, reckless driving and preventing emergency vehicles from being able to traverse San Pablo Ave. safely. For the above reasons Sweet Jimmies Club, located at 1733 San Pablo Ave., is in violation of 25601 PB, Disorderly House and should have also been required to obtain a special events permit, due to the nature of the event, the amount of advertising, the

Reported By M. TRENKAMP	Serial No. 8463P	Watch 3	Area 2B	Supervisor	Serial No.	Page 3 of 3
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SUSPECT REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

CRIME Disorderly House 25601 BP				INCIDENT # V1		VICTIM LAST, First, Mid. State Of California							
SUSPECT		Number		LAST, First, Mid Sweet Jimmie's Club				RELATIONSHIP TO VICTIM		IN CUSTODY THIS OFFENSE <input type="checkbox"/> Yes <input type="checkbox"/> No			
SEX	RACE	D.O.B.	AGE	HEIGHT	WEIGHT	HAIR	EYES	DL. NUMBER	PFN				
HOME ADDRESS				CITY <input type="checkbox"/> OAKLAND				ZIP	APT. NO.	HOME/MSG. PHONE			
WORK ADDRESS (Name of Business) (School) 1733 San Pablo Ave.				CITY <input checked="" type="checkbox"/> OAKLAND				OCCUPATION	WORK PHONE				
ADMONISHMENT: ADMONISHED <input type="checkbox"/> YES <input type="checkbox"/> NO REFUSED <input type="checkbox"/> YES <input type="checkbox"/> NO STATEMENT <input type="checkbox"/> YES <input type="checkbox"/> NO				<input type="checkbox"/> PROBATION COUNTY _____				Officer _____					
BY: (OFFICER/DATE/TIME)				<input type="checkbox"/> PAROLE AGENT _____				<input type="checkbox"/> PAL					
DESCRIPTION PROVIDED BY		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED											
HAIR LENGTH <input type="checkbox"/> SHORT <input type="checkbox"/> MED. (HALF EAR) <input type="checkbox"/> LONG (COVER EAR) <input type="checkbox"/> COLLAR <input type="checkbox"/> SHOULDER <input type="checkbox"/> BALD/SHAVED <input type="checkbox"/> RECEDING		HAIR STYLE <input type="checkbox"/> NATURAL / AFRO <input type="checkbox"/> BRAIDED <input type="checkbox"/> CREWCUT <input type="checkbox"/> CURLY <input type="checkbox"/> PONYTAIL <input type="checkbox"/> PUNK <input type="checkbox"/> CONSERVATIVE		FACIAL HAIR <input type="checkbox"/> NONE <input type="checkbox"/> BEARD <input type="checkbox"/> MUSTACHE <input type="checkbox"/> BEARD & MUSTACHE <input type="checkbox"/> GOATEE <input type="checkbox"/> SIDEBURNS		COMPLEXION <input type="checkbox"/> LIGHT <input type="checkbox"/> MEDIUM <input type="checkbox"/> DARK <input type="checkbox"/> FRECKLED <input type="checkbox"/> ACNE <input type="checkbox"/> POCKMARK <input type="checkbox"/> RUDDY		APPEARANCE <input type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input type="checkbox"/> UNKEMPT <input type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED <input type="checkbox"/> BIRTHMARK <input type="checkbox"/> MOLE		SPEECH <input type="checkbox"/> LOW PITCH <input type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> STUTTER <input type="checkbox"/> ACCENT TYPE _____ <input type="checkbox"/> OTHER		DEMEANOR <input type="checkbox"/> CALM <input type="checkbox"/> POLITE <input type="checkbox"/> APOLOGETIC <input type="checkbox"/> NERVOUS <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> OFFENSIVE <input type="checkbox"/> HOSTILE <input type="checkbox"/> VIOLENT	
OTHER DISTINCTIVE FEATURES <input type="checkbox"/> GOLD TOOTH <input type="checkbox"/> MISSING TEETH <input type="checkbox"/> SILVER TOOTH <input type="checkbox"/> GLASSES				<input type="checkbox"/> BODY ODOR TYPE _____ <input type="checkbox"/> LARGE EYES <input type="checkbox"/> MISSING LIMBS		WEAPON USED CAL. _____ BARREL _____ <input type="checkbox"/> BLUDGEON CLUB <input type="checkbox"/> HANDS/FEET		<input type="checkbox"/> REVOLVER <input type="checkbox"/> SEMI-AUTO PISTOL <input type="checkbox"/> SAWED OFF <input type="checkbox"/> ROCK/BRICK		<input type="checkbox"/> SHOTGUN <input type="checkbox"/> NICKEL <input type="checkbox"/> CUT/STAB		<input type="checkbox"/> RIFLE <input type="checkbox"/> BLUED <input type="checkbox"/> VEHICLE	
SUSPECT		Number		LAST, First, Mid				RELATIONSHIP TO VICTIM		IN CUSTODY THIS OFFENSE <input type="checkbox"/> Yes <input type="checkbox"/> No			
SEX	RACE	D.O.B.	AGE	HEIGHT	WEIGHT	HAIR	EYES	DL. NUMBER	PFN				
HOME ADDRESS				CITY <input type="checkbox"/> OAKLAND				ZIP	APT. NO.	HOME/MSG. PHONE			
WORK ADDRESS (Name of Business) (School)				CITY <input type="checkbox"/> OAKLAND				OCCUPATION	WORK PHONE				
ADMONISHMENT: ADMONISHED <input type="checkbox"/> YES <input type="checkbox"/> NO REFUSED <input type="checkbox"/> YES <input type="checkbox"/> NO STATEMENT <input type="checkbox"/> YES <input type="checkbox"/> NO				<input type="checkbox"/> PROBATION COUNTY _____				Officer _____					
BY: (OFFICER/DATE/TIME)				<input type="checkbox"/> PAROLE AGENT _____				<input type="checkbox"/> PAL					
DESCRIPTION PROVIDED BY		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED											
HAIR LENGTH <input type="checkbox"/> SHORT <input type="checkbox"/> MED. (HALF EAR) <input type="checkbox"/> LONG (COVER EAR) <input type="checkbox"/> COLLAR <input type="checkbox"/> SHOULDER <input type="checkbox"/> BALD/SHAVED <input type="checkbox"/> RECEDING		HAIR STYLE <input type="checkbox"/> NATURAL / AFRO <input type="checkbox"/> BRAIDED <input type="checkbox"/> CREWCUT <input type="checkbox"/> CURLY <input type="checkbox"/> PONYTAIL <input type="checkbox"/> PUNK <input type="checkbox"/> CONSERVATIVE		FACIAL HAIR <input type="checkbox"/> NONE <input type="checkbox"/> BEARD <input type="checkbox"/> MUSTACHE <input type="checkbox"/> BEARD & MUSTACHE <input type="checkbox"/> GOATEE <input type="checkbox"/> SIDEBURNS		COMPLEXION <input type="checkbox"/> LIGHT <input type="checkbox"/> MEDIUM <input type="checkbox"/> DARK <input type="checkbox"/> FRECKLED <input type="checkbox"/> ACNE <input type="checkbox"/> POCKMARK <input type="checkbox"/> RUDDY		APPEARANCE <input type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input type="checkbox"/> UNKEMPT <input type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED <input type="checkbox"/> BIRTHMARK <input type="checkbox"/> MOLE		SPEECH <input type="checkbox"/> LOW PITCH <input type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> STUTTER <input type="checkbox"/> ACCENT TYPE _____ <input type="checkbox"/> OTHER		DEMEANOR <input type="checkbox"/> CALM <input type="checkbox"/> POLITE <input type="checkbox"/> APOLOGETIC <input type="checkbox"/> NERVOUS <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> OFFENSIVE <input type="checkbox"/> HOSTILE <input type="checkbox"/> VIOLENT	
OTHER DISTINCTIVE FEATURES <input type="checkbox"/> GOLD TOOTH <input type="checkbox"/> MISSING TEETH <input type="checkbox"/> SILVER TOOTH <input type="checkbox"/> GLASSES				<input type="checkbox"/> BODY ODOR TYPE _____ <input type="checkbox"/> LARGE EYES <input type="checkbox"/> MISSING LIMBS		WEAPON USED CAL. _____ BARREL _____ <input type="checkbox"/> BLUDGEON CLUB <input type="checkbox"/> HANDS/FEET		<input type="checkbox"/> REVOLVER <input type="checkbox"/> SEMI-AUTO PISTOL <input type="checkbox"/> SAWED OFF <input type="checkbox"/> ROCK/BRICK		<input type="checkbox"/> SHOTGUN <input type="checkbox"/> NICKEL <input type="checkbox"/> CUT/STAB		<input type="checkbox"/> RIFLE <input type="checkbox"/> BLUED <input type="checkbox"/> VEHICLE	
SUSPECT VEHICLE		VEHICLE WAS <input type="checkbox"/> SECURED AT SCENE <input type="checkbox"/> RELEASED TO OWNER		<input type="checkbox"/> TOW (#) _____ <input type="checkbox"/> FINGERPRINTED <input type="checkbox"/> HOLD (UNIT) _____		DAMAGE DETAILS, UNIQUE FEATURES				OTHER DESCRIPTION			
OWNER				ADDRESS				CITY <input type="checkbox"/> OAKLAND		ZIP	PHONE		
LIC./STATE/OR PLATE COLORS				YEAR	MAKE	MODEL	STYLE	EXTERIOR COLOR	CONDITION <input type="checkbox"/> CLEAN <input type="checkbox"/> NEW <input type="checkbox"/> DIRTY <input type="checkbox"/> POOR	INTERIOR COLOR	INTERIOR <input type="checkbox"/> CLEAN <input type="checkbox"/> ODOR <input type="checkbox"/> DIRTY <input type="checkbox"/>		
TIRES <input type="checkbox"/> STOCK <input type="checkbox"/> WIDE <input type="checkbox"/> SMALL		RIMS <input type="checkbox"/> STOCK <input type="checkbox"/> CHROME <input type="checkbox"/> MAGS <input type="checkbox"/> SPOKE		LEVEL <input type="checkbox"/> STOCK <input type="checkbox"/> LOWERED <input type="checkbox"/> RAISED <input type="checkbox"/>		ROOF <input type="checkbox"/> VINYL <input type="checkbox"/> LANDAU <input type="checkbox"/> CONV		WINDOWS <input type="checkbox"/> INTED <input type="checkbox"/> BROKEN	SEATS <input type="checkbox"/> VINYL <input type="checkbox"/> BENCH <input type="checkbox"/> CLOTH <input type="checkbox"/> BUCKET		TRANSMISSION <input type="checkbox"/> AUTOMATIC <input type="checkbox"/> MANUAL		
REPORTED BY M. TRENKAMP		SERIAL # 8463P		WATCH 3	DISTRICT 2B	SUPERVISOR		SERIAL #		PAGE 2 OF 4			

CRIME REPORT

Oakland Police Department
455 - 7th Street
Oakland, CA 94607-3985

ASSIGN TO:

RD #

ROUTING

☒ CID

☐ YSD

☐ VICE

☐ CSD

☐ TRAFFIC

☐ D.A.

☐ VIC/WIT

☒ ABAT

ADDITIONAL PERSON

☒ R/P
☒ Parent
☒ Witness 1

Last, First, Mid
Officer M. Trenkamp 8463p

Home Address

City ☐ Oakland

Zip

Home/Msg. Phone

Business Address / School

City ☐ Oakland

Zip

Work Phone

OPD

LOCATION

☐ BANK/ATM
☐ CONVENT/MKT
☐ GAS STATION
☐ OTHER COMM.
☐ RESIDENCE
☐ STREET
☐ MISC.

POINT OF ENTRY

☐ DOOR
☐ WINDOW
☐ GARAGE
☐ ADJ. PREM.
☐ VENT/SKYLIGHT
☐ OTHER

LOCATION P.O.E.

☐ FRONT
☐ REAR
☐ SIDE
☐ ROOF
☐ UNK.

METHOD OF ENTRY

☐ OPEN/UNLOCKED
☐ FORCED SCREEN
☐ CUTTING DEVICE
☐ BODY FORCE
☐ PRY TOOL
☐ CHANNEL LOCKS
☐ ATTEMPT FORCE

BURGLARY

☐ BREAK GLASS
☐ REMOVE DOOR
☐ REMOVE WINDOW
☐ POSS. EMPLOYEE
☐ KEY
☐ WATER METER
☐ NONE
☐ UNK

WEAPON USED

☐ FIREARM
☐ CUT/STAB INSTR
☐ HANDS, FEET, FIST
☐ CHEMICAL
☐ NONE
☐ OTHER

☐ Gang Related

☐ Hate Crime
Motivated By:

☐ Race

☐ Ethnicity

☐ Religion

☐ Sexual
Orientation

☐ Physical
Disability

☐ Mental
Disability

☐ Gender

CRIME

Common Name
Disorderly House

Section/Subsection
25601

Code
BP

Pertains To:
V: 1

Location (Address/Block No./Intersection)

☐ OHA

☒ ABC

733 San Pablo Ave.

LOSS

☒ None

TYPE OF THEFT

☐ PICKPOCKET
☐ PURSENATCH
☐ AUTO ACCESS
☐ AUTO CLOUT
☐ SHOPLIFTING
☐ BICYCLE
☐ COIN OP. DEVICE
☐ FROM BUILDING
☐ OTHER

(CHECK ALL THAT APPLY)

1 ☐ CURRENCY / NOTES
2 ☐ CLOTHING / FURS
3 ☐ JEWELRY / PRECIOUS METAL
4 ☐ FIREARMS
5 ☐ OFFICE EQUIPMENT
6 ☐ TVS, RADIO, STEREO
7 ☐ HOUSEHOLD GOODS
8 ☐ CONSUMABLE GOODS
9 ☐ LIVESTOCK
10 ☐ MOTOR VEHICLES
11 ☐ MISCELLANEOUS

U.C.R. CODE (LIST MOST EXPENSIVE ITEM ABOVE)

Occurred

Date

Time

Day

VANDALISM

On or From

14-Aug-05

15

Sun

To

14-Aug-05

300

Sun

Reported

14 Aug 05

15

Sun

SOLVABILITY FACTORS (Check All That Apply)

☐ SURVEILLANCE PHOTO
☐ SERIOUS INJURY
☒ EVIDENCE
☐ SUSPECT IN-CUSTODY

☐ NAMED SUSPECT
☒ IDENTIFIABLE SUSPECT
☒ R/O REQUESTS INVEST.

☐ The VICTIM / REPORTING PARTY contacted the police department to report the THEFT / LOSS / DAMAGE of the listed property.
There are no known suspects. This report is made to alert the police. No narrative was completed.

VICTIM VEHICLE

License No.

State

☐ Secured At The Scene
☐ Released To The Owner
☐ Hold (Unit)

☐ Towed
☐ Fingerprinted
☐ Stolen

Tow Number

☐ Car
☐ Truck
☐ Other

Year

Make

Model

Body Type

Color

Vin No.

☐ Stolen
Bicycle

☐ Mens
☐ Womens

☐ Mtn.
☐ Road

Color

Brand

Model

Speed

License No.

Serial No.

PROPERTY / NARRATIVE

☐ Loss

☒ Evidence

☐ Safekeeping

☐ Recovered

Location When Stolen

☐ Interior

☐ Exterior

☐ Garage

Item Qty.

Item Type, Brand, Model No., Size, Color, Marks, Etc.

Serial No.

\$ Value

AOD and Juvenile Reporting Code
(Refer to AOD Code Card)

CRIME2: Special Events Permit Required 9.52.030 OMC

AOD

Setting
(2 Digit #)

Juvenile

Total Number Of

Vict. 1

Wit. 0

Susp. 0

Arr. 0

Phone Report

Photos Taken

☐ Yes
☐ No

Evidence Collected

☐ Yes
☐ No

Tech:

On Scene ☐ Yes ☐ No

Tech Tag Left ☐ Yes ☐ No

Rec. Value

Loss Value

Page 1
of 4

Reported By

M. TRENKAMP

Serial No.

8463P

Watch

3

Area

2B

Supervisor

SGT. K. THOMAS

Serial No.

8069P

Reviewer

Serial No.

05-66051

PAGE: 000001
Requested By: C73

Incident	Time	Type	Pri	Dispo	Address Location	Bldg Apt	Callers Name Callers Address Callers Phone	P-unit	Date/ Time	Operator
051022000177	03:52	COMM	2		344B PAXTON AV		111d			Active OPC73

Date	Time		Operator
05/10/22	03:53	Incident Initiated By: OP/C73	C73
05/10/22	03:53		C73
05/10/22	03:53		C73
05/10/22	03:53	273.5A OCC'D AT [REDACTED] 21OCT05 @ 2100-2230...SUSP/EN PAZ, MATTHEW	C73
05/10/22	03:53	MB (040678) 6'0 170 BRO HAIR IN A PONYTAIL/BRO MUST, BEARD, LT COMPLEX	C73
05/10/22	03:53	WEARING A GRY JKT, WHI TSHRT, BLU JEANS...DRIVES A VOLV 4D MR,	C73
05/10/22	03:53	BUT UNK IF SUSP LFT IN THE VEH...858SP	C73
05/10/22	03:53	Incident Associated to: LOP051022000002	C73
05/10/22	03:53	Incident Associated to: LOP051022000038	C73

--- Vehicle / Subject Information ---

OCT 22 2005
G3

Vehicle / Subject Information -----

05-66051

OAKLAND PD

Date: 10/22/05 Time: 02:42

PAGE: 000002

Requested By: C05

I N C I D E N T R E C A L L

Incident	Time	Type	Pri	Dispo	Address Location	Bldg Apt	Callers Name Callers Address Callers Phone	P-unit	Close Date/ Time	Operator	
					BEAT TEAM/Dist AREA						
05/10/22	02:08	Primary unit			CHANGED From:OP/3L72		To:OP/5514		C05		
05/10/22	02:09	IAAssocInc			LOP051022000079 UPDATE PriUnit to OP/1L08				C05		
05/10/22	02:13	Unit OP/5514			reassigned to LOP051022000118				C05		
05/10/22	02:13	Primary unit			CHANGED From:OP/4L06		To:OP/5522		C05		
05/10/22	02:32	IAAssocInc			LOP051022000096 UPDATE PriUnit to OP/4A03				C05		
05/10/22	02:42	**FAXING TO PATROL DESK**								C05	
05/10/22	02:42	Incident Associated to:			LOP051022000139		25		C58		

---- Vehicle / Subject Information ----

OCT 22 2005

Requested By: COB

Close

Date	Time	Operator
05/10/22	01:06 Incident Initiated By: OP/C73	C73
05/10/22	01:06	C73
05/10/22	01:06	C73
05/10/22	01:06 10 MBS & FBS IN A 943 INSIDE SWEET JIMMY'S & 2 SHOTS HEARD	C73
05/10/22	01:06 Original Location : SWEET JIMMY'S	C73
05/10/22	01:06 Operator OPC73 Override priority 2 with 1 Priority	C73
05/10/22	01:07 BLIND	C05
05/10/22	01:07 SAYS EVERYONE IS TRAMPLING OVER EACHOTHER - RP HIDING UPSTAIRS	C73
05/10/22	01:07 OP/5S14 ER location is *SWEET JIMMY'S	C05
05/10/22	01:07 Primary Unit CHANGED FROM: To:OP/5S14	C05
05/10/22	01:07 COULN'T GIVE FURTHER - HAVE UNIT ADV ON MED - NFD	C73
05/10/22	01:08 CHP TRANS - NO CP # PER CHP - RP'S PHONE DISCONNECTED	C73
05/10/22	01:09 OP/4L04 ER location is *SWEET JIMMY'S	C05
05/10/22	01:09 5S12 5S22 4A05 AND 3L72 ADVISED -- ALL UNITS 17/SP	C05
05/10/22	01:10 OP/4L06 ER location is *SWEET JIMMY'S	C05
05/10/22	01:11 OP/5S12 ER location is *SWEET JIMMY'S	C05
05/10/22	01:11 Unit OP/5S22 location: *SWEET JIMMY'S	C05
05/10/22	01:11 Unit OP/4A05 location: *SWEET JIMMY'S	C05
05/10/22	01:11 OP/4A05 ER location is *SWEET JIMMY'S	C05
05/10/22	01:11 OP/5S22 ER location is *SWEET JIMMY'S	C05
05/10/22	01:11 OP/1L72 ER location is *SWEET JIMMY'S	C05
05/10/22	01:11 940 17/SP	C05
05/10/22	01:12 OP/3L72 ER location is *SWEET JIMMY'S	C05
05/10/22	01:12 OP/1L72 AV location is	C05
05/10/22	01:12 3L72 RESPONDING TO 17/SP	C05
05/10/22	01:24 3L72 FOR INFO .. NO 246 VICT AND NO FD INSIDE THE BUSN	C05
05/10/22	01:30 Command: UO Operator: OP/C72 Console: 22 Unit: OP/5S14	UNKNOWN
05/10/22	01:32 RN 05 ADDED TO EVENT LOP051022066051 OP/4L06	C68
05/10/22	01:32 Command: UO Operator: OP/C72 Console: 22 Unit: OP/5S12	UNKNOWN
05/10/22	01:34 Command: UO Operator: OP/C72 Console: 22 Unit: OP/5S22	UNKNOWN
05/10/22	01:37 Unit OP/4L04 reassigned to LOP051022000083	C05
05/10/22	01:38 Unit OP/5S12 reassigned to LOP051022000084	C05
05/10/22	01:45 5S22 000.0 START WITH X	C05
05/10/22	01:50 000.8 ENDING	C05
05/10/22	01:53 Incident Associated to: LOP051022000096	29 C05
05/10/22	01:53 Incident Associated to: LOP051022000079	29 C05
05/10/22	01:53 Unit OP/3L72 reassigned to LOP051022000084	C05
05/10/22	02:03 IAAAssocInc LOP051022000096 UPDATE PriUnit to OP/4L04	C05
05/10/22	02:08 Unit OP/4A05 reassigned to LOP051022000084	C05
05/10/22	02:08 Unit OP/4A05 TYPE CHANGE F: 415GS 940	C05
05/10/22	02:08 Unit OP/4L06 reassigned to LOP051022000084	C05
05/10/22	02:08 Unit OP/4L06 TYPE CHANGE F: 415GS 940	C05

05-66051

3rd Watch Extension of Shift**JLS Sideshow Detail****22 Oct 05****Supervisor:****3L72 Sgt. K. Thomas 750-4561 or 1L71 Sgt. A. Steinberger 750-4588**

Unit	Name	Ser #
4L1	F. Gysin	8589P
4A2	C. Johnson S. Seder	8517P 8532P
4A3	M. Trenkamp D. Chimpky	8463P 8431P
4L4	D. Kemmitt	8425P
4L5	D. Jim L Ausmus	8156P 8432P
4L6	S. Bowling	8411P

Total Officers: 9

OPD ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

05-066051

CRIME 25661 BR	[] SUPPLEMENTAL	INCIDENT # 60	V1	VICTIM LAST, First, Mid. Sgt. J. Coleman
PECT LAST, First, Mid. "Sweet Jimmies"	INCIDENT LOCATION 1733 San Pablo	DATE OF THIS REPORT 22 OCT 05	ORIGINAL DATE REPORTED	

ITEM #	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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SUPPLEMENTAL SUMMARY :

ON 22 OCT 05 I WAS WORKING AS O.P.D. LATE TACTICAL UNIT 5514 WITH OFF W. PERCY #8346. WE WERE BOTH WEARING FULL POLICE UTILITY UNIFORM AND OFF. PERCY WAS DRIVING MARKED PATROL VEH #1911, I WAS THE FRONT PASSENGER.

AT APPROX. 0100 HRS. WE RESPONDED TO SWEET JIMMIES NIGHT CLUB LOCATED AT 17th ST / SAN PABLO TO ASSIST OFFICERS ON SCENE WITH CROWD / TRAFFIC CONTROL. WHILE ON SCENE RADIO ADVISED OF A FIGHT INSIDE THE ESTABLISHMENT AND POSSIBLE GUNSHOTS.

A GROUP OF OFFICERS WAS ASSEMBLED, WE ENTERED THE BUSINESS TO CHECK FOR ANY POSSIBLE GUNSHOT VICTIMS AND NONE WERE LOCATED.

WHILE ATTEMPTING TO CLEAR A LARGE CROWD FROM IN FRONT OF THE BUSINESS WE ENCOUNTERED A F.B. CATX I.D. NO AS JACKSON EBONY [REDACTED] JACKSON WAS REFUSING TO LEAVE THE AREA AND WAS OBVIOUSLY INTOXICATED. JACKSON WAS ARRESTED FOR 647(F) P.G. PUBLIC INTOXICATION AND TRANSPORTED TO NORTH COUNTY JAIL BY OFFICERS R. TREVINO AND R. CHEN.

REPORTED BY F. BONIFACIO	SERIAL # 84261	WATCH 1	DISTRICT 5	SUPERVISOR SGT. K. COLEMAN	SERIAL #	PAGE 1 OF 1
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05-066051

ORI 00109

STATEMENT

Oakland Police Department

536-200-1 (6/93)

Page 1 of 2

2. Report No.

1. Complainant

K. KEMKE

Offense/Crime

243b PC

04-105235

Name of Person Giving Statement

Sex/Race/DOB

☐ Complainant
☒ Reporting Person☐ Suspect
☒ Witness☐ Driver

4. Residence Address

City/Zip

Phone
()

5. Employment (Name, Address, Phone, Occupation, Work Hours, Days Off) or Supplemental Information if Unemployed or Transient

CPD Engine Station #8

6. Statement Taken By

Serial No.

Date

Time Started - Completed

7. Location Where Statement Taken

Names, Addresses of Persons Present During Statement

FOR VEHICLE COLLISIONS ONLY

8. License No.

State

Veh. Yr.

Make

Model

Type

Color(s)

Driver License No.

State

9. Registered Owner

Address

City/Zip

Residence/Business Phone
()

ADMONITION: You have the right to remain silent. Anything you say can be used against you in a court of law. You have the right to talk to a lawyer and have him present with you while you are being questioned. If you cannot afford a lawyer, one will be appointed to represent you before any questioning if you wish one.

Subject's Initials

WAIVER: Do you understand each of these rights I have explained to you?

Having these rights in mind, do you wish to talk to us now?

Statement:

My name is Ronald Martinez and I work for CPD Engine #2541 Station #8. Today on September 4, 2004 at about 11:00 AM, I responded to 1820 Jefferson for a diabetic call. Upon arrival, I met ^{EM} ~~me~~ with a female adult who worked at the front desk and directed our service to a male black, identified as "Pam". The male black was 6'0", 260 lbs, wearing red and green 99er jacket and tan pants. The subject became really aggressive and started to say "Get the fuck away from me." He then told me, "I don't need your fucking guys." Subject was very aggressive and belligerent from the start. We wanted to check his blood sugar levels, measure he showed definite signs of low blood sugar, or hypoglycemia. The subject took out his own glucometer and checked his blood sugar himself at the same time ^{at} ~~surrounding~~ us. The subject walked away.

Signature of Person Giving Statement

Date

1. Complainant

K. KEMKE OFD

Offense/Crime

243b PC

04-105235

Name of Person Giving Statement

KEMKE, KINK

Sex/Race/DOB

M W [REDACTED]

☐ Complainant☐ Suspect☐ Driver☐ Reporting Person☒ Witness

STATEMENT:

10PM SJ. DULE ON 10PM JJ. HE WENT LEFT ON 10PM
AND NAME IT ONTO SAN PABLO, RONNIE WAS STILL YELLING. AS
RONNIE GOT ON SAN PABLO I SAW HIM WALKING TOWARDS
A FAMILY WHO HAD THREE YOUNG CHILD WITH THEM. FEARING
FOR THE FAMILY AND KIDS I WALKED DIRECTLY IN FRONT
OF RONNIE. ONCE IN FRONT OF RONNIE I KIND OF
DIRECTED RONNIE AWAY FROM THE FAMILY, BY WAIVING MY
HANDS. ALL OF A SUDDEN RONNIE ~~WENT~~ ATTEMPTED TO PUSH
ME AWAY BUT MISSED. NEXT THING I KNEW A BIG WHITE
OAKLAND POLICE OFFICER PULLED ALONG SIDE AND EXITED HIS
PATROL VEHICLE. RONNIE WALKED DIRECTLY UP TO THE OFFICER
AND BEGAN TALKING TO HIM. I WAS TOO FAR AWAY TO HEAR WHAT
WORDS WERE EXCHANGED. AS RONNIE WAS TALKING TO THE WHITE
OFFICER, ANOTHER OFFICER ARRIVED ON SCENE. NOT THINK I
KNEW RONNIE ATTEMPTED TO ~~WENT~~ PUSH PAST THE OFFICER.
THE OFFICER IMMEDIATELY GRABBED A HOLD OF RONNIE. RONNIE
BEGAN VIOLENTLY TWIRLING HIS ARMS AT THE OFFICER. ~~WENT~~
~~THE STRUGGLE RONNIE FELL DOWN AND WAS ALONE WITH OFFICER~~
~~ABOUT~~ THE OFFICERS PUSHED RONNIE AGAINST THE PATROL CAR.
WHILE ON THE CAR I SAW THE BIG WHITE OFFICER GO BEHIND
RONNIE AND PUT A "HEAD-LOCK" LIKE HOLD OVER HIS NECK
AREA. THE OFFICER HELD THE HOLD FOR ABOUT 10-15 SECONDS.
ONCE THE OFFICER HAD THE HOLD ON RONNIE HE IMMEDIATELY
GAVE UP AND THE OTHER OFFICER WAS ABLE TO PUT HANDCUFFS
(CONSCIOUSNESS).
ON HIM. I DO NOT KNOW IF RONNIE LOST ~~CONSCIOUSNESS~~ AT THE POINT

I DID NOT SEE ANY OFFICER STRIKE OR HIT RONNIE. THIS IS

Signature of Person Giving Statement

Date

A TRUE STATEMENT

9-4-04

1. Complainant K. KEMKE OFD		Offense/Crime 243b PC		2. Report No. 04-105235	
3. Name of Person Giving Statement KEMKE, KINK		Sex/Race/DOB MW [REDACTED]		<input type="checkbox"/> Complainant <input type="checkbox"/> Suspect <input type="checkbox"/> Driver <input type="checkbox"/> Reporting Person <input checked="" type="checkbox"/> Witness	
4. Residence Address		City/Zip		Phone ()	
5. Employment (Name, Address, Phone, Occupation, Work Hours, Days Off) or Supplemental Information if Unemployed or Transient OFD [REDACTED]					
6. Statement Taken By O. STEDMAN		Serial No. 85337		Date 4 SEP 04	
		Time Started - Completed 1215 - 1245			
7. Location Where Statement Taken ON SCENE		Names, Addresses of Persons Present During Statement			

FOR VEHICLE COLLISIONS ONLY

8. License No.	State	Veh. Yr.	Make	Model	Type	Color(s)	Driver License No.	State
9. Registered Owner		Address			City/Zip		Residence/Business Phone ()	

ADMONITION: You have the right to remain silent. Anything you say can be used against you in a court of law. You have the right to talk to a lawyer and have him present with you while you are being questioned. If you cannot afford a lawyer, one will be appointed to represent you before any questioning if you wish one.

Subject's Initials

WAIVER: Do you understand each of these rights I have explained to you? _____

Having these rights in mind, do you wish to talk to us now? _____

Statement:

MY NAME IS KINK KEMKE. I AM A OAKLAND FIRE FIGHTER
OPERATING FROM RIC # 2541. I RESPONDED TO 1820 JEFFERSON ST.
ON SEPT. 4, 2004 AT APPROX 1245 PM FOR A MEDICAL CALL.
UPON MY RIG'S ARRIVAL WE CONTACTED "RONNIE" I WOULD DESCRIBE
HIM AS A BLACK MALE, [REDACTED], 6'0, 250-260. HE WAS WEARING
A RED AND GOLD 49ER'S JACKET. IMMEDIATELY CONTACTING
"RONNIE" HE BECAME UPSET. HE WAS YELLING AND CURSING. I
WAS ADVISED BY AN EMPLOYEE, THAT WORKS AT THE HOMELESS
SHELTER, THAT RONNIE SUFFERS FROM LOW BLOOD SUGAR. WHILE
TALKING TO RONNIE HE AGREED TO TAKE A BLOOD SUGAR TEST ON
SCENE. THE TEST REVEALED A BLOOD SUGAR OF 4. WHICH IS
VERY LOW AND POSSIBLY FATAL. FEARING FOR HIS SAFETY WE
ADVISED RONNIE THAT HE NEEDED TO GO TO THE
HOSPITAL. ONCE RONNIE HEARD THAT HE NEEDED TO GO TO
HOSPITAL, HE BECAME EVEN MORE AGITATED. HE BEGAN YELLING
AND SNEERING EVEN LOUDER. NEXT THING I KNEW RONNIE
STARTED WALKING AWAY FROM 1820 JEFFERSON ST. HE WALKED
DOWN JEFFERSON ST. TOWARDS

Signature of Person Giving Statement
[Signature]
Date
9-4-04

OPD ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

04-105235

CRIME BATTERY/FIREFIGHTER 243b PC	SUPPLEMENTAL 612	INCIDENT # 612	V1 V1	VICTIM LAST, First, Mid. K. KEMKE
ECT LAST, First, Mid. MOSES, RONNIE	INCIDENT LOCATION 1701 SAN PABLO		DATE OF THIS REPORT 4SEP04	ORIGINAL DATE REPORTED

ITEM #	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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SUPPLEMENTAL SUMMARY:

ON 4SEP04 AT ABOUT 1200 HRS I (2X12, 1312, BDU'S) I RESPONDED CODE 3 (LIGHTS & SIREN) TO 1701 SAN PABLO AVE, TO ASSIST 4L70 (SGT. D. LARSON) REQUESTING ADDITIONAL OFFICERS FOR A POSSIBLE SISO^W/T(B)(VIOLENT).

UPON ARRIVAL I OBSERVED AMR AND OFD ATTEMPTING TO RESTRAIN (S1) TO THEIR GURNIEY. (S1) WAS RESISTING THE PARAMEDICS AND FIREFIGHTS. I ASSISTED AMR AND OFD BY USING A PAIN COMPLIANT HOLD BY HOLDING (S1'S) HEAD BACK WITH BOTH HANDS UNDER HIS LOWER JAW BONE. (S1) BECAME LESS RESISTANT AND AMR WAS ABLE TO PLACE HIM INTO 4 POINT RESTRAINTS.

I LOCATED 3 INDEPENDANT WITNESSES BUT NONEONE SAW WHAT HAD HAPPENED SEE WITNESS/VICTIM PAGE FOR NAMES.

I FOLLOWED AMR S18 TO SUMMIT HOSPITAL WITHOUT FURTHER INCIDENT.

REPORTED BY L. AUSMUS	SERIAL # 84308	WATCH 2	DISTRICT 2	SUPERVISOR SGT. FREEMAN	SERIAL # 7682P	PAGE 1	OF 1
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1. Complainant

K. KEMKE

OPD

Offense/Crime

243 b R

04-105235

3. Name of Person Giving Statement

MUHIWA, KEVIN

Sex/Race/DOB

OPD

☐ Complainant

☐ Suspect

☐ Driver

☐ Reporting Person

☒ Witness

STATEMENT:

BUT HE WOULD NOT. MOSLEY THEN APPROACHED
A FAMILY THAT WAS STANDING ON THE SIDEWALK.
AS MOSLEY APPROACHED THE FAMILY, AN OAKLAND
POLICE SERGEANT STOOD IN FRONT OF HIM AND
TOLD HIM TO STOP. MOSLEY WOULD NOT STOP, AND
STARTED SWINGING HIS ARMS VIOLENTLY. THE
OPD SERGEANT THEN CAME BEHIND MOSLEY PLACING
HIS ARM ON MOSLEY'S UPPER CHEST, AROUND HIS AIR
WAY. THE SERGEANT THEN TOOK MOSLEY TO THE
GROUND, TO PREVENT HIM FROM ATTACKING ANYONE.
AS MOSLEY WAS ON THE GROUND, HE CONTINUED TO
FIGHT, AND ROLL AROUND. A COUPLE OF GUYS FROM MY
FIRE CREW CLIMBED IN AND ASSISTED THE OPD
SERGEANT TAKE MOSLEY IN CUSTODY. THIS IS A
TRUE STATEMENT. *Kevin Muhiwa*

Signature of Person Giving Statement

Date

9-4-04

1. Complainant K. KEMKE	Offense/Crime OFD 2431 PC	2. Report No. 04-105235	
3. Name of Person Giving Statement NUU HIWA, KEVIN	Sex/Race/DOB OFD CAPT.	<input type="checkbox"/> Complainant	<input type="checkbox"/> Suspect <input type="checkbox"/> Driver
4. Residence Address	City/Zip	<input type="checkbox"/> Reporting Person	<input type="checkbox"/> Witness
5. Employment (Name, Address, Phone, Occupation, Work Hours, Days Off) or Supplemental Information If Unemployed or Transient			
6. Statement Taken By K. BOTEUB	Serial No. 82700	Date 9 SEP 04	Time Started - Completed 1240-1300
7. Location Where Statement Taken STATION #1	Names, Addresses of Persons Present During Statement		

FOR VEHICLE COLLISIONS ONLY

8. License No.	State	Veh. Yr.	Make	Model	Type	Color(s)	Driver License No.	State
9. Registered Owner		Address		City/Zip		Residence/Business Phone ()		

ADMONITION: You have the right to remain silent. Anything you say can be used against you in a court of law. You have the right to talk to a lawyer and have him present with you while you are being questioned. If you cannot afford a lawyer, one will be appointed to represent you before any questioning if you wish one.

Subject's Initials

WAIVER: Do you understand each of these rights I have explained to you?

Having these rights in mind, do you wish to talk to us now?

Statement:
ON THE 4TH OF SEPT 04, I RESPONDED TO 1820 JEFFERSON (HOMELESS SHELTER) W/ MY FIRE CREW. I AM A CAPT. FOR OFD FIRE. UPON ARRIVAL TO THE SHELTER, WE CONTACTED A MALE BLACK BY THE NAME OF RON MOSLEY - THE ORIGINAL 911 CALLER. UPON CONTACT W/ MOSLEY, HE BECAME VERY AGITATED AND AGGRESSIVE TOWARD MY CREW. WHILE TALKING W/ HIM, MOSLEY WOULD NOT ALLOW THE FIRE CREW TO ATTEND TO HIS MEDICAL CONDITION (AN APPARENT BLOOD SUGAR CONDITION). ALL OF A SUDDEN MOSLEY, AGAINST OUR REQUEST, TOOK HIS OWN BLOOD COUNT. AFTER MOSLEY TOOK HIS SUGAR COUNT, WE REALIZED IT WAS VERY LOW - IN FACT SO LOW, THAT BY LAW WE HAD TO ATTEND TO HIM. MOSLEY WALKED AWAY FROM MY CREW, SOUTH ON SAN PABLO. AS HE WAS WALKING AWAY, HE STARTED TO SWING HIS ARMS VIOLENTLY IN THE AIR, SO NO ONE WOULD GET NEXT TO HIM. I SHOUTED AT MOSLEY TO STOP,

Signature of Person Giving Statement

Date

1. Complainant

K. KEMKE OFD

Offense/Crime

243b PC

04-105235

3. Name of Person Giving Statement

Sex/Race/DOB

☐ Complainant☐ Suspect☐ Driver☐ Reporting Person☐ Witness

MARTINEZ, RONALD

STATEMENT:

Southbound on San Pablo Avenue, right off-
ramp gave him some glucose paste. We advised
to follow him to make sure he was okay and
walking safely. Once we reached 17th and
San Pablo, I saw an OFD Unit pull over to
our side and approached the subject. I saw
the officers, try to calm and convince the
subject, but he wouldn't listen. At this point
other officers were on scene and tried to
hold down the subject. During the struggle
subject raised both hands and pushed my fellow
co-worker, Kirk Emke away from him. The
struggle continued and I saw one OFD Sgt.
perform a control hold or control hold on the
subject. Subject then gave up and did not
struggle. At no point did I see the subject use
^{consciousness} ~~consciousness~~, and I could see his legs moving.
At this time, subject was under control, with
other officers and Aank paramedics were on
scene. We then placed him into a ^{gurney} ~~gurney~~ RM
and strapped down. We are not hurt and
everyone in my crew is fine. I could identify
subject and I am willing to assist in the
investigation if needed. This is a true
Statement.

9-4-04

Ron Martinez

Signature of Person Giving Statement

Ron Martinez

Date

9-4-04

CHEMICAL TEST ADMONITION (23612 CVC)

I admonished the driver on 26 FEB 05 at 0716 AM/PM in OAKLAND CA.
DATE TIME LOCATION

1. You are required by state law to submit to a chemical test to determine the alcohol and/or drug content of your blood.
2. ☒ a. Because I believe you are under the influence of alcohol, you have a choice of taking a breath or blood test.
- ☐ b. Because I believe you are under the influence of alcohol and drugs, you have a choice of taking a breath, blood or urine test.
- ☐ c. WHEN APPLICABLE: Since the breath and blood tests are unavailable, you are deemed to have given your consent to chemical testing of your urine.
- ☐ d. WHEN APPLICABLE: Since you need medical treatment, your choice is limited to _____ test(s), the only test(s) available at _____.
3. If you refuse to submit to, or fail to complete a test, your driving privilege will be suspended for one year or revoked for two or three years. A second offense within seven years of a separate violation of driving under the influence, including such a charge reduced to reckless driving, or vehicular manslaughter, or a violation of Section 23140 CVC, or separate administrative determination that you were driving with a BAC of 0.01% or more while under age 21, or a BAC of 0.08% or more at any age, or you refused a test, will result in a two-year revocation. Three or more offenses within seven years of any combination of the above violations, convictions or separate administrative determinations will result in a three-year revocation.
4. Refusal or failure to complete a test may be used against you in court. Refusal or failure to complete a test will also result in a fine and imprisonment if this arrest results in a conviction of driving under the influence.
5. You do not have the right to talk to an attorney or have an attorney present before stating whether you will submit to a test, before deciding which test to take, or during the test.
6. If you cannot, or state you cannot, complete the test you choose, you must submit to and complete a remaining test.

RESPONSE TO: Will you take a Breath test? "YES" Blood test? "WHATEVER"☐ Both Breath and Blood tests are unavailable. EXPLAIN: _____☐ Drug use suspected. _____

RESPONSE TO: Will you take a urine test? _____

The driver refused to submit to or failed to complete any test. The refusal or failure was indicated by the following statements or actions: _____

If not given in English, admonition was given in ☐ Spanish ☐ Other language (specify) _____

If the above Chemical Test Admonition was read to arrestee by another officer, indicate that officer's:

Name _____ Badge/ID No. _____ Agency _____ Phone No. () _____

DRUG ADMONITION SUPPLEMENT

I believe the driver was driving under the influence of drugs or a combination of drugs and alcohol. In addition to the breath test results and information listed on the front, my belief is based on the following facts: _____

DRUG ADMONITION: Blood and Urine Only

1. The breath test you have just taken is designed to detect only the alcohol content of your blood.
2. Because I believe you are under the influence of drugs or a combination of drugs and alcohol, you are required by state law to submit to a blood or urine test to determine the drug content of your blood.
3. If you refuse to submit to, or fail to complete a test, your driving privilege will be suspended for one year or revoked for two or three years. A second offense within seven years of a separate violation of driving under the influence, including such a charge reduced to reckless driving, or a violation of Section 23140 CVC, or separate administrative determination that you were driving with a BAC of 0.01% while under age 21, or a BAC of 0.08% or more at any age, or you refused a test, will result in a two-year revocation. Three or more offenses within seven years of any combination of the above violations, convictions or separate administrative determinations will result in a three-year revocation.
4. Refusal or failure to complete a test may be used against you in court. Refusal or failure to complete a test will also result in a fine and imprisonment if this arrest results in a conviction of driving under the influence.
5. You do not have the right to talk to an attorney or have an attorney present before stating whether you will submit to a test, before deciding which test to take, or during the test.
6. If you cannot, or state you cannot, complete the test you choose, you must submit to and complete the remaining test.

If the above Drug Admonition was read to the arrestee by another officer, indicate that officer's:

Name _____ Badge/ID No. _____ Agency _____ Phone No. () _____

If not given in English, admonition was given in ☐ Spanish ☐ Other language (specify) _____

Response to: Will you take a Blood test? _____ Urine test? _____

The driver refused to submit to or failed to complete any such test. The refusal or failure was indicated by the following statements or actions: _____

100-ORLAND, PD
INTOXILYZER - ALCOHOL ANALYZER
CA MODEL 5000
02/26/2005

SUB NAME=KEYES, JENNIFER
SUB DOB =
ARREST AGENCY=CHP
VIOLATION=
OPER NAME=HENRY, B

SAMPLE	BAC	TIME
AIR BLANK	.00	02:39PST
*SUBJECT	.DEF	02:42PST
AIR BLANK	.00	02:42PST
SUBJECT	.17	02:43PST
AIR BLANK	.00	02:44PST
SUBJECT	.17	02:45PST
AIR BLANK	.00	02:45PST

* DEFICIENT SAMPLE

Keyes, Jennifer

SUBJECT'S NAME

0155

TIME FIRST OBSERVED

OPD

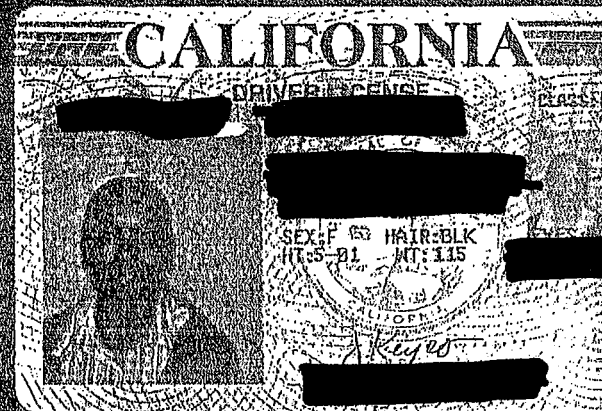
INSTRUMENT LOCATION


B. Henry 1143927

OPERATOR

ADDITIONAL INFORMATION AND/OR REMARKS

Nothing done to complete
test



LAW ENFORCEMENT AGENCY CASE NO. 05-011408		ARREST DATE 26 FEB 05		FOR DMV USE ONLY	
DRIVER'S NAME (LAST, FIRST, M.I.) KEYES, JENNIFER		DRIVER LICENSE NO. [REDACTED]		CLASS [REDACTED]	STATE [REDACTED]
MAILING ADDRESS [REDACTED]					THUMB PRINT (Right thumb or specify) 
DOB: [REDACTED]	Sex: F	Hair: BLK	Eyes: BRN	Ht.: 5'	Wt.: 115
Driver License: <input type="checkbox"/> Suspended/Revoked <input checked="" type="checkbox"/> Surrendered to Officer (Attach) <input type="checkbox"/> Not in Possession <input type="checkbox"/> Unlicensed					
<input checked="" type="checkbox"/> 0.08% or more BAC Chemical Tests Results <input type="checkbox"/> Chemical Test Refusal <input type="checkbox"/> Forced Blood Test					
(Complete reverse) (Complete reverse)					

Vehicle Lic. No. or VIN [REDACTED] ☐ COMMERCIAL VEHICLE: Vehicle operation requires a commercial driver license (Section 15210 CVC). On **26 FEB 05** at **2:30 AM/PM** in (City and County) **OAKLAND** CA, the above named driver was:

- ☒ Driving: ☒ observed by this officer or ☐ the observer shown in the shaded area below, ☐ admitted to driving.
☐ Arrested per Section 40300.5 CVC. (Describe details in probable cause section on second page.)
☐ Involved in a collision. Attach collision report. In the probable cause section on the second page, describe how time of collision was established.

I had reasonable cause to believe the driver was driving a motor vehicle with alcohol and/or drugs present in the blood or while under the influence. The driver was arrested by this officer or by the person shown in the shaded area below on **26 FEB 05** (Month/Day/Year) at **2:30 AM/PM** for violation of Section 23152 or 23153 CVC, or Section 191.5(a) or 192(c) of the Penal Code.

PROBABLE CAUSE. Describe in detail the facts and circumstances that led to the stop or contact. If driving was observed by someone other than the arresting officer; what did the observer say? State details on second page of this form hereby incorporated by reference.

Complete shaded area only if driving/collision observed by someone other than arresting officer or arrest done by another officer.

<input checked="" type="checkbox"/> Driving observed	<input type="checkbox"/> Driver arrested	<input type="checkbox"/> Collision witnessed	By <input checked="" type="checkbox"/> Another Officer <input type="checkbox"/> Citizen	<input type="checkbox"/> Driving observed	<input type="checkbox"/> Driver arrested	<input type="checkbox"/> Collision witnessed	By <input type="checkbox"/> Another Officer <input type="checkbox"/> Citizen
NAME (PLEASE PRINT) SGT. K. THOMAS				NAME (PLEASE PRINT)			
ADDRESS OAKLAND PD				ADDRESS			
TELEPHONE NO. [REDACTED]				TELEPHONE NO.			
OFFICER'S BADGE/ID NO. 8069P				OFFICER'S BADGE/ID NO.			
OFFICER'S AGENCY AD				OFFICER'S AGENCY			

OBJECTIVE SYMPTOMS OF INTOXICATION: ☒ Bloodshot/watery eyes ☒ Odor of alcoholic beverage ☐ Unsteady gait ☒ Slurred speech
☐ Other: _____ Observed by: **J. BROWN 8519P** at **01:52 AM/PM**

CHEMICAL TEST 0.08% OR MORE BLOOD ALCOHOL CONCENTRATION (BAC)

Breath Test Results (Attach copy of the results, if available) **26 Feb 05**

TEST 1, **0.17** % BAC on **26 FEB 05** AM/PM TEST 2, **0.17** % BAC on **02:45** AM/PM TEST 3, _____ % BAC on _____ AM/PM

BREATH TEST MACHINE OPERATOR'S CERTIFICATION: I certify under penalty of perjury under the laws of the State of California, that the above breath test sample results were obtained in the regular course of my duties. I further certify that I am qualified to operate this equipment and that the test was administered pursuant to the requirements of Title 17 of the California Code of Regulations.

Date **26 Feb 05** Signature X **B. Henry** Badge/ID No. **43975** Agcy./Div. **OPD**

Blood Test Results ☐ Blood Test on _____ DATE _____ TIME _____ AM/PM

Urine Test Results ☐ Both Breath and Blood tests unavailable. ☐ Drug use suspected.

☐ Urine Test First Void on _____ DATE _____ TIME _____ AM/PM Test on _____ DATE _____ TIME _____ AM/PM

I certify under penalty of perjury, under the laws of the State of California, that the information contained on all pages of this Officer's Statement is true and correct.

EXECUTED ON: Date **26 FEB 05** AT: City **OAKLAND** County **ALAMEDA** State **CA**

OFFICER'S PRINTED NAME J. BROWN	BADGE/ID NO. 8519P	[REDACTED]
AGENCY OAKLAND PD	AREA 1	COURT CODE (IF UNKNOWN, COURT NAME)
ISSUE DATE OF ORDER 26 FEB 05	SIGNATURE OF ARRESTING OFFICER X J. BROWN	

☒ I did not personally serve a copy of the Order of Suspension/Revocation to the driver.

☐ SERVED BY ANOTHER OFFICER: I personally served a copy of the order to the driver on the date shown below:

OFFICER'S PRINTED NAME	BADGE/ID NO.	SIGNATURE OF OFFICER
		X

White - DMV, Yellow - Law Enforcement, Pink - Driver

continued on reverse

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

05-011408

CRIME 23152 UC	[] SUPPLEMENTAL	INCIDENT # 0082	V1	VICTIM LAST, First, Mtd. STATE OF CALIFORNIA
ISPECT LAST, First, Mtd. KEYES, HELEN	INCIDENT LOCATION 1000 10 AVE	DATE OF THIS REPORT 3 FEB 05	ORIGINAL DATE REPORTED	

ITEM #	QNTY.	VALUE
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SUMMARY CONT:

TO SMELL OF AN ALCOHOLIC BEVERAGE. DURING THE INTERVIEW (PORTION) OF THE D.O.U.I. REPORT KEYES SAID SHE HAD TWO MIDOURI SOUPS AND WAS GOING TO JIMMIE'S CLUB. BELIEVING KEYES TO BE DRIVING UNDER THE INFLUENCE OF ALCOHOL (23152(A) UC), I PLACED HER UNDER ARREST AND TRANSPORTED HER TO ORD JAIL. I HAD ADMINISTERED KEYES OF CHEMICAL TEST OPTIONS (DMV FORM DS 367) AND SHE AGREED TO A BREATH TEST. KEYES CONTINUED TO BLOW INCORRECTLY INTO THE INTOXILYZER MACHINE, DESPITE THE CORRECTIONAL OFFICER'S INSTRUCTIONS. KEYES EVENTUALLY GAVE TWO SUCCESSFUL INDICATING .17 BAC AND .17 BAC. I ADDED THE CHARGE OF DRIVING WITH A BAC OF .08 OR GREATER (23152(B) UC).

REPORTED BY T. BOWEN	SERIAL # 854P	WATCH 1	DISTRICT 0	SUPERVISOR SGT. GONZALEZ	SERIAL #	PAGE 5 OF 5
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ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

FD #

05-011408

CRIME 23152 VL	[] SUPPLEMENTAL	INCIDENT # 0062	V1	VICTIM LAST, First, Mid. STATE OF CALIFORNIA
SUSPECT LAST, First, Mid. KEYES, JENNIFER	INCIDENT LOCATION 1900 SAN PABLO AVE	DATE OF THIS REPORT 26 FEB 05	ORIGINAL DATE REPORTED	

ITEM #	QNTY.	PROPERTY (and/or NARRATIVE)	SERIAL #	VALUE
ITEM TYPE, BRAND, MODEL #; SIZE, COLOR, MARKS, ETC				

SUMMARY CONT:

AGAIN. I ASKED KEYES IF SHE UNDERSTOOD AND SHE SAID "YES". KEYES AGAIN PERFORMED THE TEST INCORRECTLY. I DEMONSTRATED THE ONE LEG STAND TO KEYES AND ASKED HER IF SHE UNDERSTOOD. KEYES REPLIED "YES" AND THEN PERFORMED THE WALK AND TURN TEST, AGAIN INCORRECTLY. I ADVISED KEYES SHE DID THE WRONG TEST AND AGAIN DEMONSTRATED THE ONE LEG STAND TEST. KEYES ~~DOES NOT~~ UNDERSTOOD THE TEST AND AGAIN PERFORMED THE WALK AND TURN TEST, INCORRECTLY (NO HEEL OFF + OFF LINE).

KEYES AGREED TO A P.A.S. TEST, BUT WOULD NOT BLOW INTO THE MACHINE CORRECTLY AND HAD THREE VOIDED ATTEMPTS. KEYES WOULD PUT HER LIPS ON THE MOUTHPIECE AND EITHER NOT BLOW/EXHALE OR WOULD BLOW A SLIGHT AMOUNT AND QUICKLY STOP. KEYES INSISTED SHE WAS EXHALING HARD, HOWEVER, LITTLE TO NO AIR COULD BE HEARD ENTERING THE MACHINE AND NO SOLID TONE SOUNDED. I DEMONSTRATED ON AN EXTRA MOUTHPIECE HOW TO BLOW INTO THE MACHINE AND SHOWED KEYES THAT THE MOUTHPIECE PROVIDED ALMOST NO RESISTANCE. KEYES AGAIN WOULD NOT CONDUCT THE TEST PROPERLY.

I CONTINUED TO SMELL THE ODOR OF AN ALCOHOLIC BEVERAGE COMING FROM KEYES. I NOTICED THAT SHORTLY AFTER PLACING KEYES IN MY PATROL VEH. THAT IT ALSO BEGAN

REPORTED BY T. BOWEN	SERIAL # 85191	WATCH 1	DISTRICT 02	SUPERVISOR SGT. GONZALEZ	SERIAL #	PAGE 4 OF 5
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ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RV #

05-011408

CRIME 23152 VC	[] SUPPLEMENTAL	INCIDENT # 00082	V1	VICTIM LAST, First, MId. STATE OF CALIFORNIA
SUSPECT LAST, First, MId. KEYES, JENNIFER	INCIDENT LOCATION 1900 SAN PABLO AVE	DATE OF THIS REPORT 26 FEB 05	ORIGINAL DATE REPORTED	

ITEM #	QNTY.	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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Summary:

ON 26 FEB 05, AT ABOUT 0136 HRS, I WAS WORKING AS IL3, WEARING FULL POLICE UNIFORM AND DRIVING MARKED PATROL VEH. #1403. WHILE ON PATROL, S/B AT 18TH ST / SAN PABLO, I HEARD SGT. THOMAS 806AP ADVISE VIA RADIO TO STOP A WHITE TOYOTA GOING N/B IN THE 1700 BLK SAN PABLO. SGT. THOMAS WAS CONDUCTING CROWD CONTROL AND MAINTAINING A CONE PATTERN AT 17TH ST / SAN PABLO. I OBSERVED A WHITE TOYOTA (REDACTED) TRAVELING N/B SAN PABLO DRAGGING A CONE UNDER ITS FRONT END. I CONDUCTED A TRAFFIC STOP ON THE VEH. IN THE 1900 BLK. SAN PABLO AVE. SGT. THOMAS FURTHER ADVISED THAT THE VEH. CROSSED HIS CONE PATTERN AND ALMOST STRUCK HIM WHEN HE TRIED TO TELL THE DRIVER TO STOP, AS HE WAS ON FOOT.

I CONTACTED THE DRIVER [LATER ID'D AS KEYES (S)] AND IMMEDIATELY NOTICED AN ODR OF AN ALCOHOLIC BEVERAGE COMING FROM THE VEHICLE. KEYES HAD BLOODSHOT / WATERY EYES AND HER SPEECH WAS SLOW AND THICK. I ASKED KEYES TO TURN OFF HER VEH. AND NOTICED SHE WAS SLOW AND DELIBERATE, FUMBLING WITH HER KEYS AS SHE TURNED OFF THE VEH.

KEYES PERFORMED F.S.T.'S, STRONGLY INDICATING THAT SHE WAS UNDER THE INFLUENCE OF ALCOHOL. (SEE D.O.I. REPORT FOR DETAILS.) I BEGAN WITH THE WALK AND TURN TEST. KEYES BEGAN TO WALK WITHOUT TOUCHING HER HEELS / TOES. I IMMEDIATELY STOPPED KEYES AND DEMONSTRATED THE TEST

REPORTED BY T. BOWEN	SERIAL # 85AP1	WATCH 0	DISTRICT 0	SUPERVISOR SGT. GONZALES	SERIAL #	PAGE 3 OF 5
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V. FIELD SOBRIETY TESTS

Time of Test 0139	Weather Mostly Clear / Dry	Lighting Street Lights	Location Sidewalk	Condition of Test Surface Smooth Concrete
1 One Leg Stand Yes No Sways While Balancing <input checked="" type="checkbox"/> <input type="checkbox"/> Uses Arms To Balance <input checked="" type="checkbox"/> <input type="checkbox"/> Comments: DID WALK AND TURN TEST AGAIN AFTER TWO ATTEMPTS		2 (SLAYS) (2ND TEST) Walk and Turn <input checked="" type="checkbox"/> Loses Balance <input type="checkbox"/> Starts Before Instructions <input checked="" type="checkbox"/> During Instructions <input checked="" type="checkbox"/> Uses Arms to Balance <input checked="" type="checkbox"/> Steps off line <input checked="" type="checkbox"/> Improper Turn <input checked="" type="checkbox"/> Does Not Touch Heel-to-Toe <input type="checkbox"/> Incorrect Number of Steps 9 8 7 6 5 4 3 2 1 L 1 2 3 4 5 6 7 8 9 Start Position <input type="checkbox"/> Unable to Perform (Explain) AFTER 2ND ATTEMPT		

3 Horizontal Gaze Nystagmus Check for: Left Eye Right Eye Lack of Smooth Pursuit <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> HGN at Maximum Deviation <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> HGN Prior to 45 Degrees <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> Comments: ONSET AT APPROX. 30°	4 Manual Dexterity Counting: 1 to 4 touching fingers to thumb starting with smallest finger to index finger and back. Correct: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Adds Numbers <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Other (Explain): SKIPPED FINGERS
---	---

5 Alphabet Have Offender Recite Alphabet A B C D E F G H I J K L M N O P Q R S T U V W X Y Z SKIP Z E Correct <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Slow/Deliberate <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Unintelligible <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6 Other
---	------------------------------------

VI. PRELIMINARY ALCOHOL SCREEN (PAS)

P.A.S. Admonition: I am requesting that you take a preliminary alcohol screening test to further assist me in determining whether you are under the influence of alcohol. You may refuse to take this test; however, this is not an implied consent test and if arrested, you will be required to give a sample of your blood, breath, or urine for the purpose of determining the actual alcoholic and drug content of your blood.

The above statement was read to the subject by:

<input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Arresting Officer	<input type="checkbox"/> Or T. BROWN	Serial No.: 8519	Time: 0151
PAS Serial No. [REDACTED]	Temperature 99°	Zeroed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Results No. 1 VOID	Time 1 0151
			Results No. 2 VOID	Time 2 0156
			Results No. 3 VOID	Time 3 0158
Location of Test <input checked="" type="checkbox"/> At Scene		Breath Sample Strength Strong		Officer Administering PAS Test <input checked="" type="checkbox"/> Arresting Officer
		-Strong <input type="checkbox"/> Moderate <input type="checkbox"/> Weak <input type="checkbox"/>		Serial No.

VII. CHEMICAL TEST (Complete DMV DS-367 at this time) a:

Blood Test Taken At	Date	Time	Name of Person Drawing Blood	Type of Swab
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VIII. TROMBETTA ADVISEMENT

A. The breath testing equipment does NOT retain any breath sample for later analysis by you or anyone else. 0027 hrs	
B. If you want a sample retained, you may provide a blood or urine sample that will be retained at no cost to you. If you do so, the blood or urine sample may be tested for alcoholic or drug content by either party in a criminal prosecution.	
C. Do you wish to provide an additional sample? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No WHATEVER IS FILED	

Reporting Officer T. BROWN	Serial No. 8519	Supervisor Sgt. GONZALEZ	Serial No.	Page 1 of 5
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O P D
POLICE REPORTD.U.I.
REPORTOAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607In Custody: ☒ Yes ☐ No
Citation No.

RD #

05-011408

CP Beat

Incident No.

Offense 23152(A)VC

4x

00082

23152(B)VC

I. SUSPECT

Address City ☐ Oakland Zip Code

LAST, First, Mid

KEYES, JENNIFER

D.L. No.

State

D.O.B.

Sex

Race

Hair

Eyes

Weight

Height

Phone No.

F

B

BLK

BRO

5'11"

115

UNK.

Vehicle License No.

Year

Make

Model

Body

Ext. Color

Disp. O/R () OPD ()

01

NISS

ACT

4D

WHI

TEW A+B

II. SUSPECT'S PHYSICAL APPEARANCE

INJURIES/DISABILITIES:	SPEECH	APPEARANCE OF:	UNUSUAL ACTIONS:	ODOR OF ALCOHOLIC BEVERAGE (Describe)				
<input checked="" type="checkbox"/> None Visible <input type="checkbox"/> Cuts <input type="checkbox"/> Bruises <input type="checkbox"/> Possible Fractures <input type="checkbox"/> Missing or Artificial Members <input type="checkbox"/> Other: _____	<input type="checkbox"/> Apparently Normal <input checked="" type="checkbox"/> Thick <input type="checkbox"/> Mumbles <input type="checkbox"/> Slow <input type="checkbox"/> Fast <input type="checkbox"/> Repeats <input checked="" type="checkbox"/> Sarcastic/Insulting <input type="checkbox"/> Other	<table border="1"><thead><tr><th>Eyes</th><th>Face</th></tr></thead><tbody><tr><td><input type="checkbox"/> Normal <input checked="" type="checkbox"/> Watery <input checked="" type="checkbox"/> Bloodshot <input type="checkbox"/> Dilated <input type="checkbox"/> Constricted <input type="checkbox"/> Other</td><td><input checked="" type="checkbox"/> Normal <input type="checkbox"/> Pale <input type="checkbox"/> Flushed <input type="checkbox"/> Sweaty <input type="checkbox"/> Other</td></tr></tbody></table>	Eyes	Face	<input type="checkbox"/> Normal <input checked="" type="checkbox"/> Watery <input checked="" type="checkbox"/> Bloodshot <input type="checkbox"/> Dilated <input type="checkbox"/> Constricted <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> Pale <input type="checkbox"/> Flushed <input type="checkbox"/> Sweaty <input type="checkbox"/> Other	<input type="checkbox"/> None <input type="checkbox"/> Drooling <input type="checkbox"/> Crying <input type="checkbox"/> Fighting <input checked="" type="checkbox"/> Drowsy <input type="checkbox"/> Droopy Eyelids <input type="checkbox"/> Needle Marks <input type="checkbox"/> Other	STRONG FROM VEHICLE AND PERSON
Eyes	Face							
<input type="checkbox"/> Normal <input checked="" type="checkbox"/> Watery <input checked="" type="checkbox"/> Bloodshot <input type="checkbox"/> Dilated <input type="checkbox"/> Constricted <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> Pale <input type="checkbox"/> Flushed <input type="checkbox"/> Sweaty <input type="checkbox"/> Other							

Clothing (Describe) LOW CUT BLO LEANS
Shoes (Describe) BROKEN WOMEN'S SLIGHT LEATHER HEEL

III. INVESTIGATION/INTERVIEW

Do you know of anything mechanically wrong with your car? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		When did you become aware of it?	
Are you sick/injured? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Describe:		Are you Diabetic or Epileptic? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Do you Take Insulin? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Pills <input type="checkbox"/> Injection	
Do you have any physical defects? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Describe:		When did you last sleep? LAST NIGHT How long? 6 HRS	
When did you last eat? COUPLE HOURS AGO What did you eat? "REAL FOOD"		Were you driving the vehicle? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If not, who?	
Where did you start? "A MOVIE"		Where were you going? "TO LIMMIE'S"	
Where are you now? SAN PABLO		What have you been drinking? "MIDORI SODA"	
How Much? "PROBABLY TWO" Time Started? "11" Time Stopped? "I DON'T KNOW"		Do you feel the effects of the drinks? Describe: "PROBABLY"	
Are you under the care of a doctor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Name & Address:		Are you under the care of a dentist? <input type="checkbox"/> Yes <input type="checkbox"/> No Name & Address:	
Have you taken any medicine? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If yes, what? How Much? Time of Last Dosage?	
Do you feel the effects of the medicine? Describe: N/A		Have you taken any other drugs? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No "JUST VITAMINS"	
Do you feel the effects of the drugs? Describe: N/A		If yes, what? How Much? Time of Last Dosage?	

IV. WITNESS/PASSENGERS

Name () Wit () Pass Pos. _____	DOB	Sex	Race	Address	Phone
Name () Wit () Pass Pos. _____	DOB	Sex	Race	Address	Phone
Name () Wit () Pass Pos. _____	DOB	Sex	Race	Address	Phone

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

HD #

05-011437

CRIME 25601 BP	SUPPLEMENTAL	INCIDENT # 18	V1	VICTIM LAST, First, Mid. SOC
SUSPECT LAST, First, Mid. Sweet Jimmies	INCIDENT LOCATION 1733 San Pablo	DATE OF THIS REPORT 26 FEB 05	ORIGINAL DATE REPORTED	

ITEM #	QNTY.	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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SUPPLEMENTAL SUMMARY:

ON 26 FEB 05 AT ABOUT 0030HRS OFC. R. SILVA-RODRIGUEZ, BSZIP AND I (448, 1330, B) WERE ASSIGNED AS A WEST OAKLAND SIDE SHOW UNIT. AT ABOUT 0115HRS SGT. K THOMAS TO "DO A TRAFFIC CONTROL SPOT AT 17TH ST AND JEFFERSON. WE BLOCKED E/B 17TH ST AND N/B JEFFERSON.

WHILE ON THE TRAFFIC CONTROL SPOT 2 VEHICLES DROVE THROUGH THE CONE PATTERN AND LEFT OF A DOUBLE YELLOW LINE.

WE OBSERVED OTHER VEHICLES SPINNING DONUTS AND OTHER RECKLESS DRIVING AT THE CHEVERON STATION AT [REDACTED]. I COULD NOT SEE SPECIFIC PLATES DUE TO THE AMOUNT OF VEHICLES (70+)

REPORTED BY L. AUSMUS	SERIAL # 0432P	WATCH 3	DISTRICT 5	SUPERVISOR SGT. AUTORMSON	SERIAL # 7933P	PAGE 1 OF
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ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

05-D11437

CRIME 25601 BP	SUPPLEMENTAL	INCIDENT # 82	V1	VICTIM LAST, First, Mid. STATE OF CALIFORNIA / CITY OF OAKLAND
SUSPECT LAST, First, Mid. Sweet Jimmies	INCIDENT LOCATION 1733 San Pablo	DATE OF THIS REPORT 26 FEB 05	ORIGINAL DATE REPORTED	

ITEM #	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
ONLY	SUPPLEMENTAL		
<p>ON 26 FEB 05 AT APP. 0000 HOURS I WAS WORKING AS UNIT 423. I WAS IN FULL POLICE UNIFORM DRIVING MARKED CAR #1033. I WAS WORKING AS A SPECIAL UNIT IN THE AREA OF SWEET JIMMIE'S ON THE 1700 BLK OF SAN PABLO AVE.</p> <p>I WAS STATIONED ON THE 1800 BLK OF SAN PABLO AVE. TO ASSIST IN CROWD CONTROL. I MADE A FEW CAR STOPS ON VEHICLES THAT WERE BEING RECKLESS. ALSO I OBSERVED LARGE CROWDS OF PEOPLE JUST WONDERING IN THE MIDDLE OF STREET OBSTRUCTING VEHICLES. IT APPEARED THAT MY PRESENCE DID LITTLE IF NOTHING TO PREVENT THESE PEOPLE FROM COMMITTING VARIOUS VEHICLE CODE VIOLATIONS. ALL OF THIS TOOK PLACE BETWEEN THE HOURS OF 2330 & 0230 HOURS.</p> <p>ALSO I ASSISTED IN A CAR STOP ON A VEHICLE THAT DROVE AROUND POLICE CAR THAT WERE CLEARLY MARKED & THAT DROVE OVER STREET CONES, DRAGGING ONE OF THE CONES 3 BLOCKS DOWN THE STREET UNTIL SHE FINALLY PULLED OVER.</p> <p>THE DRIVER WAS ARRESTED FOR DRIVING UNDER THE INFLUENCE & HER VEHICLE WAS TOWED INCIDENT TO ARREST.</p>			

REPORTED BY E GYSIV	SERIAL # 8589P	WATCH 3	DISTRICT 01	SUPERVISOR SGT. MCNEIL	SERIAL # 7880P	PAGE 1 OF 2
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OS-011437

CRI 00109

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

FD #

05-011437

CRIME 25601	SUPPLEMENTAL BP	INCIDENT # 18	V1	VICTIM LAST, First, Mid. SOC
SUSPECT LAST, First, Mid. Sweet Jimmies	INCIDENT LOCATION 1733 San Pablo	DATE OF THIS REPORT 26Feb05	ORIGINAL DATE REPORTED	

ITEM #	QNTY.	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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Summary:

On 26Feb05 at about 0115hrs. I was working 7A4 with Ofc. C. Kede, 8469A. We were wearing full OPD uniform & I was st ft passenger of OPD vehicle 1224. We were assigned to work a traffic control post at 18th St & Jefferson, outside Sweet Jimmies.

While there we blocked S/B Jefferson & E/B 18th St. to try to limit cruising. While there I observed several vehicles w/ passengers hanging outside windows & doors. Along w/ several vehicles spinning their tires & reckless driving stunts. I also observed 3 vehicles drive around cone patterns & then attempt to flee the area when ordered to stop by officers on foot.

I also responded to & cited 5 vehicles which were parked in violation of posted signs in private lots.

REPORTED BY J. SKRDANT	SERIAL # 8417P	WATCH 3	DISTRICT 6	SUPERVISOR Sgt. Brandwood	SERIAL #	PAGE 1 OF 1
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ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

05-011437

CRIME 25601 BP	SUPPLEMENTAL	INCIDENT # 18	V1	VICTIM LAST, First, Mid. SJC
SUSPECT LAST, First, Mid. Sweet Jimmies	INCIDENT LOCATION 1800 San Pablo	DATE OF THIS REPORT 26 FEB 05	ORIGINAL DATE REPORTED	

ITEM #	QNTY.	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
<u>Summary</u>				
On 26 FEB 05 I was working 4A2 with CFC. M. Trenkamp				
SUCP, working as traffic enforcement for the area of				
1800 San Pablo.				
At approx 0100 hrs. OFC. Trenkamp and I conducted				
surveillance of the Sweet Jimmies				
1733 San Pablo. We observed several				
club goers partying in the street, and driving				
erratic. We also observed several people who had				
exited Jimmies causing civil disobedience, public				
intoxication, several traffic violations, and overall				
"sideshow" activity.				

REPORTED BY D. Chimphy	SERIAL # 8131P	WATCH 3	DISTRICT 2	SUPERVISOR Sgt. Thomas	SERIAL #	PAGE 1 OF 1
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05-011437

536-937 (1/97)

CRIME Disorderly House 25601 BP	π SUPPLEMENTAL	INCIDENT # 18	V 1	VICTIM LAST, First, Mid. State Of California
SUSPECT LAST, First, Mid. Sweet Jimmie's Club	INCIDENT LOCATION 1733 San Pablo Ave.		DATE OF THIS REPORT 27 Feb 05	ORIGINAL DATE REPORTED

ITEM	QTY	PROPERTY (AND/OR NARRATIVE)	ITEM TYPE, BRAND, MODEL, SIZE, COLOR, MARKS, ETC	SERIAL	VALUE
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NARRATIVE CONT: As Officers were attempting to control the crowd IFO Sweet Jimmies; a large number of the vehicles relocated the Chevron Station at [REDACTED] which I was advised by radio of. CHP also contacted OPD Radio and requested OPD assistance for the crowd who had gathered at the Chevron Station. We relocated as a group and I observed many of the vehicles involved in the "Sideshow" at the Chevron Station had just left the area of Sweet Jimmies. Officer Chimpky and Trenkamp videotaped much of the incident at the Chevron Station.

The 10 officers and myself wrote numerous citations, for vehicular offenses, made a DUI arrest and were required for public safety to maintain crowd and traffic control posts, which were directly related to the large crowd who had gathered IFO and directly around Sweet Jimmies [REDACTED] San Pablo Ave.

Based on my observations, which the videotape shows much of, Sweet Jimmies was directly responsible for the attractable nuisance of the very large crowd and traffic. Sweet Jimmies security was unable to control the large number of patrons once they left the club. This group committed numerous vehicular violations, pedestrian violations, played loud music, and endangered the safety of the citizens of Oakland by, congregating in the street, fighting, reckless driving and preventing emergency vehicles from being able to traverse San Pablo Ave, safely. For these reasons Sweet Jimmies Club, located at 1733 San Pablo Ave., is in violation of 25601 PB, Disorderly House.

See numerous supplementals, citations, and DUI report for additional details.

The following officers were used for the following times; (see detail for personnel)

4A1 - 2300-0230 hrs.
4A2 - 0100-0230 hrs.
4L3 - 0000-0230 hrs.
4A4 - 0115-0230 hrs.
4A5 - 0030-0230 hrs.
4L6 - 0030-0230 hrs.

Sweet Jimmies required and used a total of 21 officer hours and 3.5 Sgt. hrs. for myself.

Reported By K. THOMAS	Serial No. 8069P	Watch 3	Area 2B	Supervisor	Serial No.	Page 4 of 4
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CRIME Disorderly House 25601 BP	INCIDENT # 18	VICTIM LAST, First, Mid. V 1 State Of California
SUSPECT LAST, First, Mid. Sweet Jimmie's Club	INCIDENT LOCATION 1733 San Pablo Ave.	DATE OF THIS REPORT 27 Feb 05

PROPERTY (EVIDENCE) NARRATIVE	SERIALS	VALUE
ITEM TYPE BRAND MODEL W. SIZE COLOR MARKS ETC		

NARRATIVE: On 25 Feb 05, I (3L72) was assigned [REDACTED] supervisor dressed in full police uniform, driving fully marked OPD veh #1243. I was working a 3rd Watch extension of shift for West end sideshow. I was in the area of Sweet Jimmies Club, 1733 San Pablo Ave. at approximately 2300 hrs. I observed a large number of persons outside the club on both sidewalks, the street, and heavy traffic on San Pablo Ave. I also observed spotlights directly IFO the club. I knew from prior intel that the rapper "Mac Mall" was performing at the club and that they were expecting a capacity crowd, which they appeared to have. Capacity for Sweet Jimmies was reported to be approximately 500 persons, which they had reached by approximately 2300 hrs. I also noticed a large crowd gathered IFO the liquor store at [REDACTED] which from my training and experience, I know club patrons often go to before to purchase alcohol prior to entering the local clubs.

I observed approximately 100-200 people directly IFO the club, on the sidewalk to the North and South of the club, and in the streets talking to the several dozen vehicle driving both North and South on San Pablo Ave. There were also small pockets of 3 to 10 persons, mostly males hanging out on the various street corners talking to the female patrons as they walked towards the club. Numerous vehicles were playing very loud music, audible far in excess of 100 feet, blocking traffic, with the vehicle occupants conversing with the pedestrians. The totality of the circumstances required immediate action to preserve public safety, for both pedestrians and vehicle occupants, keep traffic flowing and keep the roadway accessible for emergency vehicles, and prevent further "Sideshow" activity.

I also knew the club would be closing down soon, so I requested all West end sideshow units to 17th St. and San Pablo Ave., due to the imminent influx of people about to be let out of the club. I used a total of 10 officers (see detail for details) to help block and control traffic, site vehicles and pedestrians, and keep the peace IFO Sweet Jimmies Club. At approximately 0130 hrs. I observed several hundred (300-400) additional persons leaving the club and congregate IFO the club entrance and sidewalks directly adjacent to it. This increased the already large crowd of people who were now standing in the roadway completely blocking all lanes of traffic at times. A fight broke out in the crowd at one point and required OPD officers to break up the mutual combat between the parties and keep the peace. Numerous vehicles performed numerous dangerous driving violations as they left the area including, speeding, unsafe starting, and reckless driving.

At one point I was standing in the intersection of 17th St. and San Pablo Ave. maintaining the traffic cones and routing traffic away from N/B San Pablo Ave, so as to not allow vehicles to drive directly IFO Sweet Jimmies. I observed a White Nissan Altima, license [REDACTED], drive around me, almost hitting [REDACTED] and continue driving through the cone pattern, dragging several cones under the vehicle and continue N/B through the large crowd standing in the roadway, IFO Sweet Jimmies. This caused a very dangerous situation as the driver, a female black, later identified as Jennifer Keyes almost struck myself, and numerous patrons from Sweet Jimmies standing in the roadway. I advised officers to stop the vehicle once she passed the crowd and cite the driver for driving over my cone pattern. The driver ended up being intoxicated and was arrested for [REDACTED] See crime report RD#05-011408 for additional details.

Officer D. Chimpky and M. Trenkamp videotaped a portion of the incident and I collected the videotape and turned it into OPD Property Section.

Reported By K. THOMAS	Serial No. 8069P	Watch 3	Area 2B	Supervisor	Serial No.	Page 3 of 4
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CRIME REPORT

Oakland Police Department
455 - 7th Street
Oakland, CA 94607-3985

ASSIGN TO:

Vice

RD #

05-066051

ROUTING

☒ CID

Outside Reporting Agency

Case No.

Police Beat

4

CP Beat

4X

Incident No.

60

☐ YSD

☐ VICE

☐ CSD

☐ TRAFFIC

☐ D.A.

VIC/WIT

☒ ABAT

ADDITIONAL PERSON

☒ R/P
☐ Parent
☐ Witness

Last, First, Mid
Sgt. K. Thomas 8069p

Sex

Race

D.O.B.

Age

Home Address

City ☐ Oakland

Zip

Home/Msg. Phone

Business Address / School

City ☒ Oakland

Zip

Work Phone

OPD 455 7th Street (3rd watch, 2B Squad)

LOCATION

POINT OF ENTRY

LOCATION P.O.E.

METHOD OF ENTRY

BREAK GLASS

BURGLARY

WEAPON USED

☐ BANK/ATM
☐ CONVENT MKT
☐ GAS STATION
☐ OTHER COMM.
☐ RESIDENCE
☐ STREET
☐ MISC.

☐ DOOR
☐ WINDOW
☐ GARAGE
☐ ADJ. PREM.
☐ VENT/SKYLIGHT
☐ OTHER

☐ FRONT
☐ REAR
☐ SIDE
☐ ROOF
☐ UNK.

☐ OPEN/UNLOCKED
☐ FORCED SCREEN
☐ CUTTING DEVICE
☐ BODY FORCE
☐ PRY TOOL
☐ CHANNEL LOCKS
☐ ATTEMPT FORCE

☐ REMOVE DOOR
☐ REMOVE WINDOW
☐ POSS. EMPLOYEE
☐ KEY
☐ WATER METER
☐ NONE
☐ UNK

☐ AUTO
☐ RESIDENTIAL
☐ COMMERCIAL
☐ OTHER
☐ ALARM RESP

☐ FIREARM
☐ CUT/STAB INSTR
☐ HANDS, FEET, FIST
☐ CHEMICAL
☐ NONE
☐ OTHER

☐ Gang Related

☐ Hate Crime
Motivated By:

☐ Race

☐ Ethnicity

☐ Religion

☐ Sexual
Orientation

☐ Physical
Disability

☐ Mental
Disability

☐ Gender

CRIME

Common Name
Disorderly House

Section/Subsection

25601

Code

BP

Pertains To:

V: 1

Location (Address/Block No./Intersection)
733 San Pablo Ave.

☐ OHA

☒ ABC

Occurred

Date

Time

Day

VANDALISM

On or From

22-Oct-05

15

Sat

To

22-Oct-05

230

Sat

Reported

22 Oct 05

15

Sat

☐ EGGED
☐ BREAK WINDOW
☐ SHOOT WINDOW
☐ GRAFFITI
☐ MAIL BOX
☐ KEYING / SCRATCHING
☐ SLASH TIRES
☐ OTHER

LOSS

☒ None

TYPE OF THEFT

☐ PICKPOCKET
☐ PURSENATCH
☐ AUTO ACCESS
☐ AUTO CLOUT
☐ SHOPLIFTING
☐ BICYCLE
☐ COIN OP. DEVICE
☐ FROM BUILDING
☐ OTHER

(CHECK ALL THAT APPLY)

1 ☐ CURRENCY / NOTES
2 ☐ CLOTHING / FURS
3 ☐ JEWELRY / PRECIOUS METAL
4 ☐ FIREARMS
5 ☐ OFFICE EQUIPMENT
6 ☐ TVS, RADIO, STEREO

7 ☐ HOUSEHOLD GOODS
8 ☐ CONSUMABLE GOODS
9 ☐ LIVESTOCK
10 ☐ MOTOR VEHICLES
11 ☐ MISCELLANEOUS

U.C.R. CODE (LIST MOST EXPENSIVE ITEM ABOVE)

SOLVABILITY FACTORS (Check All That Apply)

☐ SURVEILLANCE PHOTO
☐ SERIOUS INJURY
☒ EVIDENCE
☐ SUSPECT IN-CUSTODY

☐ NAMED SUSPECT
☒ IDENTIFIABLE SUSPECT
☒ R/O REQUESTS INVEST.

☐ The VICTIM / REPORTING PARTY contacted the police department to report the THEFT / LOSS / DAMAGE of the listed property.
There are no known suspects. This report is made to alert the police. No narrative was completed.

VICTIM VEHICLE

License No.

State

☐ Secured At The Scene
☐ Released To The Owner
☐ Hold (Unit)

☐ Towed
☐ Fingerprinted
☐ Stolen

Tow Number

☐ Car
☐ Truck
☐ Other

Year

Make

Model

Body Type

Color

Vin No.

☐ Stolen
Bicycle

☐ Mens
☐ Womens

☐ Mtn.
☐ Road

Color

Brand

Model

Speed

License No.

Serial No.

PROPERTY / NARRATIVE

☐ Loss

☒ Evidence

☐ Safekeeping

☐ Recovered

Location When Stolen

☐ Interior

☐ Exterior

☐ Garage

Item Qty.

Item Type, Brand, Model No., Size, Color, Marks, Etc.

Serial No.

\$ Value

AOD and Juvenile Reporting Code
(Refer to AOD Code Card)

CRIME2: Special Events Permit Required 9.52.030 OMC

AOD

Setting
(2 Digit #)

Juvenile

Total Number Of

Vict.

Wit.

Susp.

Arr.

Phone
Report

Photos Taken

☐ Yes
☐ No

Evidence Collected

☐ Yes
☐ No

Tech:

On Scene ☐ Yes ☐ No
Tech Tag Left ☐ Yes ☐ No

Rec. Value

Loss Value

Page 1
of 5

Reported By
K. THOMAS

Serial No.
8069P

Watch
3

Area
2B

Supervisor
LT. K. MULLNIX

Serial No.

Reviewer

Serial No.

OPD
POLICE REPORT**SUSPECT
REPORT**OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

05-066051

CRIME

Disorderly House 25601 BP

INCIDENT #

60

V1

VICTIM LAST, First, Mid.

State Of California

SUSPECT		Number	LAST, First, Mid Sweet Jimmie's Club				RELATIONSHIP TO VICTIM		IN CUSTODY THIS OFFENSE <input type="checkbox"/> Yes <input type="checkbox"/> No				
SEX	RACE	D.O.B.	AGE	HEIGHT	WEIGHT	HAIR	EYES	DL. NUMBER	PFN				
HOME ADDRESS			CITY <input type="checkbox"/> OAKLAND			ZIP		APT. NO.	HOME/MSG. PHONE				
WORK ADDRESS (Name of Business) (School)			CITY <input checked="" type="checkbox"/> OAKLAND			OCCUPATION		WORK PHONE					
1733 San Pablo Ave.													
ADMONISHMENT: ADMONISHED <input type="checkbox"/> YES <input type="checkbox"/> NO REFUSED <input type="checkbox"/> YES <input type="checkbox"/> NO STATEMENT <input type="checkbox"/> YES <input type="checkbox"/> NO						<input type="checkbox"/> PROBATION COUNTY _____		Officer _____					
BY: (OFFICER/DATE/TIME)						<input type="checkbox"/> PAROLE AGENT _____		<input type="checkbox"/> PAL					
DESCRIPTION PROVIDED BY		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED											
HAIR LENGTH <input type="checkbox"/> SHORT <input type="checkbox"/> MED. (HALF EAR) <input type="checkbox"/> LONG (COVER EAR) <input type="checkbox"/> COLLAR <input type="checkbox"/> SHOULDER <input type="checkbox"/> BALD/SHAVED <input type="checkbox"/> RECEEDING		HAIR STYLE <input type="checkbox"/> NATURAL / AFRO <input type="checkbox"/> BRAIDED <input type="checkbox"/> CREWCUT <input type="checkbox"/> CURLY <input type="checkbox"/> PONYTAIL <input type="checkbox"/> PUNK <input type="checkbox"/> CONSERVATIVE		FACIAL HAIR <input type="checkbox"/> NONE <input type="checkbox"/> BEARD <input type="checkbox"/> MUSTACHE <input type="checkbox"/> BEARD & MUSTACHE <input type="checkbox"/> GOATEE <input type="checkbox"/> SIDEBURNS		COMPLEXION <input type="checkbox"/> LIGHT <input type="checkbox"/> MEDIUM <input type="checkbox"/> DARK <input type="checkbox"/> FRECKLED <input type="checkbox"/> ACNE <input type="checkbox"/> POCKMARK <input type="checkbox"/> RUDDY		APPEARANCE <input type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input type="checkbox"/> UNKEMPT <input type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED <input type="checkbox"/> BIRTHMARK <input type="checkbox"/> MOLE		SPEECH <input type="checkbox"/> LOW PITCH <input type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> STUTTER <input type="checkbox"/> ACCENT TYPE _____ <input type="checkbox"/> OTHER		DEMEANOR <input type="checkbox"/> CALM <input type="checkbox"/> POLITE <input type="checkbox"/> APOLOGETIC <input type="checkbox"/> NERVOUS <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> OFFENSIVE <input type="checkbox"/> HOSTILE <input type="checkbox"/> VIOLENT	
OTHER DISTINCTIVE FEATURES		<input type="checkbox"/> BODY ODOR TYPE _____		WEAPON USED		<input type="checkbox"/> REVOLVER		<input type="checkbox"/> SEMI-AUTO PISTOL		<input type="checkbox"/> SHOTGUN		<input type="checkbox"/> RIFLE	
<input type="checkbox"/> GOLD TOOTH <input type="checkbox"/> MISSING TEETH <input type="checkbox"/> SILVER TOOTH <input type="checkbox"/> GLASSES		<input type="checkbox"/> LARGE EYES <input type="checkbox"/> MISSING LIMBS		CAL. _____ BARREL _____		<input type="checkbox"/> SAWED OFF		<input type="checkbox"/> NICKEL		<input type="checkbox"/> CUT/STAB		<input type="checkbox"/> BLUED <input type="checkbox"/> VEHICLE	

SUSPECT		Number	LAST, First, Mid				RELATIONSHIP TO VICTIM		IN CUSTODY THIS OFFENSE <input type="checkbox"/> Yes <input type="checkbox"/> No				
SEX	RACE	D.O.B.	AGE	HEIGHT	WEIGHT	HAIR	EYES	DL. NUMBER	PFN				
HOME ADDRESS			CITY <input type="checkbox"/> OAKLAND			ZIP		APT. NO.	HOME/MSG. PHONE				
WORK ADDRESS (Name of Business) (School)			CITY <input type="checkbox"/> OAKLAND			OCCUPATION		WORK PHONE					
ADMONISHMENT: ADMONISHED <input type="checkbox"/> YES <input type="checkbox"/> NO REFUSED <input type="checkbox"/> YES <input type="checkbox"/> NO STATEMENT <input type="checkbox"/> YES <input type="checkbox"/> NO						<input type="checkbox"/> PROBATION COUNTY _____		Officer _____					
BY: (OFFICER/DATE/TIME)						<input type="checkbox"/> PAROLE AGENT _____		<input type="checkbox"/> PAL					
DESCRIPTION PROVIDED BY		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED											
HAIR LENGTH <input type="checkbox"/> SHORT <input type="checkbox"/> MED. (HALF EAR) <input type="checkbox"/> LONG (COVER EAR) <input type="checkbox"/> COLLAR <input type="checkbox"/> SHOULDER <input type="checkbox"/> BALD/SHAVED <input type="checkbox"/> RECEEDING		HAIR STYLE <input type="checkbox"/> NATURAL / AFRO <input type="checkbox"/> BRAIDED <input type="checkbox"/> CREWCUT <input type="checkbox"/> CURLY <input type="checkbox"/> PONYTAIL <input type="checkbox"/> PUNK <input type="checkbox"/> CONSERVATIVE		FACIAL HAIR <input type="checkbox"/> NONE <input type="checkbox"/> BEARD <input type="checkbox"/> MUSTACHE <input type="checkbox"/> BEARD & MUSTACHE <input type="checkbox"/> GOATEE <input type="checkbox"/> SIDEBURNS		COMPLEXION <input type="checkbox"/> LIGHT <input type="checkbox"/> MEDIUM <input type="checkbox"/> DARK <input type="checkbox"/> FRECKLED <input type="checkbox"/> ACNE <input type="checkbox"/> POCKMARK <input type="checkbox"/> RUDDY		APPEARANCE <input type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input type="checkbox"/> UNKEMPT <input type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED <input type="checkbox"/> BIRTHMARK <input type="checkbox"/> MOLE		SPEECH <input type="checkbox"/> LOW PITCH <input type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> STUTTER <input type="checkbox"/> ACCENT TYPE _____ <input type="checkbox"/> OTHER		DEMEANOR <input type="checkbox"/> CALM <input type="checkbox"/> POLITE <input type="checkbox"/> APOLOGETIC <input type="checkbox"/> NERVOUS <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> OFFENSIVE <input type="checkbox"/> HOSTILE <input type="checkbox"/> VIOLENT	
OTHER DISTINCTIVE FEATURES		<input type="checkbox"/> BODY ODOR TYPE _____		WEAPON USED		<input type="checkbox"/> REVOLVER		<input type="checkbox"/> SEMI-AUTO PISTOL		<input type="checkbox"/> SHOTGUN		<input type="checkbox"/> RIFLE	
<input type="checkbox"/> GOLD TOOTH <input type="checkbox"/> MISSING TEETH <input type="checkbox"/> SILVER TOOTH <input type="checkbox"/> GLASSES		<input type="checkbox"/> LARGE EYES <input type="checkbox"/> MISSING LIMBS		CAL. _____ BARREL _____		<input type="checkbox"/> SAWED OFF		<input type="checkbox"/> NICKEL		<input type="checkbox"/> CUT/STAB		<input type="checkbox"/> BLUED <input type="checkbox"/> VEHICLE	

SUSPECT VEHICLE		VEHICLE WAS <input type="checkbox"/> SECURED AT SCENE <input type="checkbox"/> RELEASED TO OWNER		<input type="checkbox"/> TOW (#) _____ <input type="checkbox"/> FINGERPRINTED <input type="checkbox"/> HOLD (UNIT) _____		DAMAGE DETAILS, UNIQUE FEATURES		OTHER DESCRIPTION					
OWNER			ADDRESS			CITY <input type="checkbox"/> OAKLAND		ZIP	PHONE				
LIC./STATE/OR PLATE COLORS		YEAR	MAKE	MODEL	STYLE	EXTERIOR COLOR	CONDITION <input type="checkbox"/> CLEAN <input type="checkbox"/> NEW <input type="checkbox"/> DIRTY <input type="checkbox"/> POOR	INTERIOR COLOR	INTERIOR <input type="checkbox"/> CLEAN <input type="checkbox"/> ODOR <input type="checkbox"/> DIRTY <input type="checkbox"/>				
TIRES <input type="checkbox"/> STOCK <input type="checkbox"/> WIDE <input type="checkbox"/> SMALL		RIMS <input type="checkbox"/> STOCK <input type="checkbox"/> CHROME <input type="checkbox"/> MAGS <input type="checkbox"/> SPOKE		LEVEL <input type="checkbox"/> STOCK <input type="checkbox"/> LOWERED <input type="checkbox"/> RAISED <input type="checkbox"/>		ROOF <input type="checkbox"/> VINYL <input type="checkbox"/> LANDAU <input type="checkbox"/> CONV		WINDOWS <input type="checkbox"/> TINTED <input type="checkbox"/> BROKEN		SEATS <input type="checkbox"/> VINYL <input type="checkbox"/> BENCH <input type="checkbox"/> CLOTH <input type="checkbox"/> BUCKET		TRANSMISSION <input type="checkbox"/> AUTOMATIC <input type="checkbox"/> MANUAL	

REPORTED BY
K. THOMASSERIAL #
8069PWATCH
3DISTRICT
2B

SUPERVISOR

SERIAL #

PAGE 2 OF 4

OPD

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #
05-066051

CRIME Disorderly House 25601 BP	INCIDENT # 60	V 1	VICTIM LAST, First, Mid. State Of California
SUSPECT LAST, First, Mid. Sweet Jimmie's Club	INCIDENT LOCATION 1733 San Pablo Ave.	DATE OF THIS REPORT 23 Oct 05	ORIGINAL DATE REPORTED

ITEM	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC.	SERIAL #	VALUE
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NARRATIVE: On 21 Oct 05, I (3L72) was assigned as a patrol supervisor dressed in full police uniform, driving fully marked OPD veh #1243. I responded to the area of "Sweet Jimmies" Club, 1733 San Pablo Ave. at approximately 2330 hrs. I observed a large number of persons outside the club on both sidewalks, and in the street, and heavy traffic on San Pablo Ave. I knew from prior intel that the rapper "Keith the Sneak" was performing at the club and that they were expecting a near capacity crowd. Capacity for Sweet Jimmies was reported to be approximately 500 persons, and Jimmies security estimated that approximately 400-500 people would attend the event. I observed a long line of several dozen persons waiting to get inside the club. I also made an arrest for public intoxication of an individual standing just outside the club, in the lanes of traffic, who was stopping vehicles and blocking traffic, after being flagged down by internal security.

On 22 Oct 05, approximately 0010 hrs. I observed a "Sideshow" in the 1700 block of Jefferson, with multiple vehicles driving with their doors open, people hanging out and playing very loud music. I conducted a vehicle stop on one of the vehicles involved in the "Sideshow" at 18th St and Jefferson, and from my vantage point could see 18th St, San Pablo, and 17th St. were grid locked with vehicles. Based on my observations immediate action was required to preserve the peace.

I further observed approximately 200-250 people directly IFO the club, on the sidewalk to the North and South of the club, and in the streets talking to the numerous vehicle driving both North and South on San Pablo Ave. There were also larger pockets of 10-15 persons, mostly males hanging out on the various street corners across from the club. Numerous vehicles were playing very loud music, audible far in excess of 100 feet, blocking traffic, with the vehicle occupants conversing with the pedestrians. The totality of the circumstances required immediate action to preserve public safety, for both pedestrians and vehicle occupants, keep traffic flowing and keep the roadway accessible for emergency vehicles, and prevent further "Sideshow" activity.

Even though the club would not normally be shutting down for approximately 1.5 hours, the influx of people coming from the club mixed with the hundred of people already outside the club made the need for traffic control post to be established immediately. I requested all West End sideshow units to 17th St. and San Pablo Ave to conduct traffic control post, which prevented additional vehicles from entering the area around "Sweet Jimmies." I used a total of 9 officers (see detail for details) to help block and control traffic, site vehicles and pedestrians, and keep the peace IFO Sweet Jimmies Club. I also requested all Late-Tac units respond to assist with the already large crowd of people who were now standing in the roadway completely blocking all lanes of traffic at times

At approximately 0100 hrs., I observed several hundred (200-300) additional persons begin running out of "Sweet Jimmies" into the street. At Approximately 0106 hrs. OPD radio advised me that someone from inside "Sweet Jimmies" had reported that shots had been fired, and that people were fighting and trampling each other in an effort to get out of the club. I immediately requested an ERT form up at 17th St and San Pablo, and when we had enough resources we would check the club for victims. After sufficient units responded Sgt. K. Coleman and myself took approximately 15 officers into "Sweet Jimmies." As I entered the club, several dozen people were rushing out preventing ourselves from entering the club for several minutes. When enough people had been cleared out by internal security we conducted a search of the interior of the club, without locating any victims.

Reported By K. THOMAS	Serial No. 8069P	Watch 3	Area 2B	Supervisor	Serial No.	Page 3 of 3
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OPD

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #
05-066051

CRIME Disorderly House 25601 BP	π SUPPLEMENTAL	INCIDENT # 60	V 1	VICTIM LAST, First, Mid. State Of California
SUSPECT LAST, First, Mid. Sweet Jimmie's Club	INCIDENT LOCATION 1733 San Pablo Ave.	DATE OF THIS REPORT 23 Oct 05	ORIGINAL DATE REPORTED	

ITEM	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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NARRATIVE CONT: Inside the club, I observed numerous tables turned upside down and the interior to be rather littered with broken cups, flyers, discs and spilled drinks, but was told that except for the tables, that it was normal after a large party. As we began to leave out of the front door to clear the crowd IFO, several people began to rush back inside the club, screaming that they were shooting outside. The officers stationed outside the front door during this time heard approximately one gunshot, confirming what the patrons were saying. As we exited people were running everywhere, and the scene was one of chaos. "Sweet Jimmies" internal security began to clear the sidewalks and I instructed the officers to hold IFO the club, and give the people a chance to leave on their own, in order to not provoke the crowd or incite anyone. After several minutes Sgt. Coleman, formed a skirmish line and cleared W/B 18th St., and San Pablo N/B on the West curb, while I formed a skirmish line and cleared out E/B 18th St and N/B San Pablo on the East curb. Several arrest were made for public intoxication, as we encountered several highly intoxicated people just outside the club, and one as she was coming out of the club. Numerous vehicles performed numerous dangerous driving violations as they left the area including, speeding, unsafe starting, and reckless driving.

As my "Sideshow" units controlled the crowd directly around Sweet Jimmies numerous vehicles began to drive recklessly and play their car stereos very loudly just outside of our traffic control posts. Myself as well as several of my units responded to the area of 19th St. and San Pablo to the liquor store, as well as the Chevron Gas Station at 18th St and Castro St., to break up the "Sideshows" which had formed at each location. All the units were then required to go to Nations Hamburgers in the 300 block of Broadway to disperse a very large crowd, many who had just left "Sweet Jimmies," including several I had personally given citations to earlier at 18th St. and Jefferson St.

Based on my observations, Sweet Jimmies was directly responsible for the attractable nuisance of the very large crowd and traffic. Sweet Jimmies security was unable to control the large number of patrons once they left the club. This group committed numerous vehicular violations, pedestrian violations, played loud music, and endangered the safety of the citizens of Oakland by, congregating in the street, fighting, reckless driving and preventing emergency vehicles from being able to traverse San Pablo Ave. safely. For the above reasons Sweet Jimmies Club, located at 1733 San Pablo Ave., is in violation of 25601 PB, Disorderly House and should have also been required to obtain a special events permit, due to the nature of the event, the amount of advertising, the number of people expected, and the popularity of the individual, a violation of 9.52.030 OMC.

See numerous supplementals for additional details.

The following officers were used for the following times;

- 4L1 - 0015-0230 hrs. (Ofc. F. Gysin)
- 4A2 - 0030-0230 hrs. (Ofc. C. Johnson / Ofc. S. Seder)
- 4A3 - 0015 -0150 hrs. (Ofc. Trenkamp / Ofc. D. Chimpky)
- 4L4 - 0015-0230 hrs. (Ofc. Kemmitt)
- 4A4 - 0115-0230 hrs. (Ofc. D. Jim / Ofc. L. Ausmus)
- 4L6 - 0110-0230 hrs. (Ofc. S. Bowling)

Reported By K. THOMAS	Serial No. 8069P	Watch 3	Area 2B	Supervisor	Serial No.	Page 4 of 4
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OPD

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #
05-066051

CRIME Disorderly House 25601 BP	π SUPPLEMENTAL	INCIDENT # 60	V 1	VICTIM LAST, First, Mid. State Of California
SUSPECT LAST, First, Mid. Sweet Jimmie's Club	INCIDENT LOCATION 1733 San Pablo Ave.		DATE OF THIS REPORT 23 Oct 05	ORIGINAL DATE REPORTED

ITEM	QNTY	PROPERTY (and/or) NARRATIVE ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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NARRATIVE CONT: Sweet Jimmies directly required and used a total of 15.25 officer hours and 2.25 Sgt. hrs. for myself. This figure does not take into account the Late-Tac squad, and patrol units who were also required to respond and assist.

I was unable to videotaped "Sweet Jimmies" club.

A reported shooting took place at 1901 San Pablo, approximately 0130 hrs., which may have been related to "Sweet Jimmies." See report RD# 05-066065 by Officer M Trenkamp for details.

A reported assault victim [REDACTED] suffered several lacerations to his face, sustained while at "Sweet Jimmies," but additional information was not available from him as he went unconscious at Summit Hospital. See OPD RD#05-066061 for additional details. I later spoke to the subjects step-mother who stated [REDACTED] suffered 7 staples and 13 stiches to his face, but that he was doing better and was out of the hospital. I requested she have [REDACTED] contact OPD Investigations to complete a statement about the incident as no one was able to take oen the night of the attack.

Watch Commander E. Breshers was advised of the incident.

Reported By K. THOMAS	Serial No. 8069P	Watch 3	Area 2B	Supervisor	Serial No.	Page 5 of 5
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OPD

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

05-066051

CRIME 5601 B&P	<input type="checkbox"/> SUPPLEMENTAL	INCIDENT # 60	V 1	VICTIM LAST, First, Mid.
SUSPECT LAST, First, Mid. "Sweet Jimmy's"	INCIDENT LOCATION 1733 San Pablo		DATE OF THIS REPORT 22 Oct 05	ORIGINAL DATE REPORTED

ITEM	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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Summary:

On 22 Oct 05, approximately 0010 hours, I was working call sign 1L71, dressed in full police uniform and driving fully marked OPD vehicle #1236. I was driving in the 1700 block of San Pablo checking on the clubs.

I observed approximately 200 - 250 people standing in the street IFO Sweet Jimmy's club (1733 San Pablo), blocking the flow of traffic. There were numerous vehicles in the 1700 block of San Pablo that were playing their music loud that could be heard from over 100 feet away, and unable to proceed Northbound on San Pablo due to the large crowd in the street, and the people leaning into vehicles and talking to the occupants of vehicles.

Sgt Thomas arrived on the scene with his squad to monitor the crowd and to clear the traffic. At approximately 0100 hours, we were at 17th St. / San Pablo, when we observed numerous people running out of the club and into the street, away from the club. A short time later, OPD radio advised that there was a shooting that occurred inside Sweet Jimmy's club.

Sgt Thomas and Sgt Coleman, with their squads assembled, went into the club to ascertain if there were any victims. I remained at 17th St to guard the police vehicles from getting vandalized and monitor the crowd of people that remained in the street and on the sidewalks.

At approximately 0135 hours, I heard one gunshot come from the area of Sweet Jimmy's club. I observed numerous people again run in all directions away from the club where the shot came from. Nobody flagged me down or advised me of anyone shooting.

I remained on the scene until approximately 0200 hours.

OPD ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

05-066051

CRIME 25601 BP	SUPPLEMENTAL	INCIDENT # 60	V1	VICTIM LAST, First, Mid. SOC / City, of Oakland
REPORT LAST, First Mid. "Sweet Jimmie's"	INCIDENT LOCATION 1700 B/LC SAN PABLO	DATE OF THIS REPORT 22 OCTOS	ORIGINAL DATE REPORTED	

ITEM #	QNTY.	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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ON 22 OCTOS AT APPROX 0015 HRS, I WAS WORKING AS SIDESTHOW DETAIL 414. I RESPONDED TO THE AREA OF SWEET JIMMIE'S LOCATED AT 17th AND SAN PABLO.

WHILE THERE, I WITNESSED APPROX FIVE HUNDRED VEHICLE'S CIRCLING THE CLUB. I WAS INSTRUCTED BY SGT. R. THOMAS TO BLOCK OFF TRAFFIC PREVENTING ANY MORE VEHICLE'S FROM ENTERING THE SURROUNDING STREETS AROUND THE CLUB.

THERE WERE NUMEROUS PEOPLE WALKING THROUGHOUT THE STREET AND STANDING IN THE MIDDLE OF THE STREET GATHERING CAUSING A TRAFFIC HAZARD.

AT APPROX 0130 HRS, DISPATCH STATED THAT THEY RECEIVED A PHONE CALL FROM A CALLER STATING THAT THERE HAD BEEN A SHOOTING INSIDE THE CLUB. WE ENTERED THE CLUB IN SEARCH OF ANY POSSIBLE VICTIMS. WHILE WE WERE IN THE CLUB, NUMEROUS INDIVIDUALS REMAINED IN THE CLUB CONTINUING TO DRINK ALCOHOLIC BEVERAGES AND REFUSING TO LEAVE WHEN ASKED.

I EXITED THE CLUB AFTER FINDING NO VICTIMS. I OBSERVED A MB DRINKING FROM AN OPEN BOTTLE OF LIQUOR. I PLACED THAT SUBJECT IN CUSTODY AND TRANSPORTED HIM TO NORTH COUNTY JAIL FOR PUBLIC INTOXICATION.

I RESPONDED TO ACH (WHERE I SPOKE W/ V#1 SAAD WHO HAD BEEN SHOT OUTSIDE SWEET JIMMIE'S).

REPORTED BY D. Hemmatt	SERIAL # 84259	WATCH 3	DISTRICT 2	SUPERVISOR SGT. R. THOMAS	SERIAL #	PAGE 1 OF 1
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OPD **ADDITIONAL INFORMATION REPORT**

OAKLAND POLICE DEPARTMENT
 455 - 7th Street
 Oakland, CA 94607

RD #

OS-066051

CRIME 25601 BP	<input checked="" type="checkbox"/> SUPPLEMENTAL	INCIDENT # 60	V1	VICTIM LAST, First, Mid. SOL / Cpt of Oakland
REPORT LAST, First, Mid. "Sweet Jimmies"	INCIDENT LOCATION 1719 SAN PABLO	DATE OF THIS REPORT 22 Oct 05	ORIGINAL DATE REPORTED	

ITEM #	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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SUPPLEMENTAL

ON 22 Oct 05 AT APP. 0015 HOURS I WAS WORKING AS UNIT 4601. I WAS IN FULL POLICE UNIFORM DRIVING MARKER CAR #1073. I RESPONDED TO 17th ST & SAN PABLO TO ASSIST UNITS IN TRAFFIC & CROWD CONTROL.

I PLACED FLARES ON JEFFERSON ST, CLAY ST & SAN PABLO HWY. THE FLARES WERE PLACED TO REDUCE THE AMOUNT OF VEHICLE TRAFFIC. SOME FEW CARS STILL DROVE PAST OVER THE FLARES, THOUGH THE CONES OR AROUND THE FULLY MARKED PATROL CAR THAT WERE PLACED TO CLOSE THE STREETS OFF.

A CROWD OF ABOUT 200 PEOPLE WERE STANDING IFO. SWEET JIMMIES. SUDDENLY THE CLUB STARTED TO EMPTY DUE TO GUN SHOTS HEARD INSIDE THE PREMISES. HUNDREDS OF CUSTOMERS FROM SWEET JIMMIE'S GATHERED IN THE MIDDLE OF THE STREET.

WE MADE A WALK THROUGH & CLEARED THE REMAINING PEOPLE. WE ALSO CLEARED THE STREETS MAKING VARIOUS APPEAL FOR PUBLIC INTOXICATION & OPEN ALCOHOLIC BEVERAGES IN PUBLIC.

WE RETURNED TO TRAFFIC CONTROL POS TO CLEAR THE AREA OF THE HUNDREDS OF CARS THAT WERE TRYING TO START A SIDE SHOW.

REPORTED BY F. CYSIN	SERIAL # 8589F	WATCH 3	DISTRICT 1	SUPERVISOR SGT. RIBBS	SERIAL # 7553P	PAGE 1 OF 1
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OPD **ADDITIONAL INFORMATION REPORT**

OAKLAND POLICE DEPARTMENT
 455 - 7th Street
 Oakland, CA 94607

RD #

05-066051

CRIME 25601 BP	<input type="checkbox"/> SUPPLEMENTAL	INCIDENT # 060	V1	VICTIM LAST, First, Mid. SOL / City of Oakland
SPECT LAST, First, Mid. 'Sweet Jimmies'	INCIDENT LOCATION 1700 BLK SAN PABLO	DATE OF THIS REPORT 02/05/05	ORIGINAL DATE REPORTED	

ITEM #	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
<p><u>Summary:</u></p> <p>ON 02/05/05, AT ABOUT 0030, I WAS WORKING AS ORD PATROL UNIT 4A2 W/DFC S. SEDER 8532P. WE WERE WORKING AS A SIDESHOW TRAFFIC UNIT AND WERE ADVISED TO BLOCK E/B TRAFFIC ON 17TH ST FROM SAN PABLO.</p> <p>ONCE AT OUR TRAFFIC POST I OBSERVED ABOUT 100-200 VEHICLES RUNNING RED LIGHTS, HARKING OUT OF MOVING VEHICLES, & IMP/ TRAFFIC. I ALSO NOTICED ABOUT 100-300 PEOPLE IN THE MIDDLE OF THE STREETS & SIDEWALKS. AS WE WERE AT OUR TRAFFIC POST AT ABOUT 0105 I NOTICED HUNDREDS OF PEOPLE RUNNING OUT OF SWEET JIMMIE'S SAYING THEIR SHOOTING IN THEIR. AFTER SEEING THE PEOPLE RUN OUT OF THE CLUB A CALL CAME INTO DISPATCH FROM INSIDE THE CLUB SAYING THAT SOMEONE WAS SHOT.</p> <p>AFTER LEAVING THE CLUB WE WERE DIRECTED TO CONDUCT TRAFFIC ENF/ IN AND AROUND THE CLUB. UPON CONDUCTING TRAFFIC ENF/ WE NOTICED NUMEROUS TRAFFIC VIOLATIONS AND WROTE MULTIPLE TRAFFIC CITES. I ALSO NOTICED THAT THE VEHICLE TRAFFIC WAS VERY THICK AND SLOW MOVING.</p>				

REPORTED BY C. JOHNSON	SERIAL # 8517P	WATCH 3	DISTRICT 1	SUPERVISOR SGT L. RIGGS	SERIAL # 7553P	PAGE 1 OF 1
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ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

OS-066051

CRIME 25601 88	SUPPLEMENTAL	INCIDENT # 60	V1	VICTIM LAST, First, Mid. Soc / City of Oakland
SUSPECT LAST, First, Mid. "Sweet Jimmie"	INCIDENT LOCATION 1733 San Pablo	DATE OF THIS REPORT 22 OCT 05	ORIGINAL DATE REPORTED	

ITEM #	QNTY.	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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SUPPLEMENTAL SUMMARY:

ON 22 OCT 05 AT ABOUT 0115 HRS OFC. D. JIM BISHOP AND I WERE ASSIGNED TO PATROL WORKING ON SPECIAL ASSIGNMENT AT SWEET JIMMIES AT 1700 BLK OF SAN PABLO AVE AS UNIT 4AS. WE WERE IN FULL POLICE UNIFORM (CLASS B) DRIVING FULLY MARKED PATROL VEHICLE 1126.

WE INITIALLY WERE DIRECTED TO CONDUCT A TRAFFIC CONTROL POST AT ABOUT 0115 HRS.

WHILE RESPONDING RADIO PUT OUT A SHOOTING (2450 (2) P/L) ON THE SECOND FLOOR.

WE WERE CLEARING OUT THE CROWD WE OBSERVED PEOPLE DRINKING IN PUBLIC, FIGHTING, CARS MAKING MULTIPLE VEHICLE VIOLATIONS, AND PEOPLE REFUSING TO LEAVE THE CLUBS. WE WERE ABLE TO RESTORE ORDER AT ABOUT 0230 HRS.

REPORTED BY

1. AHSMP

SERIAL #

001A

WATCH

3

DISTRICT

5A

SUPERVISOR

SGT. GUTTERMAN

SERIAL #

7130

PAGE

OF

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O P D **ADDITIONAL INFORMATION REPORT**

OAKLAND POLICE DEPARTMENT
 455 - 7th Street
 Oakland, CA 94607

RD #

05-066051

CRIME 25601 BP	SUPPLEMENTAL	INCIDENT # 60	V1	VICTIM LAST, First, Mid. SDC	CITY OF OAKLAND
OBJECT LAST, First, Mid. Sweet Jimmies	INCIDENT LOCATION 1733 San Pablo	DATE OF THIS REPORT 22 OCTOS	ORIGINAL DATE REPORTED		

ITEM #	QNTY.	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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SUMMARY:
 ON 22 OCTOS, AT ABOUT 0110, I RESPONDED TO "SWEET JIMMIE'S" NIGHTCLUB TO INVESTIGATE A REPORT OF GUNSHOTS. UPON ARRIVAL, I OBSERVED A LARGE UNRULY CROWD STANDING OUT FRO THE CLUB. I ALSO OBSERVED A LARGE MASS OF PATRONS EXITING THE CLUB VERY QUICKLY.
 AS I WALKED IN THE 1700-1800 BLK. OF SAN PABLO, I OBSERVED SEVERAL PEOPLE W/ OPEN CONTAINERS OF LIQUOR WALKING AROUND IN THE STREET AND NUMEROUS CARS PLAYING EXCESSIVELY LOUD MUSIC.
 I WAS DIRECTED TO TAKE UP A TEP AT 19TH ST. & JEFFERSON, WHERE I STAYED UNTIL THE UNRULY CROWD WAS FINALLY DISPERSED AT ABOUT 0230.

REPORTED BY

S. ROWLINT

SERIAL #

8411P

WATCH

3

DISTRICT

6

SUPERVISOR

SGT. E. LEWIS

SERIAL #

PAGE

OF

1

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD # 05-066051

CRIME 25601 BPR	SUPPLEMENTAL	INCIDENT # 60	V1	VICTIM LAST, First, Mid. SOC / City of Oakland
SPECT LAST, First Mid. Sweet Jimmy's	INCIDENT LOCATION 1733 San Pablo	DATE OF THIS REPORT 22 OCT 05	ORIGINAL DATE REPORTED	

ITEM #	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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SUPPLEMENTAL:

ON 22 OCT 05 AT ABOUT 0045 HRS I WAS WORKING AS OPD LATE TAC UNIT 5521 WITH MY PARTNER OFFICER H. NGUYEN 5569. AT THIS TIME WE RESPONDED TO THE AREA OF SWEET JIMMY'S TO ASSIST WITH CROWD CONTROL. UPON ARRIVAL WE MET WITH SGT. K. COLEMAN WHO TOLD US TO USE OUR PATROL CAR AND BLOCK THE NORTH ENTRANCE TO THE CHEVRON STATION AT 1700 CASTRO.

WHILE ON THIS ASSIGNMENT WE WERE FLAGGED DOWN ON A HIT AND RUN. I TOOK A REPORT FOR THIS INCIDENT.

ALSO WHILE ON THIS ASSIGNMENT WE WROTE TWO CITATIONS ONE FOR 27007 VC (LOUD MUSIC) AND 16028 VC (NO INSURANCE) AND THE OTHER FOR 12500 VC (NO LICENSE), 27007 VC (LOUD MUSIC), AND 16028 VC (NO INSURANCE).

WE CLEARED THE SCENE AT 0230 HRS.

REPORTED BY S. SANG	SERIAL # 6543P	WATCH 1	DISTRICT B	SUPERVISOR SGT D. HOPKINSON	SERIAL #	PAGE	OF
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OS-06651

081 00408

O P D **ADDITIONAL INFORMATION REPORT**

OAKLAND POLICE DEPARTMENT
 455 - 7th Street
 Oakland, CA 94607

RD #

04-105235

CRIME BATTERY / FIREFIGHTER	CR SUPPLEMENTAL 2436 PC	INCIDENT # 612	V1	VICTIM LAST, First, Mid. K. KEMKE
CT LAST, First Mid. MOSES, RONNIE	INCIDENT LOCATION 1FO 1731 SAN PABLO	DATE OF THIS REPORT 04SEP04	ORIGINAL DATE REPORTED 04SEP04	

ITEM #	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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Summary:

On 4 Sep 04 at 1230 hrs, I responded to Summit Hospital for a hospital guard of S1 Moses. Upon arrival, I met with Off. P. Gall who also stayed at the hospital with me to guard S1. The nurse at Summit Hospital advised me that S1 had a critically low level of sugar in his system and that if he was not treated immediately, the condition would be fatal. I advised Sgt. Cronin of S1's condition. Due to S1's medical condition, S1 was released at Summit Hospital pending further investigation.

REPORTED BY H. Nguyen	SERIAL # 8416P	WATCH 2	DISTRICT 0	SUPERVISOR Sgt. Raza	SERIAL #	PAGE 1 OF 1
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04-105235

REPORTED BY K. B. HOTEL HO 82704	SERIAL # 2	WATCH 3	DISTRICT	SUPERVISOR SGT. THOMAS	SERIAL #	PAGE 6 OF 1
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OPD

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD # 04-105235

CRIME BATTERY/FIREFIGHTER 243b PC	<input checked="" type="checkbox"/> SUPPLEMENTAL	INCIDENT # 612	V 1	VICTIM LAST, First, Mid. K. KEMKE
REPORT LAST, First, Mid. MOSES, RON	INCIDENT LOCATION 1700 BLK OF SAN PABLO AVE.		DATE OF THIS REPORT 04SEP04	ORIGINAL DATE REPORTED

ITEM	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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SUPPLEMENTAL:

On 04SEP04, at about 1152hrs, I was working OPD Patrol Unit 2A6 with Ofc. O. Saeparn, 8513P. We responded to the 1700 BLK of San Pablo Avenue (IFO Sweet Jimmie's) to assist OPD Units with a violent 5150 Call. Upon arrival, I observed Sgt. Larson, Ofc. Reed, OPD Fire and AMR paramedics attempting to control a M/B later identified as S1 Moses, Ron.

I observed that Moses was sitting down on the ground, of the west curb line handcuffed. I saw that he was still aggressive, despite the attempts of Officers to trying to calm him down. Moses continued to shout obscenities towards units on scene. Once we had enough units on scene, we attempted to place Moses on a gurney for medical transport. My partner, Ofc. Saeparn and additional units requested that Moses stand up on his first so that he could be placed on the gurney. Once Moses was on his feet, he began violently kicking towards Officers. So utilizing an authorized pain compliance technique, I learned from the OPD basic Academy, I grabbed a hold of Moses' right and left mandible with both of my hands. I applied reasonable amount of force to control him and at the same time I told him to relax and calm down. As I held his mandible, Ofc. Saeparn held down his legs to prevent him from kicking. Moses was then strapped down to the gurney by AMR and OFD without further incident. At no point did my partner and I strike or hit Moses.

Afterwards, myself and Ofc. Saeparn was directed by Sgt. Larson to take written statements from witnesses regarding the incident.

Ofc. Saeparn contacted OFD Kemke, Kirk and took a signed statement from him. (See statement for details.)

I met with OFD Martinez, Ron and I took a signed statement from him. (See statement for details.)

Reported By M. SEVILLA	Serial No. 8599P	Watch 2	Area 1	Supervisor SGT. D. CRONIN	Serial No. 7952P	Page / of /
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OPD **ADDITIONAL INFORMATION REPORT**

OAKLAND POLICE DEPARTMENT
 455 - 7th Street
 Oakland, CA 94607

RD #

04-105835

CRIME BATTERY/FIREFIGHTER 243b7C	<input checked="" type="checkbox"/> SUPPLEMENTAL	INCIDENT # 612	V1	VICTIM LAST, First, Mid. K. KEMKE
ECT LAST, First Mid. MOSES, RONNIE	INCIDENT LOCATION 1FO 1731 SAN PABLO		DATE OF THIS REPORT 04 SEP 04	ORIGINAL DATE REPORTED 04 SEP 04

ITEM #	QNTY.	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC.	SERIAL #	VALUE
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Details:

On 4 Sep 04 at about 1152 HRS, I was working a special assignment as 4217. 4L70 (Sgt D. Larson) advised that he had made a walking stop on a potential violent 5150 and requested a cover unit.

On my arrival I observed Sgt Larson and a MB standing next to Sgt Larson's patrol vehicle. I observed Sgt Larson what appeared to be giving commands to the Subject. The Subject appeared agitated.

I exited my patrol vehicle to assist Sgt Larson. I grabbed the Subject's right hand and placed a "control hold (bent wrist)" that I was taught in the police academy. The Subject still was ^{not} complying with the command to place his hands behind his back.

As I was attempting to get the Subject to comply with the commands, Sgt Larson placed the Subject in a Control hold.

Sgt Larson kept the hold on the Subject until he stopped moving. The Subject was lying on the trunk of the patrol vehicle.

Handcuffs were placed on the Subject. Arms & OEP were on scene.

REPORTED BY D. Reed	SERIAL # 8261P2	WATCH 1	DISTRICT D. Kelleg	SUPERVISOR	SERIAL #	PAGE ____ OF ____
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Nuisance Abatement Activity Matrix
Sweet Jimmie's Nightclub – 1731 San Pablo, Ave.

Date	RD #	Principals	Summary	DNA
14 Nov 05	05-072710	[REDACTED]	R/O flagged down by club security reporting that a F/B had threatened two other females in the club with a knife. Principal was arrested for [REDACTED] and was additionally charged with [REDACTED]	No
05 Nov 05	05-070249	[REDACTED]	R/P reported that a unknown male grabbed her buttock and was punched in the face while at the club.	No
14oct05	05-063541	[REDACTED]	Principal reported that unkown subject had broken a window on the east side of the business.	No
04 Apr 05	05-0019527	Brown Jr., David Lee	Officer's observed principal activitely fighting on the street. Principal was arrested for [REDACTED]	No
23 Jan 05	05-004551	John Doe, AKA Moszgi, Kibron	Officer observed principal walking in and out of traffic in the 1700 blk of San Pablo. Principal arrested for [REDACTED]	No
27 Dec 04	04-133968	Whisenton, Harold J.	R/O's flagged down ifo location regarding a fight inside and outside of the club. Principal was fighting with security and staff. Principal was arrested for [REDACTED]	No

04 Sep 04	04-105235	Moses, Ronnie	R/O observed OFD trying to give medical attention to principal. Principal was agitated and struck an OFD firefighter. Principal was arrested for [REDACTED]	No
31 Aug 04	04-104495	[REDACTED]	R/O responded to location to investigate report of principal violating a T.R.O.	No
10 Mar 04	04-024505	[REDACTED]	Principal approached R/O working special detail at location and reported that he had been shot in the abdomen.	No
01 Jan 04	04-000062	Hill, Kenneth Edward	Officers observed a M/B arguing with security of location. Security wanted principal to leave the club. Principal was arrested for [REDACTED] [REDACTED] [REDACTED]	No
04 Aug 03	03-070014 070015 070016	[REDACTED]	Officers responded to location to investigate a possible 242 PC	No
04 Jul 03	03-068919	[REDACTED] Richardson, Robinon Al	Officers responded to location to investigate a possible sexual battery between principal, both employees of club.	No
01 Jun 03	03-051489	[REDACTED])	Officers responded to location to investigate a possible 242 PC between principals.	No
13 Jan 03	03-003743	[REDACTED]	Officers viewed a 245 shooting ifo location.	No

13 Jan 03	03-003744	Unknown	Officers responded to area to assist with a person firing gunshots in the air and possibly at people.	No
26 Jan 03	03-008083	[REDACTED]	Officers responded to location to investigate a possible 242 PC between principal and the locations security guards.	No
23 Dec 02	02-119596	Unknown	Officers responded to area around location to assist in dispersing the crowd as they are leaving the club.	No
10 Nov 02	02-106643	Unknown	Officers responded to area around location to assist in dispersing the crowd as they are leaving the club.	No
09 Nov 02	02-106214	Unknown	Officers responded to location to investigate a burglary.	No
27 Oct 02	02-102158	Holmes, Leondre	Officer working at location cited principal for [REDACTED]	No

CRIME REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th STREET
OAKLAND, CA 94607-3985

Assign To:

VICE

RD #

05-072701

ROUTING
CID

- ☐ YSS
☐ VICE
☐ CSD
☐ TRAFFIC
☐ D.A.
VIC/WIT

Outside Reporting Agency

Case No.

Police Beat

CP Beat

Incident No.

VICTIM 1

Last, First, Mid

☐ Business Name

☒ Local / State / Federal

Sex

Race

D.O.B.

Age

STATE OF CALIFORNIA

Home Address

City

☐ Oakland

State / Zip

Home/Msg. Phone

()

Business Address / School

City

☐ Oakland

State / Zip

Work Phone

()

Occupation

D.L. No.

State

☐ Domestic Violence

☐ Victim Injured

☐ Resource Info Provided

Working Hours

☐ Victim's Support

☐ Sex Assault Victim Request Conference

ADDITIONAL
PERSON

☒ R/P

☐ Parent

☐ Witness 1

Last, First, Mid

R. McNeely

8568P

Sex

Race

D.O.B.

Age

Home Address

City

☐ Oakland

State / Zip

Home/Msg. Phone

()

Business Address / School

City

☐ Oakland

State / Zip

Work Phone

[REDACTED]

LOCATION

- ☐ BANK/ATM
☐ CONVENT MKT
☐ GAS STATION
☐ OTHER COMM.
☐ RESIDENCE
☒ STREET
☐ MISC.

POINT OF ENTRY

- ☐ DOOR
☐ WINDOW
☐ GARAGE
☐ ADJ. PREM.
☐ VENT/SKYLIGHT
☐ OTHER

LOCATION P.O.E.

- ☐ FRONT
☐ REAR
☐ SIDE
☐ ROOF
☐ UNK.

METHOD OF ENTRY

- ☐ OPEN/UNLOCKED
☐ FORCED SCREEN
☐ CUTTING DEVICE
☐ BODY FORCE
☐ PRY TOOL
☐ CHANNEL LOCKS
☐ ATTEMPT FORCE

☐ BREAK GLASS

- ☐ REMOVE DOOR
☐ REMOVE WINDOW
☐ POSS. EMPLOYEE
☐ KEY
☐ WATER METER
☐ NONE
☐ UNK

BURGLARY

- ☐ AUTO
☐ RESIDENTIAL
☐ COMMERCIAL
☐ OTHER
☐ ALARM RESP

WEAPON USED

- ☐ FIREARM
☐ CUT/STAB INSTR
☐ HANDS, FEET, FIST
☐ CHEMICAL
☒ NONE
☐ OTHER

☐ Gang Related

☐ Hate Crime
Motivated By:

☐ Race

☐ Ethnicity

☐ Religion

☐ Sexual
Orientation

☐ Physical
Disability

☐ Mental
Disability

☐ Gender

CRIME

Common Name
POSS. OF NARCOTICS

Section/Subsection

11350 CA

Code

H/S

Pertains To:

V: 1

Location (Address/Block No./Intersection)

☐ OHA

☐ ABC

1FO 1731 SAN PABLO

LOSS

☒ None

TYPE OF THEFT

- ☐ PICKPOCKET
☐ PURSENATCH
☐ AUTO ACCESS
☐ AUTO CLOUT
☐ SHOPLIFTING
☐ BICYCLE
☐ COIN OP. DEVICE
☐ FROM BUILDING
☐ OTHER

Occurred

Date

Time

Day

VANDALISM

On or
From

14MAY05

0105

MON

To

Reported

14MAY05

0105

MON

SOLVABILITY FACTORS (Check All That Apply)

- ☐ SURVEILLANCE PHOTO
☐ SERIOUS INJURY
☐ EVIDENCE
☐ SUSPECT IN-CUSTODY
☐ NAMED SUSPECT
☐ IDENTIFIABLE SUSPECT
☐ R/O REQUESTS INVESTIGATION

U.C.R. CODE LIST MOST EXPENSIVE ITEM ABOVE)

☐ The VICTIM / REPORTING PARTY contacted the police department to report the THEFT / LOSS / DAMAGE of the listed property. There are no known suspects. This report is made to alert the police. No narrative was completed.

VICTIM
VEHICLE

License No.

State

☐ Secured at the Scene

☐ Stolen

☐ Towed

Tow No.

☐ Released to the Owner

☐ Fingerprinted

☐ Hold (Unit)

☐ Car

Year

Make

Model

Body Type

Color

Vin No.

☐ Truck

☐ Other

☐ Stolen

☐ Mens

☐ Mtn.

Color

Brand

Model

Speed

License No.

Serial No.

PROPERTY /
NARRATIVE

☐ Loss

☒ Evidence

☐ Safekeeping

☐ Recovered

Location When Stolen

☐ Interior

☐ Exterior

☐ Garage

Item Qty.

Item Type, Brand, Model No., Size, Color, Marks, Etc.

Serial No.

\$ Value

1 1 HARD WHITE SUBSTANCE SUSPECTED TO BE ROCK COCAINE FOUND BY AL. C.

DEPUTY C. ROPACZ #1655 AT AL. CO. NORTH COUNTY JAIL INSIDE

SUSPECT OWNER'S BLOUSE RECOVERED BY CPL. MCNEELY AND TAKEN TO

OPD CRIMINALISTICS LAB.

Total Number of

Vict. Wrt. Susp. Arr. Photos Taken Evidence Collected Tech: On Scene ☐ Yes ☒ No Tag Left ☐ Yes ☒ No Recovered Value Loss Value Page 1 of 3

Reported By Serial No. Watch Area Supervisor Serial No. Reviewer Serial No.

R. McNeely 8568 0 3 SGT. ROMAN 804 S. + K. Thuman 8049

OPD

POLICE REPORT

SUSPECT REPORT

Oakland Police Department
455 - 7th Street
Oakland, CA 94607

RD #

OS-072701

CRIME 1135069 H/S	INCIDENT NO. 0038	V1	VICTIM LAST, First, Mid. STATE OF CALIFORNIA
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SUSPECT		Number 1	LAST, First, Mid. OWENS, AMINAH ESHE			RELATIONSHIP TO VICTIM None	INCUSTODY THIS OFFENSE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
SEX F	RACE B	D.O.B. [REDACTED]	AGE [REDACTED]	HEIGHT 507	WEIGHT 175	HAIR BRN	EYES BRN	DL. NUMBER [REDACTED]
HOME ADDRESS [REDACTED]		CITY <input type="checkbox"/> OAKLAND		ZIP [REDACTED]	APT. NO. [REDACTED]		HOME /MSG. PHONE [REDACTED]	
WORK ADDRESS (Name of Business) (School) [REDACTED]		CITY <input type="checkbox"/> OAKLAND		ZIP [REDACTED]	OCCUPATION [REDACTED]		WORK PHONE ()	

ADMONISHMENT: ADMONISHED ☐ YES ☒ NO REFUSED ☐ YES ☐ NO STATEMENT ☐ YES ☐ NO ☐ PROBATION COUNTY _____ Officer _____

☐ PAROLE AGENT _____ ☐ PAL

BY: (OFFICER/DATE/TIME): _____

DESCRIPTION PROVIDE BY: CLOTHING, SCARS, MARKS, TATOOS, WORDS USED
A/O BUK SHIRT, BUK PANTS

HAIR LENGTH <input type="checkbox"/> SHORT <input type="checkbox"/> MED. (HALF EAR) <input checked="" type="checkbox"/> LONG (COVER EAR) <input type="checkbox"/> COLLAR <input type="checkbox"/> SHOULDER <input type="checkbox"/> BALD/SHAVED <input type="checkbox"/> RECEDING	HAIR STYLE <input type="checkbox"/> NATURAL / AFRO <input checked="" type="checkbox"/> BRAIDED <input type="checkbox"/> CREWCUT <input type="checkbox"/> CURLY <input type="checkbox"/> PONYTAIL <input type="checkbox"/> PUNK <input type="checkbox"/> CONSERVATIVE	FACIAL HAIR <input checked="" type="checkbox"/> NONE <input type="checkbox"/> BEARD <input type="checkbox"/> MUSTACHE <input type="checkbox"/> BEARD & MUSTACHE <input type="checkbox"/> GOATEE <input type="checkbox"/> SIDEBURNS	COMPLEXION <input type="checkbox"/> LIGHT <input checked="" type="checkbox"/> MEDIUM <input type="checkbox"/> DARK <input type="checkbox"/> ERECKLED <input type="checkbox"/> ACNE <input type="checkbox"/> ROCKMARK <input type="checkbox"/> BUDDY	APPEARANCE <input checked="" type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input type="checkbox"/> UNKEMPT <input type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED <input type="checkbox"/> BIRTHMARK <input type="checkbox"/> MOLE	SPEECH <input type="checkbox"/> LOW PITCH <input type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> STUTTER <input type="checkbox"/> ACCENT TYPE _____ <input type="checkbox"/> OTHER	DEMEANOR <input type="checkbox"/> CALM <input type="checkbox"/> POLITE <input type="checkbox"/> APOLOGETIC <input type="checkbox"/> NERVOUS <input type="checkbox"/> PROFESSIONAL <input checked="" type="checkbox"/> OFFENSIVE <input type="checkbox"/> HOSTILE <input type="checkbox"/> VIOLENT
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OTHER DISTINCTIVE FEATURES ☐ BODY ODOR TYPE _____

☐ GOLD TOOTH ☐ MISSING TEETH ☐ LARGE EYES ☐ SILVER TOOTH ☐ GLASSES ☐ MISSING LIMBS

WEAPON USED ☐ REVOLVER ☐ SEMI-AUTO PISTOL ☐ SHOTGUN ☐ RIFLE
CAL. _____ BARREL _____ ☐ SAWED OFF ☐ NICKEL ☐ BLUED
☐ BLUDGEON / CLUB ☐ HANDS / FEET ☐ ROCK / BRICK ☐ CUT / STAB ☐ VEHICLE

SUSPECT		Number	LAST, First, Mid.			RELATIONSHIP TO VICTIM	INCUSTODY THIS OFFENSE <input type="checkbox"/> YES <input type="checkbox"/> NO	
SEX	RACE	D.O.B.	AGE	HEIGHT	WEIGHT	HAIR	EYES	DL. NUMBER
HOME ADDRESS		CITY <input type="checkbox"/> OAKLAND		ZIP	APT. NO.		HOME /MSG. PHONE	
WORK ADDRESS (Name of Business) (School)		CITY <input type="checkbox"/> OAKLAND		ZIP	OCCUPATION		WORK PHONE	

ADMONISHMENT: ADMONISHED ☐ YES ☐ NO REFUSED ☐ YES ☐ NO STATEMENT ☐ YES ☐ NO ☐ PROBATION COUNTY _____ Officer _____

☐ PAROLE AGENT _____ ☐ PAL

BY: (OFFICER/DATE/TIME): _____

DESCRIPTION PROVIDE BY: CLOTHING, SCARS, MARKS, TATOOS, WORDS USED

HAIR LENGTH <input type="checkbox"/> SHORT <input type="checkbox"/> MED. (HALF EAR) <input type="checkbox"/> LONG (COVER EAR) <input type="checkbox"/> COLLAR <input type="checkbox"/> SHOULDER <input type="checkbox"/> BALD/SHAVED <input type="checkbox"/> BECEDING	HAIR STYLE <input type="checkbox"/> NATURAL / AFRO <input type="checkbox"/> BRAIDED <input type="checkbox"/> CREWCUT <input type="checkbox"/> CURLY <input type="checkbox"/> PONYTAIL <input type="checkbox"/> PUNK <input type="checkbox"/> CONSERVATIVE	FACIAL HAIR <input type="checkbox"/> NONE <input type="checkbox"/> BEARD <input type="checkbox"/> MUSTACHE <input type="checkbox"/> BEARD & MUSTACHE <input type="checkbox"/> GOATEE <input type="checkbox"/> SIDEBURNS	COMPLEXION <input type="checkbox"/> LIGHT <input type="checkbox"/> MEDIUM <input type="checkbox"/> DARK <input type="checkbox"/> ERECKLED <input type="checkbox"/> ACNE <input type="checkbox"/> ROCKMARK <input type="checkbox"/> BUDDY	APPEARANCE <input type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input type="checkbox"/> UNKEMPT <input type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED <input type="checkbox"/> BIRTHMARK <input type="checkbox"/> MOLE	SPEECH <input type="checkbox"/> LOW PITCH <input type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> STUTTER <input type="checkbox"/> ACCENT TYPE _____ <input type="checkbox"/> OTHER	DEMEANOR <input type="checkbox"/> CALM <input type="checkbox"/> POLITE <input type="checkbox"/> APOLOGETIC <input type="checkbox"/> NERVOUS <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> OFFENSIVE <input type="checkbox"/> HOSTILE
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OTHER DISTINCTIVE FEATURES ☐ BODY ODOR TYPE _____

☐ GOLD TOOTH ☐ MISSING TEETH ☐ LARGE EYES ☐ SILVER TOOTH ☐ GLASSES ☐ MISSING LIMBS

WEAPON USED ☐ REVOLVER ☐ SEMI-AUTO PISTOL ☐ SHOTGUN ☐ RIFLE
CAL. _____ BARREL _____ ☐ SAWED OFF ☐ NICKEL ☐ BLUED
☐ BLUDGEON / CLUB ☐ HANDS / FEET ☐ ROCK / BRICK ☐ CUT / STAB ☐ VEHICLE

SUSPECT VEHICLE	VEHICLE WAS <input type="checkbox"/> SECURED AT SCENE <input type="checkbox"/> RELEASED TO OWNER	<input type="checkbox"/> TOW (#) _____ <input type="checkbox"/> FINGERPRINTED <input type="checkbox"/> HOLD(UNIT) _____	DAMAGE DETAILS, UNIQUE FEATURES	OTHER DESCRIPTION
OWNER	ADDRESS CITY <input type="checkbox"/> OAKLAND ZIP PHONE			
LIC./STATE/OR PLATE COLORS	YEAR MAKE	MODEL	STYLE	EXTERIOR COLOR
TIRES <input type="checkbox"/> STOCK <input type="checkbox"/> WIDE <input type="checkbox"/> SMALL	RIMS <input type="checkbox"/> STOCK <input type="checkbox"/> CHROME <input type="checkbox"/> MAGS <input type="checkbox"/> SPOKE	LEVEL <input type="checkbox"/> STOCK <input type="checkbox"/> LOWERED <input type="checkbox"/> RAISED	ROOF <input type="checkbox"/> VINYL <input type="checkbox"/> LANDAU <input type="checkbox"/> CONV	WINDOWS <input type="checkbox"/> TINTED <input type="checkbox"/> BROKEN
SEATS <input type="checkbox"/> VINYL <input type="checkbox"/> BENCH <input type="checkbox"/> CLOTH <input type="checkbox"/> BUCKET		TRANSMISSION <input type="checkbox"/> AUTOMATIC <input type="checkbox"/> MANUAL		

REPORTED BY R. McNEELY	SERIAL # 8568	WATCH 3	DISTRICT 5	SUPERVISOR SGT ROMANS	SERIAL # 8045	PAGE 2 OF 3
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ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

05-072701

CRIME 11350(a) H-S	[] SUPPLEMENTAL	INCIDENT # 038	V1	VICTIM LAST, First, Mid. STATE OF CALIFORNIA
SUBJECT LAST, First, Mid. Owens, Aminah E.	INCIDENT LOCATION 1FO 1731 San Pablo Ave	DATE OF THIS REPORT 14 NOV 05	ORIGINAL DATE REPORTED	

ITEM #	QNTY.	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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Sonnoy.

On 14 NOV 05, at about 0105 hrs, Ofc. R. Silva-Rodriguez 8581P and I were working as special enforcement unit 4A4. We were wearing full police uniform and driving fully marked patrol vehicle #1229. We were in the area of 17TH ST and San Pablo Ave when we were flagged down by security staff at Sweet Jimmy's Night Club. Security informed us that a female black (later IDed as Aminah Owens, S-1) had threatened two other females inside the club with a knife and S-1 was now out front of the club creaking. Security directed us to S-1.

I was arguing with security. When we contacted S-1 we observed that she had a strong smell of an alcoholic beverage coming from her person. S-1 had an unsteady gait, watery/bloodshot eyes and slurred speech.

We were unable to locate any witnesses or victims inside the club that saw S-1 with the knife and security staff had misplaced the knife.

We arrested S-1 for public intoxication and placed S-1 in handcuffs.

We transported S-1 to the Alameda County Sheriff's Jail Facility, North County. While inside North County, Deputy C. Kopacz ser #1655 conducted an intake search of S-1. During the search, a small twisty containing suspected rock cocaine (evid item #1) fell out of S-1's blouse. The additional charge of Possession of a Narcotic, 11350(a) H-S was added to S-1's charges.

REPORTED BY R. M. Lohr	SERIAL # 8568P	WATCH 3	DISTRICT 5	SUPERVISOR Sgt. E. Romans	SERIAL # 8045P	PAGE 3 OF 3
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1. Defendant's True Name (Leave Blank)				Arrest No.				CONSOLIDATED ARREST REPORT Oakland Police Department			
2. Defendant's Name AMINAH ESHE OWENS				P [REDACTED]				Booking Agency 00109		Report No. 05-72701 05-6722701	
3. AKA or Nickname				Date Arrested 14 NOV 05		Time 0110		Crime Rept. Detailed to		CP Beat 4X	
4. DOB		POB CA		Height 5'07		Weight 175		Hair BLK		Eyes BLU	
5. Salient Characteristics		Clothing BLK SHIRT, BLU JEANS		License No.		State CA		Year		JAIL USE ONLY	
6. Residence Address				City <input type="checkbox"/> Oakland		State		Phone		Year Make Model Color	
7. Business Address				School		Phone ()		Towed to		Tow Tag	
8. DL or ID Card No.		Social Security No.		Occupation		Hold For		CIL No.		Serial No.	
10. Location of Arrest 1800 - SAN PABLO				Arrest Approved By Sgt K. Thomas				Serial No. 80690		Time 0150	
10. Arresting Officer R. McNEELY				Serial No. 8568		Arresting Officer R. S. [REDACTED]				Serial No. 8521	
11. Transporting Officer A/G				Serial No.		Transporting Officer				Serial No.	
12. Code Section		M/F		Court		CC		Warrant No.		CEN	
[REDACTED]		M		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]	
[REDACTED]		F		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]	
Code Section		M/F		Court		CC		Warrant No.		CEN	
[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]	
Code Section		M/F		Court		CC		Warrant No.		CEN	
[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]	
13. Signature of Person				14. Arresting Person's Name				Sex-Race-Age			
[REDACTED]				[REDACTED]				[REDACTED]			
15. Complainant's Name				Sex-Race-Age				Address			
[REDACTED]				[REDACTED]				[REDACTED]			
16. Co-Defendant				Sex-Race-Age				Co-Defendant			
[REDACTED]				[REDACTED]				[REDACTED]			
17. <input type="checkbox"/> Used a Firearm or Deadly Weapon				<input type="checkbox"/> Armed with a Firearm				Burglary Classification			
<input type="checkbox"/> Caused Great Bodily Harm				<input type="checkbox"/> Acted in Concert (261, 286, 288a PC)				[REDACTED]			
18. Instructions:				List charges by name and code section.				Complete probable cause narrative.			
• If completing an Offense or Add'l/Supp Report, DO NOT start narrative on this form.				• If suspect is arrested WITHOUT A WARRANT for an offense which occurred in another jurisdiction, identify agency, investigator's name, and report number.				• Document admonishment of arrested person.			
• Indicate if suspect is on parole or probation.				• Describe injuries or known medical problems.				• Enter "enroute (agency)" if appropriate.			
PUBLIC INTOXICATION				647(F)				[REDACTED]			
Possession of Narcotics				11350(a) HTS				[REDACTED]			
A/O WERE PLACED DOWN BY JIMMY'S NIGHT CLUB SECURITY CONCERNING OWENS				BRING HIGHLY INTOXICATED OUT IN FRONT YELLING AND CAUSING A MISTAKE. UPON				A/O CONTACTED OWENS THEN OBSID OWENS WITH BLU SHIRT WITH BLU, [REDACTED]			
W UNDER BAT, SHIRT AN ALCOHOL BOTTLE FROM BUSY AND BATT, AND				SOUND SPEAK. OWENS WAS TAKEN INTO CUSTODY AND TRANSPORTED TO				AL. CO. NORTH COUNTY JAIL. Search incident to arrest revealed			

CRIME REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th STREET
OAKLAND, CA 94607-3985

Assign To:

SVS

RD #

05-070249

ROUTING

- ☐ CID

☐ YSS
☐ VICE
☐ CSD
☐ TRAFFIC
☐ D.A.
☐ VIC/WIT

☐

☐

Outside Reporting Agency

Case No.

Police Beat

4

CP Beat

X

Incident No.

54

VICTIM 1

Last, First, Mid

☐ Business Name☐ Local / State / Federal

Sex

Race

D.O.B.

Age

Home Address

City ☐ Oakland

State / Zip

Home/Msg. Phone

Business Address / School

City ☐ Oakland

State / Zip

Work Phone

Occupation

D.L. No.

State

☐ Domestic Violence☐ Victim Injured☐ Resource Info Provided

Working Hours

☐ Victim's Support☐ Sex Assault/Victim Request Conference

ADDITIONAL PERSON

- ☐ R/P
☐ Parent
☐ Witness 1

Last, First, Mid

Sex

Race

D.O.B.

Age

Home Address

City ☐ Oakland

State / Zip

Home/Msg. Phone

Business Address / School

City ☐ Oakland

State / Zip

Work Phone

LOCATION

- ☐ BANK/ATM
☐ CONVENT MKT
☐ GAS STATION
☒ OTHER COMM.
☐ RESIDENCE
☐ STREET
☐ MISC.

POINT OF ENTRY

- ☐ DOOR
☐ WINDOW
☐ GARAGE
☐ ADJ. PREM.
☐ VENT/SKYLIGHT
☐ OTHER

LOCATION P.O.E.

- ☐ FRONT
☐ REAR
☐ SIDE
☐ ROOF
☐ UNK.

METHOD OF ENTRY

- ☐ OPEN/UNLOCKED
☐ FORCED SCREEN
☐ CUTTING DEVICE
☐ BODY FORCE
☐ PRY TOOL
☐ CHANNEL LOCKS
☐ ATTEMPT FORCE

☐ BREAK GLASS

- ☐ REMOVE DOOR
☐ REMOVE WINDOW
☐ POSS. EMPLOYEE
☐ KEY
☐ WATER METER
☐ NONE
☐ UNK

BURGLARY

- ☐ AUTO
☐ RESIDENTIAL
☐ COMMERCIAL
☐ OTHER

☐ ALARM RESP

WEAPON USED

- ☐ FIREARM
☐ CUT/STAB INSTR
☒ HANDS, FEET, FIST
☐ CHEMICAL
☐ NONE
☐ OTHER

☐ Gang Related☐ Hate Crime
Motivated By:☐ Race☐ Ethnicity☐ Religion☐ Sexual
Orientation☐ Physical
Disability☐ Mental
Disability☐ Gender

CRIME

Common Name

SEXUAL BATTERY

Section/Subsection

243.4(d)(1) P.C.

Code

Pertains To:

V: 1

Location (Address/Block No./Intersection)

☐ OHA☒ ABC

Occurred

Date

Time

Day

VANDALISM

On or From

05/10/05

0000

SAT

To

Reported

05/10/05

0400

SAT

- ☐ EGGED
☐ BREAK WINDOW
☐ SHOOT WINDOW
☐ GRAFFITI
☐ MAIL BOX
☐ KEYING / SCRATCHING
☐ SLASH TIRES
☐ OTHER

(CHECK ALL THAT APPLY)

- 1 ☐ CURRENCY / NOTES
2 ☐ CLOTHING / FURS
3 ☐ JEWELRY / PRECIOUS METAL
4 ☐ FIREARMS
5 ☐ OFFICE EQUIPMENT
6 ☐ TVS, RADIO, STEREO
- 7 ☐ HOUSEHOLD GOODS
8 ☐ CONSUMABLE GOODS
9 ☐ LIVESTOCK
10 ☐ MOTOR VEHICLES
11 ☐ MISCELLANEOUS

TYPE OF THEFT

- ☐ PICKPOCKET
☐ PURSENATCH
☐ AUTO ACCESS
☐ AUTO CLOUT
☐ SHOPLIFTING
☐ BICYCLE
☐ COIN OP. DEVICE
☐ FROM BUILDING
☐ OTHER

SOLVABILITY FACTORS (Check All That Apply)

- ☐ SURVEILLANCE PHOTO
☐ SERIOUS INJURY
☐ EVIDENCE
☐ SUSPECT IN-CUSTODY
- ☐ NAMED SUSPECT
☐ IDENTIFIABLE SUSPECT
☐ R/O REQUESTS INVESTIGATION

U.C.R. CODE LIST MOST EXPENSIVE ITEM ABOVE)

- ☐ The VICTIM / REPORTING PARTY contacted the police department to report the THEFT / LOSS / DAMAGE of the listed property. There are no known suspects.
This report is made to alert the police. No narrative was completed.

VICTIM VEHICLE

License No.

State

☐ Secured at the Scene☐ Stolen☐ Towed

Tow No.

☐ Released to the Owner☐ Fingerprinted☐ Hold (Unit)

- ☐ Car
☐ Truck
☐ Other

Year

Make

Model

Body Type

Color

Vin No.

- ☐ Stolen
Bicycle

- ☐ Mens
☐ Womens

- ☐ Mtn.
☐ Road

Color

Brand

Model

Speed

License No.

Serial No.

PROPERTY / NARRATIVE

☐ Loss☐ Evidence☐ Safekeeping☐ Recovered

Location When Stolen

☐ Interior☐ Exterior☐ Garage

Item Qty.

Item Type, Brand, Model No., Size, Color, Marks, Etc.

Serial No.

\$ Value

ADDITIONAL CHARGES

BATTERY 242 P.C.

Total Number of

Vict. Wkt. Susp. Arr.

☐ Phone
Report

Photos Taken

☐ Yes
☒ No

Evidence Collected

☐ Yes
☒ No

Tech:

On Scene

☐ Yes ☒ No

Tag Left

☐ Yes ☒ No

Recovered Value

Loss Value

Page 1

of 3

Reported By

G. HARA

Serial No.

8549P

Watch

1

Area

3

Supervisor

SGT. SHANNON

Serial No.

8067P

Reviewer

Serial No.

O P D

SUSPECT REPORT

Oakland Police Department
455 - 7th Street
Oakland, CA 94607

RD #

05-070249

E 243.4(d)(1) P.C.	INCIDENT NO. 54	V1	VICTIM LAST, FIRST, MID. [REDACTED]
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SUSPECT		Number 1	LAST, First, Mid.		RELATIONSHIP TO VICTIM NONE		INCUSTODY THIS OFFENSE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
SEX M	RACE B	D.O.B.	AGE [REDACTED]	HEIGHT 5'10"	WEIGHT 175	HAIR BLK	EYES BRN	DL. NUMBER
HOME ADDRESS				CITY <input type="checkbox"/> OAKLAND	ZIP	APT. NO.		HOME MSG. PHONE
WORK ADDRESS (Name of Business) (School)				CITY <input type="checkbox"/> OAKLAND	ZIP	OCCUPATION		WORK PHONE
ADMONISHMENT: ADMONISHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO REFUSED <input type="checkbox"/> YES <input type="checkbox"/> NO STATEMENT <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				<input type="checkbox"/> PROBATION COUNTY _____ Officer _____				
BY: (OFFICER/DATE/TIME):				<input type="checkbox"/> PAROLE AGENT _____ <input type="checkbox"/> PAL				

DESCRIPTION PROVIDE BY V1		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED WHE SHIRT W BLU PEN STRIPES, DARK PANTS					
HAIR LENGTH <input checked="" type="checkbox"/> SHORT <input type="checkbox"/> MED. (HALF EAR) <input type="checkbox"/> LONG (COVER EAR) <input type="checkbox"/> COLLAR <input type="checkbox"/> SHOULDER <input type="checkbox"/> BALD/SHAVED <input type="checkbox"/> RECEDING	HAIR STYLE <input checked="" type="checkbox"/> NATURAL / AFRO <input type="checkbox"/> BRAIDED <input type="checkbox"/> CREWCUT <input type="checkbox"/> CURLY <input type="checkbox"/> PONYTAIL <input type="checkbox"/> PUNK <input type="checkbox"/> CONSERVATIVE	FACIAL HAIR <input checked="" type="checkbox"/> NONE <input type="checkbox"/> BEARD <input type="checkbox"/> MUSTACHE <input type="checkbox"/> BEARD & MUSTACHE <input type="checkbox"/> GOATEE <input type="checkbox"/> SIDEBURNS	COMPLEXION <input type="checkbox"/> LIGHT <input checked="" type="checkbox"/> MEDIUM <input type="checkbox"/> DARK <input type="checkbox"/> ERECKLED <input type="checkbox"/> ACNE <input type="checkbox"/> ROCKMARK <input type="checkbox"/> BUDDY	APPEARANCE <input checked="" type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input type="checkbox"/> UNKEMPT <input type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED <input type="checkbox"/> BIRTHMARK <input type="checkbox"/> MOLE	SPEECH <input type="checkbox"/> LOW PITCH <input type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> STUTTER <input type="checkbox"/> ACCENT TYPE _____ <input type="checkbox"/> OTHER	DEMEANOR <input type="checkbox"/> CALM <input type="checkbox"/> POLITE <input type="checkbox"/> APOLOGETIC <input type="checkbox"/> NERVOUS <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> OFFENSIVE <input checked="" type="checkbox"/> HOSTILE <input type="checkbox"/> VIOLENT	
OTHER DISTINCTIVE FEATURES <input type="checkbox"/> GOLD TOOTH <input type="checkbox"/> MISSING TEETH <input type="checkbox"/> LARGE EYES <input type="checkbox"/> SILVER TOOTH <input type="checkbox"/> GLASSES <input type="checkbox"/> MISSING LIMBS		WEAPON USED <input type="checkbox"/> REVOLVER <input type="checkbox"/> SEMI-AUTO PISTOL <input type="checkbox"/> SHOTGUN <input type="checkbox"/> RIFLE CAL. _____ BARREL _____ <input type="checkbox"/> SAWED OFF <input type="checkbox"/> NICKEL <input type="checkbox"/> BLUED <input type="checkbox"/> BLUDGEON / CLUB <input checked="" type="checkbox"/> HANDS / FEET <input type="checkbox"/> ROCK / BRICK <input type="checkbox"/> CUT / STAB <input type="checkbox"/> VEHICLE					

SUSPECT		Number	LAST, First, Mid.		RELATIONSHIP TO VICTIM		INCUSTODY THIS OFFENSE <input type="checkbox"/> YES <input type="checkbox"/> NO	
SEX	RACE	D.O.B.	AGE	HEIGHT	WEIGHT	HAIR	EYES	DL. NUMBER
HOME ADDRESS				CITY <input type="checkbox"/> OAKLAND	ZIP	APT. NO.		HOME MSG. PHONE
WORK ADDRESS (Name of Business) (School)				CITY <input type="checkbox"/> OAKLAND	ZIP	OCCUPATION		WORK PHONE
ADMONISHMENT: ADMONISHED <input type="checkbox"/> YES <input type="checkbox"/> NO REFUSED <input type="checkbox"/> YES <input type="checkbox"/> NO STATEMENT <input type="checkbox"/> YES <input type="checkbox"/> NO				<input type="checkbox"/> PROBATION COUNTY _____ Officer _____				
BY: (OFFICER/DATE/TIME):				<input type="checkbox"/> PAROLE AGENT _____ <input type="checkbox"/> PAL				

DESCRIPTION PROVIDE BY		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED					
HAIR LENGTH <input type="checkbox"/> SHORT <input type="checkbox"/> MED. (HALF EAR) <input type="checkbox"/> LONG (COVER EAR) <input type="checkbox"/> COLLAR <input type="checkbox"/> SHOULDER <input type="checkbox"/> BALD/SHAVED <input type="checkbox"/> RECEDING	HAIR STYLE <input type="checkbox"/> NATURAL / AFRO <input type="checkbox"/> BRAIDED <input type="checkbox"/> CREWCUT <input type="checkbox"/> CURLY <input type="checkbox"/> PONYTAIL <input type="checkbox"/> PUNK <input type="checkbox"/> CONSERVATIVE	FACIAL HAIR <input type="checkbox"/> NONE <input type="checkbox"/> BEARD <input type="checkbox"/> MUSTACHE <input type="checkbox"/> BEARD & MUSTACHE <input type="checkbox"/> GOATEE <input type="checkbox"/> SIDEBURNS	COMPLEXION <input type="checkbox"/> LIGHT <input type="checkbox"/> MEDIUM <input type="checkbox"/> DARK <input type="checkbox"/> ERECKLED <input type="checkbox"/> ACNE <input type="checkbox"/> ROCKMARK <input type="checkbox"/> BUDDY	APPEARANCE <input type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input type="checkbox"/> UNKEMPT <input type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED <input type="checkbox"/> BIRTHMARK <input type="checkbox"/> MOLE	SPEECH <input type="checkbox"/> LOW PITCH <input type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> STUTTER <input type="checkbox"/> ACCENT TYPE _____ <input type="checkbox"/> OTHER	DEMEANOR <input type="checkbox"/> CALM <input type="checkbox"/> POLITE <input type="checkbox"/> APOLOGETIC <input type="checkbox"/> NERVOUS <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> OFFENSIVE <input type="checkbox"/> HOSTILE	
OTHER DISTINCTIVE FEATURES <input type="checkbox"/> GOLD TOOTH <input type="checkbox"/> MISSING TEETH <input type="checkbox"/> LARGE EYES <input type="checkbox"/> SILVER TOOTH <input type="checkbox"/> GLASSES <input type="checkbox"/> MISSING LIMBS		WEAPON USED <input type="checkbox"/> REVOLVER <input type="checkbox"/> SEMI-AUTO PISTOL <input type="checkbox"/> SHOTGUN <input type="checkbox"/> RIFLE CAL. _____ BARREL _____ <input type="checkbox"/> SAWED OFF <input type="checkbox"/> NICKEL <input type="checkbox"/> BLUED <input type="checkbox"/> BLUDGEON / CLUB <input type="checkbox"/> HANDS / FEET <input type="checkbox"/> ROCK / BRICK <input type="checkbox"/> CUT / STAB <input type="checkbox"/> VEHICLE					

SUSPECT VEHICLE		VEHICLE WAS <input type="checkbox"/> SECURED AT SCENE <input type="checkbox"/> FINGERPRINTED <input type="checkbox"/> RELEASED TO OWNER <input type="checkbox"/> HOLD(UNIT)		DAMAGE DETAILS, UNIQUE FEATURES		OTHER DESCRIPTION	
OWNER SMITH, KEVIN		ADDRESS		CITY <input type="checkbox"/> OAKLAND		ZIP	
DATE/OR PLATE COLORS		YEAR	MAKE	MODEL	STYLE V/V	EXTERIOR COLOR WHE	CONDITION <input type="checkbox"/> CLEAN <input type="checkbox"/> NEW <input type="checkbox"/> DIRTY <input type="checkbox"/> POOR
TIRES <input type="checkbox"/> STOCK <input type="checkbox"/> WIDE <input type="checkbox"/> SMALL		RIMS <input type="checkbox"/> STOCK <input type="checkbox"/> CHROME <input type="checkbox"/> MAGS <input type="checkbox"/> SPOKE	LEVEL <input type="checkbox"/> STOCK <input type="checkbox"/> LOWERED <input type="checkbox"/> RAISED	ROOF <input type="checkbox"/> VINYL <input type="checkbox"/> LANDAU <input type="checkbox"/> CONV	WINDOWS <input type="checkbox"/> TINTED <input type="checkbox"/> BROKEN	SEATS <input type="checkbox"/> VINYL <input type="checkbox"/> BENCH <input type="checkbox"/> CLOTH <input type="checkbox"/> BUCKET	INTERIOR COLOR <input type="checkbox"/> CLEAN <input type="checkbox"/> ODOR <input type="checkbox"/> DIRTY
TRANSMISSION <input type="checkbox"/> AUTOMATIC <input type="checkbox"/> MANUAL							

REPORTED BY G. HARA	SERIAL # 8549P	WATCH 1	DISTRICT 6	SUPERVISOR SGT. SHANNON	SERIAL # 8067P	PAGE 2 OF 3
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ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

05-070249

CRIME 243.4(d)(1) P.C.	<input type="checkbox"/> SUPPLEMENTAL	INCIDENT # 54	V1	VICTIM LAST, First Mid.
PECT LAST, First Mid.		INCIDENT LOCATION 577 18th ST.		DATE OF THIS REPORT 05 NOV 05
				ORIGINAL DATE REPORTED

ITEM #	QNTY.	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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SUMMARY

ON 05 NOV 05 AT ABOUT 0331 HRS. I WAS WORKING AS OPD PATROL UNIT 1A34 WITH OFC. T. DOLAN 8483P. AT APPROX. THIS TIME WE WERE DISPATCHED TO 8350 EDES AVE. TO INVESTIGATE A REPORT OF A POSSIBLE BATTERY.

ON ARRIVAL WE MET WITH [REDACTED] (VICTIM #1) WHO SAID SHE WAS AT SWEET JIMMIE'S FOR A FUNCTION. WHILE SHE WAS AT THE CLUB, SHE HAD HER BUTTOCK GRABBED BY AN UNK M-B (SUSPECT #1). AFTER EXCHANGING WORDS WITH S-1, S-1 PUNCHED [REDACTED] ABOUT 5-6 TIMES IN HER FACE WITH A CLOSED FIST. AFTER THE INCIDENT, [REDACTED] WAS DRIVING ON 5/B 880 WHEN SHE NOTICED S-1 WAS DRIVING A VAN [REDACTED] NEXT TO HER. [REDACTED] CAN IDENTIFY S-1 AND WISHES TO PRESS CHARGES AGAINST HIM FOR PUNCHING HER AND GRABBING HER BUTTOCK. (SEE [REDACTED] STATEMENT FOR DETAILS)

I OBSERVED A BRUISE ABOUT 2" IN DIAMETER ON [REDACTED] LEFT CHEEK AND A 2"x1/8" SCRATCH ON HER RT CHEEK. I WAS NOT ABLE TO HAVE PHOTOS TAKEN BECAUSE NO TECH. WERE ON DUTY AND [REDACTED] WAS TAKING A PLANE TO SAN DIEGO IN THE MORNING. ALL OF [REDACTED] FRIENDS WHO WERE PRESENT DURING THE INCIDENT WERE SLEEPING IN A MOTEL ROOM. WE WERE NOT ABLE TO SPEAK WITH THEM. [REDACTED] SAID SHE TOOK A DIGITAL PHOTO OF S-1, BUT DID NOT HAVE A HARD COPY. MY INVESTIGATION REVEALED S-1 GRABBED [REDACTED] BUTTOCK AGAINST HER WILL IN VIOLATION OF 243.4(d)(1) P.C. SEXUAL BATTERY. S-1 PUNCHED [REDACTED] IN HER FACE IN VIOLATION OF 242 P.C. BATTERY.

REPORTED BY G. HARA	SERIAL # 8549P	WATCH 1	DISTRICT 6	SUPERVISOR SGT. SHANNON	SERIAL # 8067P	PAGE 3 OF 3
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STATEMENT
Oakland Police Department

536-200-1 (6/93)

Page 1 of 2

2. Report No.

1. Complainant

Offense/Crime

05-070249

3. Name of Person Giving Statement

Sex/Race/DOB

☒ Complainant

☐ Suspect

☐ Driver

☐ Reporting Person

☐ Witness

4. Residence Address

City/Zip

Phone

5. Employment (Name, Address, Phone, Occupation, Work Hours, Days Off, or Supplemental Information if Unemployed or Transient)

6. Statement Taken By

Serial No.

Date

Time Started - Completed

T. DOLAN

0483P

5 NOV 05

0400 - 0920

7. Location Where Statement Taken

Names, Addresses of Persons Present During Statement

FOR VEHICLE COLLISIONS ONLY

8. License No.

State

Veh. Yr.

Make

Model

Type

Color(s)

Driver License No.

State

9. Registered Owner

Address

City/Zip

Residence/Business Phone

()

ADMONITION: You have the right to remain silent. Anything you say can be used against you in a court of law. You have the right to talk to a lawyer and have him present with you while you are being questioned. If you cannot afford a lawyer, one will be appointed to represent you before any questioning if you wish one.

Subject's Initials

WAIVER: Do you understand each of these rights I have explained to you?

Having these rights in mind, do you wish to talk to us now?

Statement:

MY NAME IS

TODD AT

ABOUT MIDNITE I WAS AT SWEET JIMMYS WITH MY

FRIENDS. A MALE BLACK ABOUT FIVE FOOT TEN, 175 POUNDS,

WITH BLACK HAIR AND BROWN EYES IN HIS MID TWENTIES CAME UP

BEHIND ME. HE WAS WEARING A WHITE SHIRT WITH BLUE PIN STRIPES

AND DARK PANTS. HE WAS DANCING WITH ANOTHER ONE OF MY FRIENDS

EARLIER. HE GRABBED MY REAR AND I TOLD HIM TO PLEASE

DO NOT TOUCH ME. HE CALLED ME A BITCH. I ASKED HIM WHY

HE WOULD SAY THAT. WE EXCHANGED SOME WORDS AND HE HIT ME

WITH A ~~CLOSE~~^{OPEN} CLOSED FIST ON MY FACE. SOMEONE ELSE GRABBED

ME AND PICKED ME UP. THE GUY THAT PUNCHED ME MUST HAVE HIT

ME ABOUT FIVE OR SIX TIMES. MY FRIEND WAS ALSO FIGHTING

WITH SOMEONE ELSE. MY FRIEND IS INDIAN BOSS. THINGS CALMED DOWN

AND WE LEFT FOR A FEW MINUTES. THE GUY THAT HAD HIT ME

LEFT. MY FRIENDS AND I ALL LEFT THE CLUB ABOUT A ~~MINUTE~~^{MINUTES}

WALK AFTER THE ASSAULT. WE WERE DRIVING ON THE FREEWAY

TO OUR HOTEL AND THE SAME GUY WHO HIT ME DROVE UP NEXT TO

US IN A WHITE VAN. THE PLATE

Signature of Person Giving Statement

Date

11/5/05

STATEMENT CONTINUATION
Oakland Police Department

536-200-2 (6/93)

Page 2 of 2

2. Report No.

1. Complainant

Offense/Crime

05-070249

3. Name of Person Giving Statement

Sex/Race/DOB

☒ Complainant

☐ Suspect

☐ Driver

Reporting Person

☐ Witness

STATEMENT:

ON THE VAN IS [REDACTED] HE DROVE UP RIGHT NEXT TO US
ON THE FREEWAY. HE WAS INCHES AWAY FROM OUR CAR. HE YELLED
"WHAT NOW BITCHES?" HE MUST HAVE SEEN SOMEONE IN OUR CAR
CALLING THE POLICE ON A CELL PHONE ~~BECAUSE~~ ^{BECAUSE} HE EXITED ON
THE EXIT JUST BEFORE HENNINGER RD. THE VAN THAT THE GUY WAS
DRIVING WAS SEEN IN THE AREA OF OUR HOTEL AFTER HE FOLLOWED US.
THIS IS A TRUE STATEMENT. I CAN IDENTIFY THE GUY THAT
HIT ME, BUT I CANT IDENTIFY THE GUY THAT WAS HOLDING ME
IN THE CLOS TAKEN I WAS BEING HIT. MY FACE HURTS FROM
BEING HIT. I WANT HIM ARRESTED FOR ASSAULT ME. I'M SCARED
THAT GUY HIT ME KNOWS WHERE I'M STAYING AT AND I'M
SCARED FOR HIS SAFETY.

Signature of Person Giving Statement

Date

11/05/05

CRIME REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th STREET
OAKLAND, CA 94607-3985

Assign To

Jhe

RD #

05-063541

ROUTING <input type="checkbox"/> CID <input type="checkbox"/> YSS <input type="checkbox"/> VICE <input type="checkbox"/> CSD <input type="checkbox"/> TRAFFIC <input type="checkbox"/> D.A. <input type="checkbox"/> VIC/WIT <input type="checkbox"/> <input type="checkbox"/>		Outside Reporting Agency		Case No.		Police Beat 4		CP Beat X		Incident No. 0073	
VICTIM 1		Last, First, Mid		Business Name		<input type="checkbox"/> Local / State / Federal		Sex		Race	
Home Address		City		<input type="checkbox"/> Oakland		State / Zip		Home/Msg. Phone ()		Age	
Business Address / School		City		<input type="checkbox"/> Oakland		State / Zip		Work Phone			
Occupation		D.L. No.		State		<input type="checkbox"/> Domestic Violence <input type="checkbox"/> Victim's Support		<input type="checkbox"/> Victim Injured <input type="checkbox"/> Sex Assault Victim Request Conference		<input type="checkbox"/> Resource Info Provided	
Working Hours		Last, First, Mid		Sex		Race		D.O.B.		Age	
ADDITIONAL PERSON <input type="checkbox"/> R/P <input type="checkbox"/> Parent <input type="checkbox"/> Witness 1		Last, First, Mid		City		<input checked="" type="checkbox"/> Oakland		State / Zip		Home/Msg. Phone	
Home Address		City		<input checked="" type="checkbox"/> Oakland		State / Zip		Work Phone			
Business Address / School		City		<input checked="" type="checkbox"/> Oakland		State / Zip		Work Phone			
LOCATION <input type="checkbox"/> BANK/ATM <input type="checkbox"/> CONVENT MKT <input type="checkbox"/> GAS STATION <input checked="" type="checkbox"/> OTHER COMM. <input type="checkbox"/> RESIDENCE <input type="checkbox"/> STREET <input type="checkbox"/> MISC.		POINT OF ENTRY <input type="checkbox"/> DOOR <input type="checkbox"/> WINDOW <input type="checkbox"/> GARAGE <input type="checkbox"/> ADJ. PREM. <input type="checkbox"/> VENT/SKYLIGHT <input type="checkbox"/> OTHER		LOCATION P.O.E. <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> SIDE <input type="checkbox"/> ROOF <input type="checkbox"/> UNK.		METHOD OF ENTRY <input type="checkbox"/> OPEN/UNLOCKED <input type="checkbox"/> FORCED SCREEN <input type="checkbox"/> CUTTING DEVICE <input type="checkbox"/> BODY FORCE <input type="checkbox"/> PRY TOOL <input type="checkbox"/> CHANNEL LOCKS <input type="checkbox"/> ATTEMPT FORCE		<input type="checkbox"/> BREAK GLASS <input type="checkbox"/> REMOVE DOOR <input type="checkbox"/> REMOVE WINDOW <input type="checkbox"/> POSS. EMPLOYEE <input type="checkbox"/> KEY <input type="checkbox"/> WATER METER <input type="checkbox"/> NONE <input type="checkbox"/> UNK		BURGLARY <input type="checkbox"/> AUTO <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> OTHER <input type="checkbox"/> ALARM RESP	
<input type="checkbox"/> Gang Related		<input type="checkbox"/> Hate Crime Motivated By:		<input type="checkbox"/> Race		<input type="checkbox"/> Ethnicity		<input type="checkbox"/> Religion		<input type="checkbox"/> Sexual Orientation	
<input type="checkbox"/> Physical Disability		<input type="checkbox"/> Mental Disability		<input type="checkbox"/> Gender		CRIME Common Name VANDALISM		Section/Subsection 594 (B)(2) PC		Code 1	
Location (Address/Block No./Intersection)		<input type="checkbox"/> OHA <input checked="" type="checkbox"/> ABC		Occurred		Date		Time		Day	
731 SAN PABLO AVE		None		On or From		1400TOS		0055		FR	
LOSS		TYPE OF THEFT		To		1		1		1	
(CHECK ALL THAT APPLY) 1 <input type="checkbox"/> CURRENCY / NOTES 2 <input type="checkbox"/> CLOTHING / FURS 3 <input type="checkbox"/> JEWELRY / PRECIOUS METAL 4 <input type="checkbox"/> FIREARMS 5 <input type="checkbox"/> OFFICE EQUIPMENT 6 <input type="checkbox"/> TVS, RADIO, STEREO		7 <input type="checkbox"/> HOUSEHOLD GOODS 8 <input type="checkbox"/> CONSUMABLE GOODS 9 <input type="checkbox"/> LIVESTOCK 10 <input type="checkbox"/> MOTOR VEHICLES 11 <input type="checkbox"/> MISCELLANEOUS		Reported		0220		SOLVABILITY FACTORS (Check All That Apply) <input type="checkbox"/> SURVEILLANCE PHOTO <input type="checkbox"/> SERIOUS INJURY <input type="checkbox"/> EVIDENCE <input type="checkbox"/> SUSPECT IN-CUSTODY		<input type="checkbox"/> NAMED SUSPECT <input type="checkbox"/> IDENTIFIABLE SUSPECT <input type="checkbox"/> R/O REQUESTS INVESTIGATION	
U.C.R. CODE		LIST MOST EXPENSIVE ITEM ABOVE)		The VICTIM / REPORTING PARTY contacted the police department to report the THEFT / LOSS / DAMAGE of the listed property. There are no known suspects. This report is made to alert the police. No narrative was completed.		Secured at the Scene		Stolen		Towed	
VICTIM VEHICLE		License No.		State		Released to the Owner		Fingerprinted		Hold (Unit)	
Car		Year		Make		Model		Body Type		Color	
Truck		Mens		Mtn.		Color		Brand		Model	
Other		Womens		Road		Speed		License No.		Serial No.	
Stolen Bicycle		Loss		Evidence		Safekeeping		Recovered		Location When Stolen	
PROPERTY / NARRATIVE		Interior		Exterior		Garage		Serial No.		\$ Value	
Item Qty.		Item Type, Brand, Model No., Size, Color, Marks, Etc.		Serial No.		\$ Value		NARRATIVE: COMP. REPORTS AN UNKNOWN SUBJECT BROKE A WINDOW ON THE EAST SIDE OF HIS BUSINESS WITH AN UNKNOWN OBJECT SOME TIME DURING ABOVE TIME. OBS. A BROKEN WINDOW.			
Total Number of		Phone Report		Photos Taken		Evidence Collected		Tech: On Scene		Recovered Value	
Vict. 1		Wit. 0		Susp. 0		Agr. 0		Yes No		Loss Value	
Reported By		Serial No.		Watch		Area		Supervisor		Page 1	
T. BOWEN 8519P		1		1		SGT. STEINBERGER		1		of 1	

1. Defendant's True Name (Leave Blank)										Arrest No. 7571		CONSOLIDATED ARREST REPORT Oakland Police Department																	
2. Defendant's Name Brown Jr, David Lee										PFN [REDACTED]		Booking Agency 00109		Report No. 05-19529															
3. AKA or Nickname										Date Arrested 4 APR 05		Time 0210		Crime Rept. Detailed to 4x		Incident No. 17													
4. DOB [REDACTED]		POB [REDACTED]		Height 6'0		Weight 215		Hair blk		Eyes brn		Race B		Sex M		Age 36													
5. Salient Characteristics braces										Clothing white shirt, blk jeans		VEHICLE INFORMATION				JAIL USE ONLY A4 0250 1300													
6. Residence Address [REDACTED]										City <input type="checkbox"/> Oakland		State		Phone [REDACTED]				License No. State Year											
7. Business Address [REDACTED]										School		Phone [REDACTED]		Year Make Model Color				Towed to Tow Tag											
8. DL or ID Card No. [REDACTED]				Social Security No.				Occupation				Hold For		CII No.															
9. Location of Arrest 1FO 1731 San Pablo Ave										Arrest Approved By		Serial No.		Time		FBI No.		Photo Taken by Serial No. Time Date											
10. Arresting Officer R. McNulty										Serial No. 8568P		Arresting Officer C. Ausmus		Serial No. 8432P		Cash at Booking													
11. Transporting Officer A/O										Serial No.		Transporting Officer A/O		Serial No.		ID Confirmed by <input checked="" type="checkbox"/> CPM <input checked="" type="checkbox"/> CMC													
12. Code Section [REDACTED]		M/F I		Court [REDACTED]		CC [REDACTED]		Warrant No. [REDACTED]		CEN [REDACTED]		PIN No. [REDACTED]		Bail		Citation No.													
																Court													
																Date Time													
														IN-CUSTODY ARRESTS															
Code Section		M/F		Court		CC		Warrant No.		CEN		PIN No.		Bail		Date Arrested Time													
																Arresting Officer Serial No.													
																TOTAL BAIL													
I HEREBY ARREST THE ABOVE DEFENDANT ON THE CHARGE INDICATED AND REQUEST A PEACE OFFICER TAKE HIM/HER INTO CUSTODY. I WILL APPEAR TO SIGN A COMPLAINT AGAINST THE PERSON I HAVE ARRESTED. (See reverse side for instructions).																													
13. Signature of Person Making Arrest										Residence Address [REDACTED]				City <input type="checkbox"/> Oakland		Zip		Phone ()											
14. Arresting Person's Name										Sex-Race-Age				Business Address				City <input type="checkbox"/> Oakland		Zip		Phone ()							
15. Complainant's Name										Sex-Race-Age				Address				City <input type="checkbox"/> Oakland		Zip		ABC Premise Involved							
16. Co-Defendant					Sex-Race-Age					Co-Defendant					Sex-Race-Age					Co-Defendant					Sex-Race-Age				
17. <input type="checkbox"/> Used a Firearm or Deadly Weapon										<input type="checkbox"/> Armed with a Firearm										Burglary Classification									
<input type="checkbox"/> Caused Great Bodily Harm										<input type="checkbox"/> Acted in Concert (261, 286, 288a PC)																			
18. Instructions: <ul style="list-style-type: none"> List charges by name and code section. If completing an Offense or Add'l/Supp Report, DO NOT start narrative on this form. If suspect is arrested WITHOUT A WARRANT for an offense which occurred in another jurisdiction, identify agency, investigator's name, and report number. Indicate if suspect is on parole or probation. Complete probable cause narrative. Document admonishment of arrested person. Enter "enroute (agency)" if appropriate. Enter reason for physical arrest (misdemeanor only). Describe injuries or known medical problems. 																													
Public Intoxication 647(F) P.C. - Ofc's observed Brown actively fighting on the street. Ofc's took Brown into custody. Brown had the strong smell of an alcoholic beverage coming from his person. Brown had an unsteady gait, slurred speech and watery eyes. While subject was in rear of patrol car, Brown fell asleep several times.																													

1. Defendant's True Name (Leave Blank)										Arrest No. 1739		CONSOLIDATED ARREST REPORT Oakland Police Department												
2. Defendant's Name DOB, JOHN										Booking Agency 00109		Report No. 05-4551												
3. AKA or Nickname MOSZGI, KIBRON					Date Arrested 12/20/02		Time		Crime Rept. Detailed to		CP Beat 4X		Incident No. 23											
p. Saliient Characteristics					Clothing		Race		Sex		Age		VEHICLE INFORMATION											
6. Residence Address					City <input type="checkbox"/> Oakland		State		Phone ()		License No.		State Year											
7. Business Address					School		Phone ()		Towed to		Tow Tag		JAIL USE ONLY											
8. DL or ID Card No.					Social Security No.		Occupation		Hold For		CII No.		A-5 0530 4459											
9. Location of Arrest IFD 1731 SAN PABLO					Arrest Approved By		Serial No.		Time		FBI No.		Serial No.											
10. Arresting Officer S. SEDER					Serial No. 8532		Arresting Officer C. JOHNSON		Serial No. 8517		Cash at Booking		Serial No.											
11. Transporting Officer					Serial No.		Transporting Officer		Serial No.		ID Confirmed by		Photo Taken by											
M/F					Court		CC		Warrant No.		CEN		Bail											
Code					CC		Warrant No.		CEN		PIN No.		Bail											
IN-CUSTODY ARRESTS					Date Arrested		Time		Arresting Officer		Serial		TOTAL BAIL											
I HEREBY ARREST THE ABOVE DEFENDANT ON THE CHARGE INDICATED AND REQUEST A PEACE OFFICER TAKE HIM/HER INTO CUSTODY I WILL APPEAR TO SIGN A COMPLAINT AGAINST THE PERSON I HAVE ARRESTED (See reverse side for instructions).																								
13. Signature of Person Making Arrest					Residence Address					City <input type="checkbox"/> Oakland		Zip		Phone ()										
14. Arresting Person's Name					Sex-Race-Age					Business Address		City <input type="checkbox"/> Oakland		Zip										
15. Complainant's Name					Sex-Race-Age					Address		City <input type="checkbox"/> Oakland		Zip										
16. Co-Defendant					Sex-Race-Age					Co-Defendant					Sex-Race-Age									
17. <input type="checkbox"/> Used a Firearm or Deadly Weapon					<input type="checkbox"/> Armed with a Firearm					Burglary Classification					<input type="checkbox"/> Caused Great Bodily Harm					<input type="checkbox"/> Acted in Concert (261, 286, 288a PC)				
18. Instructions:														<ul style="list-style-type: none"> • List charges by name and code section. • If completing an Offense or Add'l/Supp Report, DO NOT start narrative on this form. • If suspect is arrested WITHOUT A WARRANT for an offense which occurred in another jurisdiction, identify agency, investigator's name, and report number. • Indicate if suspect is on parole or probation. • Complete probable cause narrative. • Document admonishment of arrested person. • Enter "enroute (agency)" if appropriate. • Enter reason for physical arrest (misdemeanor only). • Describe injuries or known medical problems. 										
PUBLIC INTOXICATION														647(f)(1)(C)										
OFFICERS OBSERVED SUBJECT WALKING IN AND OUT OF TRAFFIC IN 1700 BLK SAN PABLO AVE. UPON CONTACT WITH OFFICERS SUBJECT BEGAN CURSING LOUDLY AT SWEET JIMMIES SECURITY. SUBJECT REFUSED TO LEAVE ROADWAY, STUMBLER WHEN TRYING TO WALK, SMELLED STRONGLY OF ALCOHOLIC BEVERAGE, HAD SLURRED REPETITIVE SPEECH																								

1. Defendant's True Name (Leave Blank) <i>Whisenton Harold J.</i>		Arrest No. <i>34082</i>	
2. Defendant's Name <i>WHISENTON, HAROLD J.</i>		PFN [REDACTED]	
3. AKA or Nickname		Date Arrested <i>27 DEC 04 - 0008</i>	
4. DOB [REDACTED]	POB [REDACTED]	Height <i>6-4</i>	Weight <i>205</i>
5. Salient Characteristics		Hair <i>BLK</i>	Eyes <i>BRN</i>
		Race <i>B</i>	Sex <i>M</i>
		Age [REDACTED]	
6. Residence Address		City <input type="checkbox"/> Oakland	State
7. Business Address		School	Phone ()
8. DL or ID Card No.		Social Security No.	Occupation <i>- N/A -</i>

CONSOLIDATED ARREST REPORT Oakland Police Department

Booking Agency <i>00109</i>	Report No. <i>04-133968</i>
Crime Rept. Detailed to	CP Beat <i>4X</i>
	Incident No. <i>1059</i>
VEHICLE INFORMATION	
License No.	State Year
Year Make Model Color	
Towed to	Tow Tag

JAIL USE ONLY

A-1
0035

Hold For	Cell No.	Serial No.	Time
Cash at Booking			
ID Confirmed by	Check <input type="checkbox"/> PIN <input type="checkbox"/> NCIC		
Citation No.			
Court			
Date	Time		

IN-CUSTODY ARRESTS

Code Section	M/F	Court	CC	Warrant No.	CFM	PIN No.	Bail	Date Arrested	Time
							<i>3,500</i>	<i>12-27-04</i>	<i>0059</i>
								Arresting Officer	Serial No.
								<i>T. Williams</i>	<i>4485</i>
TOTAL BAIL								<i>3,500</i>	

I HEREBY ARREST THE ABOVE DEFENDANT ON THE CHARGE INDICATED AND REQUEST A PEACE OFFICER TAKE HIM/HER INTO CUSTODY.
I WILL APPEAR TO SIGN A COMPLAINT AGAINST THE PERSON I HAVE ARRESTED (See reverse side for instructions).

13. Signature of Person Making Arrest	Residence Address	City <input type="checkbox"/> Oakland	Zip	Phone ()
14. Arresting Person's Name	Sex-Race-Age	Business Address	City <input type="checkbox"/> Oakland	Zip
15. Complainant's Name	Sex-Race-Age	Address	City <input type="checkbox"/> Oakland	Zip
				ABC Premise Involved <i>YES</i>
16. Co-Defendant	Sex-Race-Age	Co-Defendant	Sex-Race-Age	Co-Defendant

17. <input type="checkbox"/> Used a Firearm or Deadly Weapon <input type="checkbox"/> Caused Great Bodily Harm	27 DEC 2004 02:31:52	Classification
18. Instructions:	cause narrative.	
• List charges by name	ment of arrested person.	
• If completing an Offense or Add'l/Suppl	gency" if appropriate.	
• If suspect is arrested WITHOUT A WAR	for physical arrest (misdemeanor only).	
another jurisdiction, identify agency, inv	Describe injuries or known medical problems.	
• Indicate if suspect is on parole or probat		

PUBLIC INTOXICATION, DISORDERLY CONDUCT - (C47(F)) PC
R/O'S WERE FLAGGED DOWN TFO. 1733 SAN PABLO AVE. REGARDING A FIGHT
INSIDE AND OUTSIDE THE CLUB. UPON ARRIVAL, I ONVIEWED ABOVE LISTED
SUBJECT CREATING AND ACTIVELY FIGHTING WITH SECURITY & STAFF.
I CONTACTED SUBJECT ON THE WEST-SIDEWALK, WHO HAD THE STRONG ODOR OF
W ALCOHOLIC BEVERAGE FROM HIS BREATH AND PERSON. SUBJECT HAD
VISIBLE BLOODSHOT & WATERY EYES. SUBJECT UNABLE TO STAND OR WALK W/O
STUNNING, OR TRIPPING. UNABLE TO CARE FOR HIS OWN SAFETY.

536-252 (4/04)	Type of Report Made:	<input type="checkbox"/> Offense	<input type="checkbox"/> Additional Info./Supplemental	<input type="checkbox"/> None
<i>ARRESTED FOR ABOVE, TRANSPORTED TO OPD JAIL (NO INJURIES)</i>				

GN TO: *Asst*

OPD

SUSPECT REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

04-105235

CRIME BATTERY 243		INCIDENT # 612		V1		VICTIM LAST, First, Mid. K. Kemke	
SUSPECT		Number 1	LAST, First, Mid Moses, Ronnie			RELATIONSHIP TO VICTIM none	
SEX M	RACE B	D.O.B. [REDACTED]	AGE [REDACTED]	HEIGHT 5-09	WEIGHT 300	HAIR BLK	EYES BRO
HOME ADDRESS [REDACTED]		CITY <input type="checkbox"/> OAKLAND		ZIP [REDACTED]		APT. NO. HOME/MSG. PHONE	
WORK ADDRESS (Name of Business) (School)		CITY <input type="checkbox"/> OAKLAND		OCCUPATION		WORK PHONE	
ADMONISHMENT: ADMONISHED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO REFUSED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO STATEMENT <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				<input type="checkbox"/> PROBATION COUNTY		Officer	
BY: (OFFICER/DATE/TIME)				<input type="checkbox"/> PAROLE AGENT		<input type="checkbox"/> PAL	
DESCRIPTION PROVIDED BY A/O		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED					
HAIR LENGTH <input checked="" type="checkbox"/> SHORT <input type="checkbox"/> MED. (HALF EAR) <input type="checkbox"/> LONG (COVER EAR) <input type="checkbox"/> COLLAR <input type="checkbox"/> SHOULDER <input type="checkbox"/> BALD/SHAVED <input checked="" type="checkbox"/> RECEEDING		HAIR STYLE <input checked="" type="checkbox"/> NATURAL / AFRO <input type="checkbox"/> BRAIDED <input type="checkbox"/> CREWCUT <input type="checkbox"/> CURLY <input type="checkbox"/> PONYTAIL <input type="checkbox"/> PUNK <input type="checkbox"/> CONSERVATIVE		FACIAL HAIR <input type="checkbox"/> NONE <input type="checkbox"/> BEARD <input type="checkbox"/> MUSTACHE <input checked="" type="checkbox"/> BEARD & MUSTACHE <input type="checkbox"/> GOATEE <input type="checkbox"/> SIDEBURNS		COMPLEXION <input type="checkbox"/> LIGHT <input checked="" type="checkbox"/> MEDIUM <input type="checkbox"/> DARK <input type="checkbox"/> FRECKLED <input type="checkbox"/> ACNE <input type="checkbox"/> POCKMARK <input type="checkbox"/> RUDDY	
OTHER DISTINCTIVE FEATURES <input type="checkbox"/> GOLD TOOTH <input type="checkbox"/> MISSING TEETH <input type="checkbox"/> SILVER TOOTH <input type="checkbox"/> GLASSES		<input type="checkbox"/> BODY ODOR TYPE <input type="checkbox"/> LARGE EYES <input type="checkbox"/> MISSING LIMBS		WEAPON USED <input type="checkbox"/> CAL. BARREL <input type="checkbox"/> BLUDGEON CLUB <input checked="" type="checkbox"/> HANDS/FEET		<input type="checkbox"/> REVOLVER <input type="checkbox"/> SEMI-AUTO PISTOL <input type="checkbox"/> SAWED OFF <input type="checkbox"/> ROCK/BRICK	
				<input type="checkbox"/> SHOTGUN <input type="checkbox"/> NICKEL <input type="checkbox"/> CUT/STAB <input type="checkbox"/> BLUE <input type="checkbox"/> RIFLE <input type="checkbox"/> VEHICLE			

SUSPECT		Number	LAST, First, Mid			RELATIONSHIP TO VICTIM		IN CUSTODY THIS OFFENSE <input type="checkbox"/> Yes <input type="checkbox"/> No	
SEX	RACE	D.O.B.	AGE	HEIGHT	WEIGHT	HAIR	EYES	DL. NUMBER	PFN
HOME ADDRESS		CITY <input type="checkbox"/> OAKLAND		ZIP		APT. NO.		HOME/MSG. PHONE	
WORK ADDRESS (Name of Business) (School)		CITY <input type="checkbox"/> OAKLAND		OCCUPATION		WORK PHONE			
ADMONISHMENT: ADMONISHED <input type="checkbox"/> YES <input type="checkbox"/> NO REFUSED <input type="checkbox"/> YES <input type="checkbox"/> NO STATEMENT <input type="checkbox"/> YES <input type="checkbox"/> NO				<input type="checkbox"/> PROBATION COUNTY		Officer			
BY: (OFFICER/DATE/TIME)				<input type="checkbox"/> PAROLE AGENT		<input type="checkbox"/> PAL			
DESCRIPTION PROVIDED BY		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED							
HAIR LENGTH <input type="checkbox"/> SHORT <input type="checkbox"/> MED. (HALF EAR) <input type="checkbox"/> LONG (COVER EAR) <input type="checkbox"/> COLLAR <input type="checkbox"/> SHOULDER <input type="checkbox"/> BALD/SHAVED <input type="checkbox"/> RECEEDING		HAIR STYLE <input type="checkbox"/> NATURAL / AFRO <input type="checkbox"/> BRAIDED <input type="checkbox"/> CREWCUT <input type="checkbox"/> CURLY <input type="checkbox"/> PONYTAIL <input type="checkbox"/> PUNK <input type="checkbox"/> CONSERVATIVE		FACIAL HAIR <input type="checkbox"/> NONE <input type="checkbox"/> BEARD <input type="checkbox"/> MUSTACHE <input type="checkbox"/> BEARD & MUSTACHE <input type="checkbox"/> GOATEE <input type="checkbox"/> SIDEBURNS		COMPLEXION <input type="checkbox"/> LIGHT <input type="checkbox"/> MEDIUM <input type="checkbox"/> DARK <input type="checkbox"/> FRECKLED <input type="checkbox"/> ACNE <input type="checkbox"/> POCKMARK <input type="checkbox"/> RUDDY		APPEARANCE <input type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input type="checkbox"/> UNKEMPT <input type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED <input type="checkbox"/> BIRTHMARK <input type="checkbox"/> MOLE	
OTHER DISTINCTIVE FEATURES <input type="checkbox"/> GOLD TOOTH <input type="checkbox"/> MISSING TEETH <input type="checkbox"/> SILVER TOOTH <input type="checkbox"/> GLASSES		<input type="checkbox"/> BODY ODOR TYPE <input type="checkbox"/> LARGE EYES <input type="checkbox"/> MISSING LIMBS		WEAPON USED <input type="checkbox"/> CAL. BARREL <input type="checkbox"/> BLUDGEON CLUB <input type="checkbox"/> HANDS/FEET		<input type="checkbox"/> REVOLVER <input type="checkbox"/> SEMI-AUTO PISTOL <input type="checkbox"/> SAWED OFF <input type="checkbox"/> ROCK/BRICK		<input type="checkbox"/> SHOTGUN <input type="checkbox"/> NICKEL <input type="checkbox"/> CUT/STAB <input type="checkbox"/> BLUE <input type="checkbox"/> RIFLE <input type="checkbox"/> VEHICLE	

SUSPECT VEHICLE		VEHICLE WAS <input type="checkbox"/> SECURED AT SCENE <input type="checkbox"/> RELEASED TO OWNER		<input type="checkbox"/> TOW (#) <input type="checkbox"/> FINGERPRINTED <input type="checkbox"/> HOLD (UNIT)		DAMAGE DETAILS, UNIQUE FEATURES		OTHER DESCRIPTION	
OWNER		ADDRESS		CITY <input type="checkbox"/> OAKLAND		ZIP		PHONE	
LIC./STATE/OR PLATE COLORS		YEAR	MAKE	MODEL	STYLE	EXTERIOR COLOR	CONDITION <input type="checkbox"/> CLEAN <input type="checkbox"/> NEW <input type="checkbox"/> DIRTY <input type="checkbox"/> POOR	INTERIOR COLOR	INTERIOR <input type="checkbox"/> CLEAN <input type="checkbox"/> ODOR <input type="checkbox"/> DIRTY <input type="checkbox"/>
TIRES <input checked="" type="checkbox"/> STOCK <input type="checkbox"/> WIDE <input type="checkbox"/> SMALL	RIMS <input type="checkbox"/> STOCK <input type="checkbox"/> CHROME <input type="checkbox"/> MAGS <input type="checkbox"/> SPOKE	LEVEL <input type="checkbox"/> STOCK <input type="checkbox"/> LOWERED <input type="checkbox"/> RAISED <input type="checkbox"/>		ROOF <input type="checkbox"/> VINYL <input type="checkbox"/> LANDAU <input type="checkbox"/> CONV	WINDOWS <input type="checkbox"/> INTED <input type="checkbox"/> BROKEN	SEATS <input type="checkbox"/> VINYL <input type="checkbox"/> BENCH <input type="checkbox"/> CLOTH <input type="checkbox"/> BUCKET		TRANSMISSION <input type="checkbox"/> AUTOMATIC <input type="checkbox"/> MANUAL	

REPORTED BY SGT. D. LARSON	SERIAL # 7422C	WATCH 2	DISTRICT CID	SUPERVISOR LT. M. YOELL	SERIAL #	PAGE 2 OF 2
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OPD

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

04-105235

CRIME Battery/Firefighter	<input type="checkbox"/> SUPPLEMENTAL 243(b) PC	INCIDENT # 612	V1	VICTIM LAST, First, Mid. K. Kemke
PERPETRATOR LAST, First, Mid. Moses, Ronnie		INCIDENT LOCATION IFO 1731 San Pablo Avenue		DATE OF THIS REPORT 04Sep04
ORIGINAL DATE REPORTED				

ITEM	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC.	SERIAL #	VALUE
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[SUMMARY]

On 04Sep04, I was assigned to work the "Art & Soul Festival" in and around the Frank Ogawa Plaza and the City Centre. I was wearing a full police uniform and driving a marked blk/whi police vehicle, number 1240. I had been on duty since 1000 hours. My callsign was 4L70 and I was the supervisor for the security detail at the festival.

A few minutes before 1152 hours, I was driving around the perimeter of the festival to check on the various stations where OPD personnel were monitoring closed roads. I was driving NB on San Pablo Avenue preparing to turn on to Jefferson Street when I first noticed OFD Fire Engine 2541 parked on the [REDACTED]

[REDACTED] I saw a group of firefighters standing on the San Pablo Avenue side of a business located at [REDACTED]. I saw them talking to a fat MB dressed in a red jacket. As I turned the corner I saw an AMR ambulance 518 parked IFO [REDACTED]. The two female paramedics were talking to some other people IFO that location. I have been to that business a few times on calls - I recall it being a rehab center or some sort of care facility for people with dependencies or emotional and psychological problems. The few times I had responded there in the past, it was to deal with a client/patient who was becoming violent with staff or EMS units.

I pulled up to ask one of the paramedics if this was a call that required the OPD. She replied that the patient was having blood sugar problems and they wanted to get him to eat some glucose because he was acting irrationally. She also told me that the patient was hostile and walking away from the firefighters as she was speaking to me. One of the firefighters shouted over that the lieutenant wanted me to drive to their location "around the corner" because the patient was becoming violent.

I switched my radio from the TRAF1 channel to PATROL1 to ask if

Reported By Sgt. D. Larson	Serial No. 7422C	Watch 2	Area	Supervisor Lt. M. Yoell	Serial No.	Page 3 of 8
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O P D

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

04-105235

CRIME Battery/Firefighter	<input type="checkbox"/> SUPPLEMENTAL 243(b) PC	INCIDENT # 612	V1	VICTIM LAST, First, Mid. K. Kemke
VICTIM LAST, First, Mid. Moses, Ronnie		INCIDENT LOCATION IFO 1731 San Pablo Avenue		DATE OF THIS REPORT 04Sep04
ORIGINAL DATE REPORTED				

ITEM	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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[SUMMARY - continued]

there were any calls for this location and to see if anyone was on the way to the call. This was at 1152 hours. At the same time I was doing that, I turned my car SB on to [REDACTED]. I saw four uniformed firefighters following the fat MB I had seen earlier. Each of the firefighters was wearing a standard dark blue t-shirt the OFD insignia on the breast and the large white OAKLAND FIRE lettering on the back. They all wore their standard dark blue trousers. No one was wearing turnouts or helmets. A MW firefighter with a ballcap on was trying to talk to the MB, who was alternately walking or backpedaling away from the firefighter SB on the W/sidewalk in the [REDACTED]. At one point as I pulled up parallel to the group, which was now directly IFO "Sweet Jimmie's" at 1731 San Pablo Avenue, I saw the MB push his arms toward the firefighter wearing the ballcap and the firefighter appeared to stumble backward, which led me to believe the MB had struck the firefighter. I recognized this as a violation of 243(b) PC, Battery on a Firefighter and 148.2 PC, Obstruct a Firefighter. At that moment, I asked for two cover units in front of "Sweet Jimmies," then pulled my car forward to get further south of the MB to intercept him. I stopped IFO 1701 San Pablo Avenue.

I got out of my car and walked to the W/sidewalk. I saw the MB trying to trot slowly away from the firefighters, who were still following along talking to the MB. I stepped IFO the MB as he got close to me and raised my left hand with my palm extended in front of his chest in a signal to stop. He stopped about one-half arm's length from me, so I stepped back to get some distance from him and I moved into a bladed stance with my right foot back. The MB said something that I couldn't make out. I asked him what he said. He said, "You need to get me away from here" and stepped toward the back of my police vehicle. I could see he was agitated and I tried to talk to him calmly as I waited for the arrival of my cover.

I could hear radio traffic dispatching units to my location and it was my intent to keep the MB occupied until there were sufficient

Reported By Sgt. D. Larson	Serial No. 7422C	Watch 2	Area	Supervisor Lt. M. Yoell	Serial No.	Page 4 of 8
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OPD

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

04-105235

CRIME Battery/Firefighter	<input type="checkbox"/> SUPPLEMENTAL 243(b) PC	INCIDENT # 612	V1	VICTIM LAST, First, Mid. K. Kemke
VICTIM LAST, First, Mid. Moses, Ronnie		INCIDENT LOCATION IFO 1731 San Pablo Avenue		DATE OF THIS REPORT 04Sep04
ORIGINAL DATE REPORTED				

ITEM	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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[SUMMARY - continued]

numbers before I tried to physically arrest him for the battery I witnessed. I followed the MB toward my car, side-stepping to prevent him from continuing SB, but allowing him to get closer to my police vehicle. This gave me the chance to observe his appearance. The MB appeared agitated, his eyes seemed glassy and he was sweating from his forehead. I couldn't detect any odor of alcohol on his breath. When we reached the side of my police vehicle, a distance of maybe 15 feet from where I first stopped him, I could hear from the radio traffic that another officer was on scene, so I decided to try to gain control of the MB's arm to prepare to handcuff him. I saw Officer B. Reed approaching from my right. I reached for the MB's R/wrist with my L/hand, but he pulled away from my grip, shook his head and said no twice. I immediately reached again for his R/wrist, and grabbed the top of his R/hand. As I attempted to twist his hand over to a twist lock, he tensed up his whole body and began to pull away from me with his weight. I allowed him to step back because I could see he was going to become pinned against the trunk of my car, but maintained my grip on his hand and tried to overcome his resistance.

Officer Reed also grabbed his right arm and one of the firefighters grabbed his left arm. He fell back against the trunk of my vehicle and pivoted, so his stomach was now against the car. I saw him pull his arms forward under his body and none of the three of us could overcome his resistance. Due to the closeness of the struggle, it was impractical to use an impact weapon or chemical agent, and verbal persuasion and physical prowess had failed. Fearful that he may have an undisclosed weapon hidden within his clothing or pockets, I elected to remain in contact with him rather than release him completely and allow him to arm himself. I understood at that time that the only option remaining to me was to attempt a carotid restraint. I released his arm because I knew Officer Reed had hold of it, while maintaining my body weight against him to pin him against the car. I moved to a position just behind the MB, slightly to his left. I reached forward with my right hand and grabbed his forehead to pull his head back and expose his neck. I then

Reported By Sgt. D. Larson	Serial No. 7422C	Watch 2	Area	Supervisor Lt. M. Yoell	Serial No.	Page 5 of 8
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OPD

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

04-105235

CRIME Battery/Firefighter	<input type="checkbox"/> SUPPLEMENTAL 243(b) PC	INCIDENT # 612	V1	VICTIM LAST, First, Mid. K. Kemke
PERPETRATOR LAST, First, Mid. Moses, Ronnie		INCIDENT LOCATION IFO 1731 San Pablo Avenue		DATE OF THIS REPORT 04Sep04
ORIGINAL DATE REPORTED				

ITEM	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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[SUMMARY - continued]

encircled his neck with my left arm and checked the alignment of chin to elbow as best I could given the struggle that was occurring. When I felt I had the proper alignment, I applied pressure to both sides of his neck with my forearm and biceps in a squeezing motion. I listened carefully for any sounds of wheezing or indicators that his airway was obstructed, but I didn't hear anything. After about 12-15 seconds, I felt his body go limp under me. I could hear his cheeks flapping as his breath exhaled noisily and I felt his legs start to twitch. All of these are signs that the carotid hold successfully caused him to lose consciousness. I loosened my hold around his neck to allow the two men next to me to pull his arms out from under him. His head slumped forward immediately and lightly impacted the trunk of my car, indicating he was unconscious. I then grabbed the MB's left hand held by the firefighter and Officer Reed applied handcuffs to the MB. After he was handcuffed, I instructed Officer Reed to help me lower the MB backward into a sitting position on the pavement. I placed my foot and knee behind him to allow him to sit using my leg as a backrest. Almost as soon as he was down to the ground and sitting, he awoke. The AMR ambulance arrived behind me after the paramedics had relocated from Jefferson Street. The medics checked on the MB's vital signs and then he was placed on to a gurney.

At no time did any OPD or OFD personnel strike the MB, who was later identified to me as Ronnie Moses.

I instructed arriving officers to take statements from the witness firefighters. The AMR paramedics were not present during the use of force incident, so no statements were sought.

There were no obvious injuries to anyone, so no technician was called.

Watch Commander Lt. L. Green was called to the scene.

I notified Communications to notate this call with a K4.

Reported By Sgt. D. Larson	Serial No. 7422C	Watch 2	Area	Supervisor Lt. M. Yoell	Serial No.	Page 6 of 8
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OPD

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD # 04-105235

CRIME Battery/Firefighter 243(b) PC	<input type="checkbox"/> SUPPLEMENTAL	INCIDENT # 612	V1	VICTIM LAST, First, Mid. K. Kemke
PERPECT LAST, First, Mid. Moses, Ronnie	INCIDENT LOCATION IFO 1731 San Pablo Avenue		DATE OF THIS REPORT 04Sep04	ORIGINAL DATE REPORTED

ITEM	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC.	SERIAL #	VALUE
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[SUMMARY - continued]

Moses was taken by AMR to Summit Medical Center for clearance to be incarcerated.

Reported By Sgt. D. Larson	Serial No. 7422C	Watch 2	Area	Supervisor Lt. M. Yoell	Serial No.	Page 7 of 8
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OPD

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD # 04-105235

CRIME Battery/Firefighter	<input type="checkbox"/> SUPPLEMENTAL 243(b) PC	INCIDENT # 612	V1	VICTIM LAST, First, Mid. K. Kemke
VICTIM LAST, First, Mid. Moses, Ronnie		INCIDENT LOCATION IFO 1731 San Pablo Avenue		DATE OF THIS REPORT 04Sep04
ORIGINAL DATE REPORTED				

ITEM	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC.	SERIAL #	VALUE
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WITNESSES:

AMR PARAMEDICS
Christy Hollis
Darla Contreras

OFD PERSONNEL
Capt. Kevin Nuuiha
Ron Martinez
Mark Moreno

OFD RIDEALONG
Phil Zarubin

ADDITIONAL PERSON
Charlet Brown, [REDACTED]

OPD PERSONNEL
Officer B. Reed
Officer L. Ausmus
Officer P. Gall
Officer O. Saeparn
Officer M. Sevilla
Officer K. Botelho

Reported By Sgt. D. Larson	Serial No. 7422C	Watch 2	Area	Supervisor Lt. M. Yoell	Serial No.	Page 8 of 8
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OPD

POLICE REPORT

Victim
Witness

Oakland Police Department
455 - 7th Street
Oakland, CA 94607

RD #

04-105235

CRIME BATTERY/FIREFIGHTER 243b PC		INCIDENT NO. 612	V1 K. KEMKE	VICTIM LAST, First, Mid. [] Business Name	
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ADDITIONAL PERSONS	CLASS: V W R/P			LINKED TO: V R/P W S		
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CLASS W	LINKED TO	LAST, First, Mid [REDACTED]	[] Business Name	SEX M	RACE H	D.O.B. [REDACTED]	AGE [REDACTED]
HOME ADDRESS [REDACTED]		CITY OAKLAND	ZIP [REDACTED]	HOME PHONE [REDACTED]			
BUSINESS ADDRESS / SCHOOL [REDACTED]		CITY [] OAKLAND	ZIP [REDACTED]	WORK PHONE [REDACTED]			
OCCUPATION			WORKING HOURS		D.L. NUMBER/STATE		
VICTIM ACTIVITY: [] AT HOME [] ON STREET [] IN HOSPITAL [] WALKING [] DRIVING [] AT SCHOOL [] SHOPPING CNTR (Check All That Apply) [] AT WORK [] ON VACATION [] IN JAIL [] JOGGING [] SLEEPING [] AT PARK							

CLASS W	LINKED TO	LAST, First, Mid [REDACTED]	[] Business Name	SEX F	RACE H	D.O.B. [REDACTED]	AGE [REDACTED]
HOME ADDRESS [REDACTED]		CITY OAKLAND	ZIP [REDACTED]	HOME PHONE [REDACTED]			
BUSINESS ADDRESS / SCHOOL [REDACTED]		CITY [] OAKLAND	ZIP [REDACTED]	WORK PHONE [REDACTED]			
OCCUPATION			WORKING HOURS		D.L. NUMBER/STATE		
VICTIM ACTIVITY: [] AT HOME [] ON STREET [] IN HOSPITAL [] WALKING [] DRIVING [] AT SCHOOL [] SHOPPING CNTR (Check All That Apply) [] AT WORK [] ON VACATION [] IN JAIL [] JOGGING [] SLEEPING [] AT PARK							

CLASS W	LINKED TO	LAST, First, Mid [REDACTED]	[] Business Name	SEX M	RACE H	D.O.B. [REDACTED]	AGE [REDACTED]
HOME ADDRESS [REDACTED]		CITY OAKLAND	ZIP [REDACTED]	HOME PHONE [REDACTED]			
BUSINESS ADDRESS / SCHOOL [REDACTED]		CITY [] OAKLAND	ZIP [REDACTED]	WORK PHONE [REDACTED]			
OCCUPATION			WORKING HOURS		D.L. NUMBER/STATE		
VICTIM ACTIVITY: [] AT HOME [] ON STREET [] IN HOSPITAL [] WALKING [] DRIVING [] AT SCHOOL [] SHOPPING CNTR (Check All That Apply) [] AT WORK [] ON VACATION [] IN JAIL [] JOGGING [] SLEEPING [] AT PARK							

CLASS W	LINKED TO	LAST, First, Mid [REDACTED]	[] Business Name	SEX M	RACE H	D.O.B. [REDACTED]	AGE [REDACTED]
HOME ADDRESS [REDACTED]		CITY OAKLAND	ZIP [REDACTED]	HOME PHONE [REDACTED]			
BUSINESS ADDRESS / SCHOOL [REDACTED]		CITY [] OAKLAND	ZIP [REDACTED]	WORK PHONE [REDACTED]			
OCCUPATION			WORKING HOURS		D.L. NUMBER/STATE		
VICTIM ACTIVITY: [] AT HOME [] ON STREET [] IN HOSPITAL [] WALKING [] DRIVING [] AT SCHOOL [] SHOPPING CNTR (Check All That Apply) [] AT WORK [] ON VACATION [] IN JAIL [] JOGGING [] SLEEPING [] AT PARK							

CLASS W	LINKED TO	LAST, First, Mid [REDACTED]	[] Business Name	SEX M	RACE H	D.O.B. [REDACTED]	AGE [REDACTED]
HOME ADDRESS [REDACTED]		CITY OAKLAND	ZIP [REDACTED]	HOME PHONE [REDACTED]			
BUSINESS ADDRESS / SCHOOL [REDACTED]		CITY [] OAKLAND	ZIP [REDACTED]	WORK PHONE [REDACTED]			
OCCUPATION			WORKING HOURS		D.L. NUMBER/STATE		
VICTIM ACTIVITY: [] AT HOME [] ON STREET [] IN HOSPITAL [] WALKING [] DRIVING [] AT SCHOOL [] SHOPPING CNTR (Check All That Apply) [] AT WORK [] ON VACATION [] IN JAIL [] JOGGING [] SLEEPING [] AT PARK							

REPORTED BY L. AUSMUS	SERIAL # 0432P	WATCH 2	DISTRICT 2	SUPERVISOR	SERIAL #	PAGE ____ OF ____
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CRIME REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th STREET
OAKLAND, CA 94607-3985

Assign To:

DV

RD #

04-104495

ROUTING

☐ CID

Outside Reporting Agency

Case No.

Police Beat

CP Beat

Incident No.

YSS

☐ VICE☐ CSD☐ TRAFFIC☐ D.A.☐ VIC/WIT☐☐

Last, First, Mid

☐ Business Name☐ Local / State / Federal

Sex

Race

D.O.B.

Age

Home Address

City

Oakland

State / Zip

Home/Msg. Phone

Business Address / School

City

Oakland

State / Zip

Work Phone

Occupation

D.L. No.

State

☒ Domestic Violence☒ Victim Injured☒ Resource Info Provided

Working Hours

D.L. No.

State

☐ Victim's Support☐ Sex Assault Victim Request Conference☐ Resource Info Provided

ADDITIONAL PERSON

☐ R/P☐ Parent☐ Witness

Last, First, Mid

Sex

Race

D.O.B.

Age

Home Address

City

Oakland

State / Zip

Home/Msg. Phone

Business Address / School

City

Oakland

State / Zip

Work Phone

LOCATION

- ☐
- BANK/ATM
-
- ☐
- CONVENT MKT
-
- ☐
- GAS STATION
-
- ☐
- OTHER COMM.
-
- ☐
- RESIDENCE
-
- ☒
- STREET
-
- ☐
- MISC.

POINT OF ENTRY

- ☐
- DOOR
-
- ☐
- WINDOW
-
- ☐
- GARAGE
-
- ☐
- ADJ. PREM.
-
- ☐
- VENT/SKYLIGHT
-
- ☐
- OTHER

LOCATION P.O.E.

- ☐
- FRONT
-
- ☐
- REAR
-
- ☐
- SIDE
-
- ☐
- ROOF
-
- ☐
- UNK.

METHOD OF ENTRY

- ☐
- OPEN/UNLOCKED
-
- ☐
- FORCED SCREEN
-
- ☐
- CUTTING DEVICE
-
- ☐
- BODY FORCE
-
- ☐
- PRY TOOL
-
- ☐
- CHANNEL LOCKS
-
- ☐
- ATTEMPT FORCE

BREAK GLASS

- ☐
- REMOVE DOOR
-
- ☐
- REMOVE WINDOW
-
- ☐
- POSS. EMPLOYEE
-
- ☐
- KEY
-
- ☐
- WATER METER
-
- ☐
- NONE
-
- ☐
- UNK.

BURGLARY

- ☐
- AUTO
-
- ☐
- RESIDENTIAL
-
- ☐
- COMMERCIAL
-
- ☐
- OTHER

WEAPON USED

- ☐
- FIREARM
-
- ☐
- CUT/STAB INSTR
-
- ☒
- HANDS, FEET, FIST
-
- ☐
- CHEMICAL
-
- ☐
- NONE
-
- ☐
- OTHER

☐ Gang Related☐ Hate Crime
Motivated By:☐ Race☐ Ethnicity☐ Religion☐ Sexual Orientation☐ Physical Disability☐ Mental Disability☐ Gender

CRIME

Common Name

Section/Subsection

Code

Pertains To:

Domestic Battery

243(C)(1) PC.

v: 1

Location (Address/Block No./Intersection)

☐ OHA☐ ABC

I/O 1731 San Pablo Av

LOSS

☒ None

TYPE OF THEFT

- ☐
- PICKPOCKET
-
- ☐
- PURSENATCH
-
- ☐
- AUTO ACCESS
-
- ☐
- AUTO CLOUT
-
- ☐
- SHOPLIFTING
-
- ☐
- BICYCLE
-
- ☐
- COIN OP. DEVICE
-
- ☐
- FROM BUILDING
-
- ☐
- OTHER

Occurred

Date

Time

Day

VANDALISM

On or From

31 Aug 04

2330

Tue

To

Reported

1 Sep 04

0030

Wed

- ☐
- EGGED
-
- ☐
- BREAK WINDOW
-
- ☐
- SHOOT WINDOW
-
- ☐
- GRAFFITI
-
- ☐
- MAIL BOX
-
- ☐
- KEYING / SCRATCHING
-
- ☐
- SLASH TIRES
-
- ☐
- OTHER

(CHECK ALL THAT APPLY)

- | | |
|---|---|
| 1 <input type="checkbox"/> CURRENCY / NOTES | 7 <input type="checkbox"/> HOUSEHOLD GOODS |
| 2 <input type="checkbox"/> CLOTHING / FURS | 8 <input type="checkbox"/> CONSUMABLE GOODS |
| 3 <input type="checkbox"/> JEWELRY / PRECIOUS METAL | 9 <input type="checkbox"/> LIVESTOCK |
| 4 <input type="checkbox"/> FIREARMS | 10 <input type="checkbox"/> MOTOR VEHICLES |
| 5 <input type="checkbox"/> OFFICE EQUIPMENT | 11 <input type="checkbox"/> MISCELLANEOUS |
| 6 <input type="checkbox"/> TVS, RADIO, STEREO | |

U.C.R. CODE

LIST MOST EXPENSIVE ITEM ABOVE

SOLVABILITY FACTORS (Check All That Apply)

- | | |
|--|---|
| <input type="checkbox"/> SURVEILLANCE PHOTO | <input type="checkbox"/> NAMED SUSPECT |
| <input type="checkbox"/> SERIOUS INJURY | <input type="checkbox"/> IDENTIFIABLE SUSPECT |
| <input type="checkbox"/> EVIDENCE | <input type="checkbox"/> R/O REQUESTS INVESTIGATION |
| <input checked="" type="checkbox"/> SUSPECT IN-CUSTODY | |

☐ The VICTIM / REPORTING PARTY contacted the police department to report the THEFT / LOSS / DAMAGE of the listed property. There are no known suspects. This report is made to alert the police. No narrative was completed.

VICTIM

License No.

State

☐ Secured at the Scene☐ Stolen☐ Towed

Tow No.

VEHICLE

☐ Released to the Owner☐ Fingerprinted☐ Hold (Unit)

- ☐
- Car
-
- ☐
- Truck
-
- ☐
- Other

Year

Make

Model

Body Type

Color

Vin No.

☐ Stolen

Bicycle

Mens

Womens

Mtn.

Road

Color

Brand

Model

Speed

License No.

Serial No.

PROPERTY / NARRATIVE

☐ Loss☐ Evidence☐ Safekeeping☐ Recovered

Location When Stolen

☐ Interior☐ Exterior☐ Garage

Item Qty.

Item Type, Brand, Model No., Size, Color, Marks, Etc.

Serial No.

\$ Value

Summary: On 31 Aug 04 at about 2330hrs. I was dispatched to 1731 San Pablo Av (Sweet Jimmie's) to investigate the report of a susp violating a T.R.O.

Total Number of				<input type="checkbox"/> Phone Report	Photos Taken	Evidence Collected	Tech: On Scene	Recovered Value	Loss Value	Page 1 of 4
Vict.	Wit.	Susp.	Arr.		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Reported By				Serial No.	Watch	Area	Supervisor	Serial No.	Reviewer	Serial No.
L. Johnson				7806P	1	1	Sgt Elder			

OPD

POLICE REPORT

SUSPECT REPORT

Oakland Police Department
455 - 7th Street
Oakland, CA 94607

RD #

04-104495

CRIME Domestic Battery	INCIDENT NO. 1428	V1	VICTIM LAST, First, Mid [REDACTED]
----------------------------------	-----------------------------	----	---------------------------------------

SUSPECT		Number 1	LAST, First, Mid. Stafford, Leonard		RELATIONSHIP TO VICTIM boyfriend	INCUSTODY THIS OFFENSE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
SEX M	RACE B	D.O.B. [REDACTED]	AGE 59	HEIGHT 5'9"	WEIGHT 160	HAIR Blk
HOME ADDRESS		CITY <input type="checkbox"/> OAKLAND		ZIP	APT. NO.	HOME /MSG. PHONE
WORK ADDRESS (Name of Business) (School)		CITY <input type="checkbox"/> OAKLAND		ZIP	OCCUPATION	WORK PHONE
ADMONISHMENT: ADMONISHED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO REFUSED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO STATEMENT <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				PROBATION COUNTY Sac Officer		
BY: (OFFICER/DATE/TIME) K McKellar 15 Sep 04 0110				<input type="checkbox"/> PAROLE AGENT <input type="checkbox"/> PAL		

DESCRIPTION PROVIDE BY N/O		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED whi T-shirt, blu jeans				
HAIR LENGTH <input type="checkbox"/> SHORT <input checked="" type="checkbox"/> MED. (HALF EAR) <input type="checkbox"/> LONG (COVER EAR) <input type="checkbox"/> COLLAR <input type="checkbox"/> SHOULDER <input type="checkbox"/> BALD/SHAVED <input type="checkbox"/> RECEDING	HAIR STYLE <input checked="" type="checkbox"/> NATURAL / AFRO <input type="checkbox"/> BRAIDED <input type="checkbox"/> CREWCUT <input type="checkbox"/> CURLY <input type="checkbox"/> PONYTAIL <input type="checkbox"/> CONSERVATIVE	FACIAL HAIR <input checked="" type="checkbox"/> NONE <input type="checkbox"/> BEARD <input type="checkbox"/> MUSTACHE <input type="checkbox"/> BEARD & MUSTACHE <input type="checkbox"/> GOATEE <input type="checkbox"/> SIDEBURNS	COMPLEXION <input type="checkbox"/> LIGHT <input type="checkbox"/> MEDIUM <input checked="" type="checkbox"/> DARK <input type="checkbox"/> FRECKLED <input type="checkbox"/> ACNE <input type="checkbox"/> POCKMARK <input type="checkbox"/> BUDDY	APPEARANCE <input checked="" type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input type="checkbox"/> UNKEMPT <input type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED <input type="checkbox"/> BIRTHMARK <input type="checkbox"/> MOLE	SPEECH <input type="checkbox"/> LOW PITCH <input type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> STUTTER <input type="checkbox"/> ACCENT TYPE <input type="checkbox"/> OTHER	DEMEANOR <input type="checkbox"/> CALM <input type="checkbox"/> POLITE <input type="checkbox"/> APOLOGETIC <input type="checkbox"/> NERVOUS <input type="checkbox"/> PROFESSIONAL <input checked="" type="checkbox"/> OFFENSIVE <input type="checkbox"/> HOSTILE <input type="checkbox"/> VIOLENT
OTHER DISTINCTIVE FEATURES <input type="checkbox"/> GOLD TOOTH <input type="checkbox"/> SILVER TOOTH <input type="checkbox"/> MISSING TEETH <input type="checkbox"/> GLASSES		<input type="checkbox"/> BODY ODOR TYPE <input type="checkbox"/> LARGE EYES <input type="checkbox"/> MISSING LIMBS	WEAPON USED CAL. _____ BARREL _____ <input type="checkbox"/> BLUDGEON / CLUB <input checked="" type="checkbox"/> HANDS / FEET <input type="checkbox"/> ROCK / BRICK			
		<input type="checkbox"/> REVOLVER <input type="checkbox"/> SEMI-AUTO PISTOL <input type="checkbox"/> SHOTGUN <input type="checkbox"/> RIFLE		<input type="checkbox"/> SAWED OFF <input type="checkbox"/> NICKEL <input type="checkbox"/> BLUED		
		<input type="checkbox"/> CUT / STAB <input type="checkbox"/> VEHICLE				

SUSPECT		Number	LAST, First, Mid.		RELATIONSHIP TO VICTIM	INCUSTODY THIS OFFENSE <input type="checkbox"/> YES <input type="checkbox"/> NO
SEX	RACE	D.O.B.	AGE	HEIGHT	WEIGHT	HAIR
HOME ADDRESS		CITY <input type="checkbox"/> OAKLAND		ZIP	APT. NO.	HOME /MSG. PHONE
WORK ADDRESS (Name of Business) (School)		CITY <input type="checkbox"/> OAKLAND		ZIP	OCCUPATION	WORK PHONE
ADMONISHMENT: ADMONISHED <input type="checkbox"/> YES <input type="checkbox"/> NO REFUSED <input type="checkbox"/> YES <input type="checkbox"/> NO STATEMENT <input type="checkbox"/> YES <input type="checkbox"/> NO				PROBATION COUNTY _____ Officer _____		
BY: (OFFICER/DATE/TIME)				<input type="checkbox"/> PAROLE AGENT <input type="checkbox"/> PAL		

DESCRIPTION PROVIDE BY		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED				
HAIR LENGTH <input type="checkbox"/> SHORT <input type="checkbox"/> MED. (HALF EAR) <input type="checkbox"/> LONG (COVER EAR) <input type="checkbox"/> COLLAR <input type="checkbox"/> SHOULDER <input type="checkbox"/> BALD/SHAVED <input type="checkbox"/> RECEDING	HAIR STYLE <input type="checkbox"/> NATURAL / AFRO <input type="checkbox"/> BRAIDED <input type="checkbox"/> CREWCUT <input type="checkbox"/> CURLY <input type="checkbox"/> PONYTAIL <input type="checkbox"/> PUNK <input type="checkbox"/> CONSERVATIVE	FACIAL HAIR <input type="checkbox"/> NONE <input type="checkbox"/> BEARD <input type="checkbox"/> MUSTACHE <input type="checkbox"/> BEARD & MUSTACHE <input type="checkbox"/> GOATEE <input type="checkbox"/> SIDEBURNS	COMPLEXION <input type="checkbox"/> LIGHT <input type="checkbox"/> MEDIUM <input type="checkbox"/> DARK <input type="checkbox"/> FRECKLED <input type="checkbox"/> ACNE <input type="checkbox"/> POCKMARK <input type="checkbox"/> BUDDY	APPEARANCE <input type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input type="checkbox"/> UNKEMPT <input type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED <input type="checkbox"/> BIRTHMARK <input type="checkbox"/> MOLE	SPEECH <input type="checkbox"/> LOW PITCH <input type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> STUTTER <input type="checkbox"/> ACCENT TYPE <input type="checkbox"/> OTHER	DEMEANOR <input type="checkbox"/> CALM <input type="checkbox"/> POLITE <input type="checkbox"/> APOLOGETIC <input type="checkbox"/> NERVOUS <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> OFFENSIVE <input type="checkbox"/> HOSTILE
OTHER DISTINCTIVE FEATURES <input type="checkbox"/> GOLD TOOTH <input type="checkbox"/> SILVER TOOTH <input type="checkbox"/> MISSING TEETH <input type="checkbox"/> GLASSES		<input type="checkbox"/> BODY ODOR TYPE <input type="checkbox"/> LARGE EYES <input type="checkbox"/> MISSING LIMBS	WEAPON USED CAL. _____ BARREL _____ <input type="checkbox"/> BLUDGEON / CLUB <input type="checkbox"/> HANDS / FEET <input type="checkbox"/> ROCK / BRICK			
		<input type="checkbox"/> REVOLVER <input type="checkbox"/> SEMI-AUTO PISTOL <input type="checkbox"/> SHOTGUN <input type="checkbox"/> RIFLE		<input type="checkbox"/> SAWED OFF <input type="checkbox"/> NICKEL <input type="checkbox"/> BLUED		
		<input type="checkbox"/> CUT / STAB <input type="checkbox"/> VEHICLE				

SUSPECT VEHICLE		VEHICLE WAS <input type="checkbox"/> SECURED AT SCENE <input type="checkbox"/> RELEASED TO OWNER		<input type="checkbox"/> TOW (#) _____ <input type="checkbox"/> FINGERPRINTED <input type="checkbox"/> HOLD (UNIT) _____		DAMAGE DETAILS, UNIQUE FEATURES		OTHER DESCRIPTION	
OWNER		ADDRESS		CITY <input type="checkbox"/> OAKLAND		ZIP		PHONE	
LIC. STATE/OR PLATE COLORS		YEAR MAKE		MODEL		STYLE		EXTERIOR COLOR	
								CONDITION <input type="checkbox"/> CLEAN <input type="checkbox"/> NEW <input type="checkbox"/> DIRTY <input type="checkbox"/> POOR	
								INTERIOR COLOR	
								<input type="checkbox"/> CLEAN <input type="checkbox"/> ODOR <input type="checkbox"/> DIRTY <input type="checkbox"/>	
Tires <input type="checkbox"/> STOCK <input type="checkbox"/> WIDE <input type="checkbox"/> SMALL <input type="checkbox"/>		RIMS <input type="checkbox"/> STOCK <input type="checkbox"/> CHROME <input type="checkbox"/> MAGS <input type="checkbox"/> SPOKE		LEVEL <input type="checkbox"/> STOCK <input type="checkbox"/> LOWERED <input type="checkbox"/> RAISED <input type="checkbox"/>		ROOF <input type="checkbox"/> VINYL <input type="checkbox"/> LANDAU <input type="checkbox"/> CONV		WINDOWS <input type="checkbox"/> INTED <input type="checkbox"/> BROKEN	
								SEATS <input type="checkbox"/> VINYL <input type="checkbox"/> BENCH <input type="checkbox"/> CLOTH <input type="checkbox"/> BUCKET	
								TRANSMISSION <input type="checkbox"/> AUTOMATIC <input type="checkbox"/> MANUAL	

REPORTED BY L. Johnson 7806P	SERIAL # 1	WATCH 1	DISTRICT 1	SUPERVISOR Sgt Elder	SERIAL #	PAGE 2 OF 4
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1478

CONTINUATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

04-104495

CRIME	<input type="checkbox"/> SUPPLEMENTAL	INCIDENT #	V1	VICTIM LAST, First, Mid
	243(e)(1) PC.	1478		
PECT LAST, First, Mid.	INCIDENT LOCATION	DATE OF THIS REPORT	ORIGINAL DATE REPORTED	
Stafford, Leonard	3FO 1731 San Pablo Av	1 Sep 04		

DOMESTIC VIOLENCE		<input type="checkbox"/> MARRIED	<input type="checkbox"/> DIVORCED	<input type="checkbox"/> CHILD-IN-COMMON	VICTIM RELOCATED TO ALTERNATE SHELTER <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
		<input type="checkbox"/> COHABITANT	<input checked="" type="checkbox"/> BOY / GIRL FRIENDS	<input type="checkbox"/> OTHER		
DATES OF PREVIOUS INCIDENTS	MONTH / YEAR	MONTH / YEAR	MONTH / YEAR	MONTH / YEAR	MONTH / YEAR	TOTAL OF RPTD INCIDENTS
INJURIES <input checked="" type="checkbox"/> MINOR <input type="checkbox"/> SEVERE <input type="checkbox"/> COMPLAINT OF PAIN <input type="checkbox"/> MODERATE <input type="checkbox"/> NONE	MEDICAL TREATMENT PROVIDED BY: <u>AMR/ACW</u>		RESTRAINING ORDER IN EFFECT <input type="checkbox"/> YES <input type="checkbox"/> NO			
<input type="checkbox"/> DESCRIBE: <u>Scratches to neck / L Arm</u>	PHOTO TAKEN <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		ORDER NO.	EXPIRATION DATE	ISSUING COURT	

I DECLARE UNDER PENALTY OF PERJURY
THAT I ADVISED THE SUSPECT OF THE
PROVISIONS OF THE RESTRAINING ORDER

OFFICER'S SIGNATURE

DATE

TIME

DOMESTIC VIOLENCE RESOURCE CARD GIVEN <input type="checkbox"/> YES <input type="checkbox"/> NO	IF MISDEMEANOR CASE, WAS VICTIM ADVISED OF CITIZENS ARREST PROCEDURES? <input type="checkbox"/> YES <input type="checkbox"/> NO IF VICTIM REFUSES TO PROSECUTE, LIST REASON:	VICTIM ADVISED TO NOTIFY THE INVESTIGATOR OF ANY ADDRESS OR PHONE NUMBER CHANGE <input type="checkbox"/> YES <input type="checkbox"/> NO
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CRIME	2	COMMON NAME	SECTION / SUBSECTION	CODE	PERTAINS TO: V:
CRIME	3	COMMON NAME	SECTION / SUBSECTION	CODE	PERTAINS TO: V:

ITEM #	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
<p>con't: Upon arrival, I met V1 who told me her boyfriend had just choked her and he was walking N/B 1800blk San Pablo Av. V1 pointed out St. Ofc K. McKellar and I searched the area and detained SI in the 1800blk of Jefferson St. I transported V1 to 18th St + Jefferson St where she made a positive identification of SI.</p> <p>I took a statement from V1. V1 told me that at 2330, 31 Aug 04, she got into a verbal dispute with her boyfriend (SI) ifo 1731 San Pablo Av. V1 stated that SI got angry and grabbed V1 by the neck and choked her. V1 advised SI also grabbed her right arm scratching her arm. V1 said security at 1731 San Pablo Av called police and when they arrived she pointed out SI. V1 said police</p>				
REPORTED BY	SERIAL #	WATCH	DISTRICT	SUPERVISOR
L. Johnson	78060	1	1	Sgt Elder
PAGE 3 OF 4				

O P D **ADDITIONAL INFORMATION REPORT**

OAKLAND POLICE DEPARTMENT
 455 - 7th Street
 Oakland, CA 94607

RD #

04-104495

CRIME	[] SUPPLEMENTAL	INCIDENT #	V1	VICTIM LAST, First, Mid
	243(e)(1) PC.	1428		
ECT LAST, First Mid.	INCIDENT LOCATION	DATE OF THIS REPORT	ORIGINAL DATE REPORTED	
Stafford, Leonard	1731 San Pablo Av	15 Sep 04		

ITEM #	QNTY	PROPERTY (and/or NARRATIVE)	SERIAL #	VALUE
		ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC		

Con't: Police stopped SI and she identified him and placed him under citizen's arrest.

VI had watery eyes and had obviously been crying. I observed several scratches on the right side of VI's neck and her right arm. There was also swelling to VI's neck and right arm. Evidence tech Vig responded to the scene and took photos of VI's injuries.

VI requested medical treatment and AMR responded to the scene and transported VI to A&E because she was having trouble breathing.

SI was arrested for 243(e)(1) PC and transported to the Oakland City Jail.

REPORTED BY	SERIAL #	WATCH	DISTRICT	SUPERVISOR	SERIAL #	PAGE	OF
L. Johnson	7806P	1	1	Sgt Elder		4	4

STATEMENT
Oakland Police Department

536-200-1 (6/93)

Page 1 of 1

2. Report No.

04-104495

1. Complainant [REDACTED]		Offense/Crime 243(e)(1) PC.	
3. Name of Person Giving Statement [REDACTED]		Sex/Race/DOB [REDACTED]	<input checked="" type="checkbox"/> Complainant <input type="checkbox"/> Reporting Person <input type="checkbox"/> Suspect <input type="checkbox"/> Witness
4. Residence Address [REDACTED]		City/Zip [REDACTED]	Phone () [REDACTED]
5. Employment (Name, Address, Phone, Occupation, Work Hours, Days Off) or Supplemental Information If Unemployed or Transient			
6. Statement Taken By L. Johnson		Serial No. 7806	Date 31 Aug 04 Time Started - Completed 2340-2359
7. Location Where Statement Taken 18th St & Jefferson St		Names, Addresses of Persons Present During Statement	

FOR VEHICLE COLLISIONS ONLY

8. License No.	State	Veh. Yr.	Make	Model	Type	Color(s)	Driver License No.	State
9. Registered Owner		Address		City/Zip		Residence/Business Phone ()		

ADMONITION: You have the right to remain silent. Anything you say can be used against you in a court of law. You have the right to talk to a lawyer and have him present with you while you are being questioned. If you cannot afford a lawyer, one will be appointed to represent you before any questioning if you wish one.

Subject's Initials

WAIVER: Do you understand each of these rights I have explained to you?

Having these rights in mind, do you wish to talk to us now?

Statement:

On 31 Aug 04 at about 11:30 P.M.
my boyfriend and I got into an
argument at Sweet Jimmie's at
~~1731~~ 1731 San Pablo Av. My boyfriend
is named Leonard Stafford. During
the argument Leonard grabbed
me by my neck and choked me.
He also grabbed my right arm
and scratched me. I am tired
of Leonard beating on me. I
want him arrested for choking
me. Security at Jimmie's called
the police and pointed out Leonard
who was walking north on San
Pablo Av. The police arrested
him and I identified him at
18th & Jefferson St. This is a true
Statement.

Signature of Person Giving Statement

Date

8/31/04

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

04-104495

CRIME 243(b)(1) PC ECT LAST, First Mid.	() SUPPLEMENTAL	INCIDENT # 1428	V1	VICTIM LAST First Mid [REDACTED]
INCIDENT LOCATION STAFFORD/LEONARD		DATE OF THIS REPORT 31 AUG 04		ORIGINAL DATE REPORTED

ITEM #	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE BRAND MODEL # SIZE COLOR MARKS, ETC	SERIAL #	VALUE
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Summary

ON 31 AUG 04, AT ABOUT 2345 hrs I WAS DISPATCHED TO THE 1700 BLK OF SAN PABLO AVE AS COVER OFFICER FOR (144) OFC L. JOHNSON. WE WERE RESPONDING TO A CALL OF DOMESTIC VIOLENCE. ON ARRIVAL WE MADE CONTACT W/ COMR [REDACTED] WHO STATED THAT SHE HAD GOTTEN INTO AN ARGUMENT WITH HER BOYFRIEND STAFFORD, IN FRONT OF SWEET TIMMIE'S LOUNGE AND THAT HE CHOKED HER.

AFTER TALKING W/ MURPHY OFC. JOHNSON AND I LOCATED STAFFORD IN THE 1800 BLK OF JEFFERSON, APPROX ONE BLOCK AWAY FROM WHERE THE INCIDENT OCCURRED. [REDACTED] IDENTIFIED STAFFORD AS HER BOYFRIEND, AND THE ONE WHO CHOKED HER.

AT THIS POINT STAFFORD WAS PLACED UNDER ARREST FOR 243(b)(1) PC. STAFFORD THEN GAVE SPONTANEOUS STATEMENT TO THE FACT THAT "OFC SEE WE WERE DRINKING ALL NIGHT YOU KNOW, GAIL. THEN WE STARTED ARGUING YOU KNOW THEN SHE CHOKED ME, SO I CHOKED HER BACK I LOVE HER, I WOULD NOT HURT HER. THAT'S MY WIFE. JUST LET ME TALK TO HER. I WAS ON MY WAY TO MY BROTHERS HOUSE MAN THIS IS REAL SHIT."

I ASKED STAFFORD IF HE WANTED TO GIVE A STATEMENT HE SAID YES I ADMONISHED HIM THEN HE REFUSED, SAYING "OFC. McKEELAN I JUST WANT TO TALK TO YOU MAN TO MAN YOU KNOW HOW IT IS THAT'S MY WOMAN, THAT'S NOT NOTHING, IF YOU LET ME TALK TO HER, SHE WON'T LET ME GO TO JAIL."

I TRANSPORTED STAFFORD TO BPD JAIL

REPORTED BY K. McKEELAN	SERIAL # 7860	WATCH 1	DISTRICT MEND	SUPERVISOR SGT. N. B. DEER	SERIAL #	PAGE 1 OF 1
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**SACRAMENTO COUNTY
PROBATION DEPARTMENT**
3201 Florin-Perkins Road
Sacramento CA 95826-3900



DONNA

To: OAKLAND PD RECORDS	From: GARY V. COLEMAN, Sr.DPO
Fax No.: [REDACTED]	Tel. No.: [REDACTED]
Agency: OAKLAND PD	Fax No.: [REDACTED]
Pages Following Cover Page: 0	Sacramento County Probation Department

Notes:

PLEASE FAX CRIME REPORT # 04-104495 04-1115847 BART PD #04-38251 TO THE
ABOVE FAX #. IT IS NEEDED FOR RESTITUTION
DETERMINATION, AS ORDERED BY THE COURT. REGARDING
DEFENDANT, LEONARD STAFFORD XREF: [REDACTED]
DOB: 2/17/77
ADDRESS: _____

DATE OF ARREST: _____

OFFENSE: _____

OAKLAND POLICE DEPARTMENT

Information Services Division

Facsimile face sheet

Records Section

Room #306

455 7th Street

Oakland, Ca 94607-3985



Voice: [REDACTED]

FAX: [REDACTED]

Receiving FAX number: 1 [REDACTED] [REDACTED]

SAVE ORIGINAL: YES ☐ NO ☐

Attention: G.V. COLEMAN-Sr DPO Agency: SACRAMENTO Co. PROB.

Subject: STAFFORD, Leonard

Message: The report you requested follow:
If you have any problem contacting
B.A.R.T PD... call me back after
1100 HR & I will try to assist you.

Person sending: DONNA- 44462 Phone #: S/A

Page 1 of 8 Date: 30 Sept 04 Time: 0957 HR

The document being facsimiled is intended only for the use of the individual or entity to which it is addressed, and may contain information that is privileged, confidential and exempt from disclosure under applicable law. If you are not the intended recipient, or the employee or agent responsible for delivering the document to the intended recipient, any dissemination, distribution or copying of the communication is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone and return the original document to the above address via the United States Postal Service.

CRIME REPORT		Oakland Police Department 455 - 7 th Street Oakland, CA 94607-3985		ASSIGN TO: <u>Vice</u>		RD #	
ROUTING		Outside Reporting Agency		Case No.	Police Beat 4	CP Beat 4X	Incident No.
<input type="checkbox"/> CID		VICTIM 1		Last, First, Mid State Of California		<input checked="" type="checkbox"/> Business Name	<input type="checkbox"/> Local / State / Federal
<input type="checkbox"/> SD <input type="checkbox"/> VICE <input type="checkbox"/> CSD <input type="checkbox"/> TRAFFIC <input type="checkbox"/> D.A. <input type="checkbox"/> VIC/WIT		Home Address		City Oakland		Zip	Home/Msg. Phone
<input type="checkbox"/> _____		Business Address / School		City Oakland		Zip	Work Phone
<input type="checkbox"/> _____		455 7th Street		D.L. Number		State	<input type="checkbox"/> Domestic Violence <input type="checkbox"/> Victim Injured <input type="checkbox"/> Sex Assault Victim Request Conf.
<input type="checkbox"/> _____		Occupation		Working Hours		<input type="checkbox"/> Victim's Support <input type="checkbox"/> Resource Info Provided	
ADDITIONAL PERSON		<input checked="" type="checkbox"/> R/P <input type="checkbox"/> Parent <input type="checkbox"/> Witness 1		Last, First, Mid K. Mckellar		7860p	Sex Race D.O.B. Age
Home Address		City Oakland		Zip		Home/Msg. Phone	
Business Address / School		City Oakland		Zip		Work Phone ext. 3455	
455 7th. Street		City Oakland		Zip		Work Phone ext. 3455	
LOCATION		POINT OF ENTRY		LOCATION P.O.E.		METHOD OF ENTRY	
<input type="checkbox"/> BANK/ATM <input type="checkbox"/> CONVENT MKT <input type="checkbox"/> GAS STATION <input type="checkbox"/> OTHER COMM. <input type="checkbox"/> RESIDENCE <input type="checkbox"/> STREET <input type="checkbox"/> MISC.		<input type="checkbox"/> DOOR <input type="checkbox"/> WINDOW <input type="checkbox"/> GARAGE <input type="checkbox"/> ADJ. PREM. <input type="checkbox"/> VENT/SKYLIGHT <input type="checkbox"/> OTHER		<input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> SIDE <input type="checkbox"/> ROOF <input type="checkbox"/> UNK.		<input type="checkbox"/> OPEN/UNLOCKED <input type="checkbox"/> FORCED SCREEN <input type="checkbox"/> CUTTING DEVICE <input type="checkbox"/> BODY FORCE <input type="checkbox"/> PRY TOOL <input type="checkbox"/> CHANNEL LOCKS <input type="checkbox"/> ATTEMPT FORCE	
<input type="checkbox"/> BREAK GLASS <input type="checkbox"/> REMOVE DOOR <input type="checkbox"/> REMOVE WINDOW <input type="checkbox"/> POSS. EMPLOYEE <input type="checkbox"/> KEY <input type="checkbox"/> WATER METER <input type="checkbox"/> NONE <input type="checkbox"/> UNK		<input type="checkbox"/> BURGLARY <input type="checkbox"/> AUTO <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> OTHER <input type="checkbox"/> ALARM RESP		<input type="checkbox"/> WEAPON USED <input type="checkbox"/> FIREARM <input type="checkbox"/> CUT/STAB INSTR <input type="checkbox"/> HANDS, FEET, FIST <input type="checkbox"/> CHEMICAL <input type="checkbox"/> NONE <input type="checkbox"/> OTHER			
<input type="checkbox"/> Gang Related		<input type="checkbox"/> Hate Crime Motivated By:		<input type="checkbox"/> Race <input type="checkbox"/> Ethnicity <input type="checkbox"/> Religion		<input type="checkbox"/> Sexual Orientation <input type="checkbox"/> Physical Disability <input type="checkbox"/> Mental Disability <input type="checkbox"/> Gender	
CRIME		Common Name Disorderly House		Section/Subsection 25601 ABC		Code ABC	
Location (Address/Block No./Intersection)		<input type="checkbox"/> OHA <input checked="" type="checkbox"/> ABC		Occurred		Date	
1731 San Pablo Ave				On or From		10-Mar-04	
LOSS		<input type="checkbox"/> None		To		10-Mar-04	
(CHECK ALL THAT APPLY) 1 <input type="checkbox"/> CURRENCY / NOTES 2 <input type="checkbox"/> CLOTHING / FURS 3 <input type="checkbox"/> JEWELRY / PRECIOUS METAL 4 <input type="checkbox"/> FIREARMS 5 <input type="checkbox"/> OFFICE EQUIPMENT 6 <input type="checkbox"/> TVS, RADIO, STEREO		7 <input type="checkbox"/> HOUSEHOLD GOODS 8 <input type="checkbox"/> CONSUMABLE GOODS 9 <input type="checkbox"/> LIVESTOCK 10 <input type="checkbox"/> MOTOR VEHICLES 11 <input type="checkbox"/> MISCELLANEOUS		TYPE OF THEFT <input type="checkbox"/> PICKPOCKET <input type="checkbox"/> PURSENATCH <input type="checkbox"/> AUTO ACCESS <input type="checkbox"/> AUTO CLOUT <input type="checkbox"/> SHOPLIFTING <input type="checkbox"/> BICYCLE <input type="checkbox"/> COIN OP. DEVICE <input type="checkbox"/> FROM BUILDING <input type="checkbox"/> OTHER		Reported 11-Mar-04	
U.C.R. CODE		(LIST MOST EXPENSIVE ITEM ABOVE)		SOLVABILITY FACTORS (Check All That Apply) <input type="checkbox"/> SURVEILLANCE PHOTO <input type="checkbox"/> SERIOUS INJURY <input type="checkbox"/> EVIDENCE <input type="checkbox"/> SUSPECT IN-CUSTODY		<input type="checkbox"/> NAMED SUSPECT <input type="checkbox"/> IDENTIFIABLE SUSPECT <input type="checkbox"/> R/O REQUESTS INVEST	
<input type="checkbox"/> The VICTIM / REPORTING PARTY contacted the police department to report the THEFT / LOSS / DAMAGE of the listed property. There are no known suspects. This report is made to alert the police. No narrative was completed.							
VICTIM VEHICLE		License No.		State		Tow Number	
<input type="checkbox"/> Car <input type="checkbox"/> Truck <input type="checkbox"/> Other		Year		Make		Model	
<input type="checkbox"/> Stolen <input type="checkbox"/> Bicycle		Mens <input type="checkbox"/> Womens		Mtn. <input type="checkbox"/> Road		Color	
PROPERTY / NARRATIVE		<input type="checkbox"/> Loss <input type="checkbox"/> Evidence <input type="checkbox"/> Safekeeping <input type="checkbox"/> Recovered		<input type="checkbox"/> Interior <input type="checkbox"/> Exterior <input type="checkbox"/> Garage		Serial No.	
Item		Qty.		Item Type, Brand, Model No., Size, Color, Marks, Etc.		Serial No.	
AOD and Juvenile Reporting Code (Refer to AOD Code Card)		AOD		Setting (2 Digit #)		Juvenile	
Total Number Of		Vict		Wit		Susp	
1		1		1		1	
Photos Taken		Evidence Collected		Tech. On Scene		Rec. Value	
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		Loss Value	
Reported By K. MCKELLAR		Serial No. 7860P		Watch 1		Area ME	
Supervisor SGT. D. NORFLEET 7531P		Serial No.		Reviewer		Serial No.	

OAKLAND

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD # 04-24505

CRIME 601 ABC Disorderly House	<input type="checkbox"/> SUPPLEMENTAL	INCIDENT # V 1	VICTIM LAST, First, Mid State of California
PERPETRATOR LAST, First, Mid unknown	INCIDENT LOCATION 550 Blk. Of 17 th . Street		DATE OF THIS REPORT 11 Mar 04
		ORIGINAL DATE REPORTED 11 Mar 04	
PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC.			
ITEM		QUANTITY	VALUE

Summary:

On 10 March 2004, at approx. 0154 hrs. I was dispatched to the 1700 blk. of San Pablo Ave. to help in the investigation of a shooting 245P.C On arrival I made contact with Ofc. M. Hicks 7359P who was working a special detail at sweet Jimmie's night club, located at 1731 San Pablo Ave.

Ofc. M. Hicks told me that a male black later identified as [REDACTED] DOB [REDACTED] walked up to him and told him that he was shot in the abdomen. Ofc. M. Hicks asked where it happened. [REDACTED] told him that it occurred in the 550 blk. of 17th. Street, around the corner from Sweet Jimmie's night club.

[REDACTED] stated that he had just left "Sweet Jimmie's night club with some friends. While standing in a parking lot located around the corner from the night club. when he heard someone call out his name. Then he heard two shots, ring out and he felt pain in his lower body. AMR was called and [REDACTED] was transported to ACH where he was treated for his injuries.

This is not the first shooting that has occurred around Sweet Jimmie's night club. Over the past year there has been a number of stabbing and shootings, within approximately 100 feet of the club. On this night there was a very large crowd that caused a small traffic jam around the immediate area. This action took the addition resources of two districts from the city. Which left the city drastically short of police services, for approximately three hours.

Reported By Ko McKellar	Serial No 7860	Watch 1	Area MID	Supervisor SGT. D NORRIS	Serial No 7531	Page 3 of 2
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P R E P O R T		OAKLAND POLICE DEPARTMENT 455 - 7 th STREET OAKLAND, CA 94607-3985		Assign To: <u>Vice</u>		RD # <u>04-00062</u>	
<input type="checkbox"/> CID		Outside Reporting Agency		Case No.		Police Beat <u>4</u>	
<input type="checkbox"/> YSD		Last, First, Mid		<input type="checkbox"/> Business Name <input checked="" type="checkbox"/> Local / State / Federal		Sex Race D.O.B. Age	
<input type="checkbox"/> VICE		Home Address		City <input type="checkbox"/> Oakland Zip		Home/Msg. Phone	
<input type="checkbox"/> CSD		Business Address / School		City <input type="checkbox"/> Oakland Zip		Work Phone	
<input type="checkbox"/> TRAFFIC		Occupation		D.L. Number State		<input type="checkbox"/> Domestic Violence <input type="checkbox"/> Victim Injured <input type="checkbox"/> Sex Assault Victim Request Conf.	
<input type="checkbox"/> D.A. VIC/WIT		Working Hours		<input type="checkbox"/> Victim's Support <input type="checkbox"/> Resource Info Provided			
<input type="checkbox"/>		Last, First, Mid		Sex Race D.O.B. Age			
<input type="checkbox"/>		Home Address		City <input type="checkbox"/> Oakland Zip		Home/Msg. Phone	
<input type="checkbox"/>		Business Address / School		City <input type="checkbox"/> Oakland Zip		Work Phone	
<input type="checkbox"/>		LOCATION		POINT OF ENTRY		LOCATION P.O.E.	
<input type="checkbox"/>		<input type="checkbox"/> BANK/ATM		<input type="checkbox"/> DOOR		<input type="checkbox"/> FRONT	
<input type="checkbox"/>		<input type="checkbox"/> CONVENT MKT		<input type="checkbox"/> WINDOW		<input type="checkbox"/> REAR	
<input type="checkbox"/>		<input type="checkbox"/> GAS STATION		<input type="checkbox"/> GARAGE		<input type="checkbox"/> SIDE	
<input type="checkbox"/>		<input type="checkbox"/> OTHER COMM.		<input type="checkbox"/> ADJ. PREM.		<input type="checkbox"/> ROOF	
<input type="checkbox"/>		<input type="checkbox"/> RESIDENCE		<input type="checkbox"/> VENT/SKYLIGHT		<input type="checkbox"/> UNK.	
<input type="checkbox"/>		<input type="checkbox"/> STREET		<input type="checkbox"/> OTHER			
<input type="checkbox"/>		<input type="checkbox"/> MISC.					
<input type="checkbox"/>		<input type="checkbox"/> OPEN/UNLOCKED		<input type="checkbox"/> FORCED SCREEN		<input type="checkbox"/> CUTTING DEVICE	
<input type="checkbox"/>		<input type="checkbox"/> BODY FORCE		<input type="checkbox"/> PRY TOOL		<input type="checkbox"/> CHANNEL LOCKS	
<input type="checkbox"/>		<input type="checkbox"/> ATTEMPT FORCE					
<input type="checkbox"/>		<input type="checkbox"/> BREAK GLASS		<input type="checkbox"/> REMOVE DOOR		<input type="checkbox"/> REMOVE WINDOW	
<input type="checkbox"/>		<input type="checkbox"/> POSS. EMPLOYEE		<input type="checkbox"/> KEY		<input type="checkbox"/> WATER METER	
<input type="checkbox"/>		<input type="checkbox"/> NONE		<input type="checkbox"/> UNK			
<input type="checkbox"/>		<input type="checkbox"/> BURGLARY		<input type="checkbox"/> AUTO		<input type="checkbox"/> RESIDENTIAL	
<input type="checkbox"/>		<input type="checkbox"/> COMMERCIAL		<input type="checkbox"/> OTHER		<input type="checkbox"/> ALARM RESP	
<input type="checkbox"/>		<input type="checkbox"/> FIREARM		<input type="checkbox"/> CUT/STAB INSTR		<input type="checkbox"/> HANDS, FEET, FIST	
<input type="checkbox"/>		<input type="checkbox"/> CHEMICAL		<input type="checkbox"/> NONE		<input type="checkbox"/> OTHER	
<input type="checkbox"/>		<input type="checkbox"/> Gender					
<input type="checkbox"/>		<input type="checkbox"/> Gang Related		<input type="checkbox"/> Hate Crime Motivated By:		<input type="checkbox"/> Race <input type="checkbox"/> Ethnicity <input type="checkbox"/> Religion <input type="checkbox"/> Sexual Orientation <input type="checkbox"/> Physical Disability <input type="checkbox"/> Mental Disability	
<input type="checkbox"/>		Common Name		Section/Subsection		Code	
<input type="checkbox"/>		Location (Address/Block No./Intersection)		Occurred		Date	
<input type="checkbox"/>		IFD 1731 San Pablo		On or From		1 Jan 04 0205 THU	
<input type="checkbox"/>		TYPE OF THEFT		To		Reported	
<input type="checkbox"/>		<input type="checkbox"/> PICKPOCKET					
<input type="checkbox"/>		<input type="checkbox"/> PURSENATCH					
<input type="checkbox"/>		<input type="checkbox"/> AUTO ACCESS					
<input type="checkbox"/>		<input type="checkbox"/> AUTO CLOUT					
<input type="checkbox"/>		<input type="checkbox"/> SHOPLIFTING					
<input type="checkbox"/>		<input type="checkbox"/> BICYCLE					
<input type="checkbox"/>		<input type="checkbox"/> COIN OP. DEVICE					
<input type="checkbox"/>		<input type="checkbox"/> FROM BUILDING					
<input type="checkbox"/>		<input type="checkbox"/> OTHER					
<input type="checkbox"/>		<input type="checkbox"/> LOSS					
<input type="checkbox"/>		<input type="checkbox"/> None					
<input type="checkbox"/>		<input type="checkbox"/> CURRENCY / NOTES					
<input type="checkbox"/>		<input type="checkbox"/> CLOTHING / FURS					
<input type="checkbox"/>		<input type="checkbox"/> JEWELRY / PRECIOUS METAL					
<input type="checkbox"/>		<input type="checkbox"/> FIREARMS					
<input type="checkbox"/>		<input type="checkbox"/> OFFICE EQUIPMENT					
<input type="checkbox"/>		<input type="checkbox"/> TVS, RADIO, STEREO					
<input type="checkbox"/>		<input type="checkbox"/> HOUSEHOLD GOODS					
<input type="checkbox"/>		<input type="checkbox"/> CONSUMABLE GOODS					
<input type="checkbox"/>		<input type="checkbox"/> LIVESTOCK					
<input type="checkbox"/>		<input type="checkbox"/> MOTOR VEHICLES					
<input type="checkbox"/>		<input type="checkbox"/> MISCELLANEOUS					
<input type="checkbox"/>		U.C.R. CODE					
<input type="checkbox"/>		(LIST MOST EXPENSIVE ITEM ABOVE)					
<input type="checkbox"/>		The VICTIM / REPORTING PARTY contacted the police department to report the THEFT / LOSS / DAMAGE of the listed property.					
<input type="checkbox"/>		There are no known suspects. This report is made to alert the police. No narrative was completed.					
<input type="checkbox"/>		License No.		State		Secured at the Scene	
<input type="checkbox"/>		Make		Model		Hold (Unit)	
<input type="checkbox"/>		Year		Body Type		Fingerprinted	
<input type="checkbox"/>		Color		Brand		Released to the Owner	
<input type="checkbox"/>		Mens		Mtn.		Towed	
<input type="checkbox"/>		Womens		Road		Stolen	
<input type="checkbox"/>		Stolen Bicycle		Color		Vin No.	
<input type="checkbox"/>		Speed		License No.		Serial No.	
<input type="checkbox"/>		PROPERTY / NARRATIVE		Loss		Evidence	
<input type="checkbox"/>		Safekeeping		Recovered		Interior	
<input type="checkbox"/>		Exterior		Garage			
<input type="checkbox"/>		Item		Qty		Item Type, Brand, Model No., Size, Color, Marks, Etc.	
<input type="checkbox"/>		Serial No.				\$ Value	
<input type="checkbox"/>		AOD and Juvenile Reporting Code (Refer to AOD Code Card)					
<input type="checkbox"/>		AOD		Setting (2 Digit #)		Juvenile	
<input type="checkbox"/>		Vict.		Wit.		Susp.	
<input type="checkbox"/>		Arr.		Phone Report		Photos Taken	
<input type="checkbox"/>		Yes		No		Evidence Collected	
<input type="checkbox"/>		Yes		No		Tech: On Scene	
<input type="checkbox"/>		Yes		No		Tech Tag Left	
<input type="checkbox"/>		Yes		No		Rec. Value	
<input type="checkbox"/>		Yes		No		Loss Value	
<input type="checkbox"/>		Page 1					
<input type="checkbox"/>		of 5					
<input type="checkbox"/>		Reported By		Serial No.		Watch	
<input type="checkbox"/>		Area		Supervisor		Serial No.	
<input type="checkbox"/>		Reviewer				Serial No.	
<input type="checkbox"/>		G. Melero		BOSAP		CET 5	
<input type="checkbox"/>		Sgt. Rill					

OPD
POLICE REPORT

**SUSPECT
REPORT**

Oakland Police Department
455 - 7th Street
Oakland, CA 94607

RD #

04-09062

CRIME 11351.5 HES		INCIDENT NO. V1		VICTIM LAST, First, Mid.	
SUSPECT		Number 1		LAST, First, Mid. Hill, Kenneth Edward	
SEX M		RACE B		D.O.B. [REDACTED]	
AGE [REDACTED]		HEIGHT 5'11"		WEIGHT 190	
HAIR Bald		EYES Bru		DL. NUMBER [REDACTED]	
PFN [REDACTED]		RELATIONSHIP TO VICTIM		INCUSTODY THIS OFFENSE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
CITE #		HOME ADDRESS [REDACTED]		CITY <input type="checkbox"/> OAKLAND ZIP [REDACTED]	
APT. NO.		HOME /MSG. PHONE		WORK ADDRESS (Name of Business) (School) [REDACTED]	
CITY <input type="checkbox"/> OAKLAND ZIP		OCCUPATION		WORK PHONE	
ADMONISHMENT: ADMONISHED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		REFUSED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		STATEMENT <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
BY: (OFFICER/DATE/TIME): G. Melero 805SP / 0210 / 1 Jan 04		[] PROBATION		COUNTY _____ Officer _____	
[] PAROLE		AGENT _____		[] PAL	
DESCRIPTION PROVIDE BY		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED 805SP Bk sweater, Blue Jeans			
HAIR LENGTH <input type="checkbox"/> SHORT <input type="checkbox"/> MED. (HALF EAR) <input type="checkbox"/> LONG (COVER EAR) <input type="checkbox"/> COLLAR <input type="checkbox"/> SHOULDER <input checked="" type="checkbox"/> BALD/SHAVED <input type="checkbox"/> RECEDING		HAIR STYLE <input type="checkbox"/> NATURAL / AFRO <input type="checkbox"/> BRAIDED <input type="checkbox"/> CREWCUT <input type="checkbox"/> CURLY <input type="checkbox"/> PONYTAIL <input type="checkbox"/> PUNK <input type="checkbox"/> CONSERVATIVE		FACIAL HAIR <input type="checkbox"/> NONE <input type="checkbox"/> BEARD <input type="checkbox"/> MUSTACHE <input type="checkbox"/> BEARD & MUSTACHE <input checked="" type="checkbox"/> GOATEE <input type="checkbox"/> SIDEBURNS	
COMPLEXION <input type="checkbox"/> LIGHT <input type="checkbox"/> MEDIUM <input checked="" type="checkbox"/> DARK <input type="checkbox"/> FRECKLED <input type="checkbox"/> ACNE <input type="checkbox"/> ROCKMARK <input type="checkbox"/> BUDDY		APPEARANCE <input checked="" type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input type="checkbox"/> UNKEMPT <input type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED <input type="checkbox"/> BIRTHMARK <input type="checkbox"/> MOLE		SPEECH <input type="checkbox"/> LOW PITCH <input type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> STUTTER <input type="checkbox"/> ACCENT TYPE _____ <input type="checkbox"/> OTHER	
DEMEANOR <input type="checkbox"/> CALM <input type="checkbox"/> POLITE <input type="checkbox"/> APOLOGETIC <input type="checkbox"/> NERVOUS <input type="checkbox"/> PROFESSIONAL <input checked="" type="checkbox"/> OFFENSIVE <input checked="" type="checkbox"/> HOSTILE <input checked="" type="checkbox"/> VIOLENT		OTHER DISTINCTIVE FEATURES <input type="checkbox"/> GOLD TOOTH <input type="checkbox"/> MISSING TEETH <input type="checkbox"/> LARGE EYES <input type="checkbox"/> SILVER TOOTH <input type="checkbox"/> GLASSES <input type="checkbox"/> MISSING LIMBS			
WEAPON USED CAL. _____ BARREL _____ <input type="checkbox"/> BLUDGEON / CLUB <input type="checkbox"/> HANDS / FEET <input type="checkbox"/> ROCK / BRICK		<input type="checkbox"/> REVOLVER <input type="checkbox"/> SEMI-AUTO PISTOL <input type="checkbox"/> SHOTGUN <input type="checkbox"/> RIFLE		<input type="checkbox"/> SAWED OFF <input type="checkbox"/> NICKEL <input type="checkbox"/> BLUEED	
<input type="checkbox"/> CUT / STAB <input type="checkbox"/> VEHICLE		ADMONISHMENT: ADMONISHED <input type="checkbox"/> YES <input type="checkbox"/> NO			
REFUSED <input type="checkbox"/> YES <input type="checkbox"/> NO		STATEMENT <input type="checkbox"/> YES <input type="checkbox"/> NO		[] PROBATION	
COUNTY _____ Officer _____		[] PAROLE		AGENT _____ [] PAL	
BY: (OFFICER/DATE/TIME)		DESCRIPTION PROVIDE BY			
CLOTHING, SCARS, MARKS, TATOOS, WORDS USED					
SUSPECT		Number		LAST, First, Mid.	
SEX		RACE		D.O.B.	
AGE		HEIGHT		WEIGHT	
HAIR		EYES		DL. NUMBER	
PFN		RELATIONSHIP TO VICTIM		INCUSTODY THIS OFFENSE <input type="checkbox"/> YES <input type="checkbox"/> NO	
CITE #		HOME ADDRESS		CITY <input type="checkbox"/> OAKLAND ZIP	
APT. NO.		HOME /MSG. PHONE		WORK ADDRESS (Name of Business) (School)	
CITY <input type="checkbox"/> OAKLAND ZIP		OCCUPATION		WORK PHONE	
ADMONISHMENT: ADMONISHED <input type="checkbox"/> YES <input type="checkbox"/> NO		REFUSED <input type="checkbox"/> YES <input type="checkbox"/> NO		STATEMENT <input type="checkbox"/> YES <input type="checkbox"/> NO	
BY: (OFFICER/DATE/TIME)		[] PROBATION		COUNTY _____ Officer _____	
[] PAROLE		AGENT _____		[] PAL	
DESCRIPTION PROVIDE BY		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED			
HAIR LENGTH <input type="checkbox"/> SHORT <input type="checkbox"/> MED. (HALF EAR) <input type="checkbox"/> LONG (COVER EAR) <input type="checkbox"/> COLLAR <input type="checkbox"/> SHOULDER <input type="checkbox"/> BALD/SHAVED <input type="checkbox"/> RECEDING		HAIR STYLE <input type="checkbox"/> NATURAL / AFRO <input type="checkbox"/> BRAIDED <input type="checkbox"/> CREWCUT <input type="checkbox"/> CURLY <input type="checkbox"/> PONYTAIL <input type="checkbox"/> PUNK <input type="checkbox"/> CONSERVATIVE		FACIAL HAIR <input type="checkbox"/> NONE <input type="checkbox"/> BEARD <input type="checkbox"/> MUSTACHE <input type="checkbox"/> BEARD & MUSTACHE <input type="checkbox"/> GOATEE <input type="checkbox"/> SIDEBURNS	
COMPLEXION <input type="checkbox"/> LIGHT <input type="checkbox"/> MEDIUM <input type="checkbox"/> DARK <input type="checkbox"/> FRECKLED <input type="checkbox"/> ACNE <input type="checkbox"/> ROCKMARK <input type="checkbox"/> BUDDY		APPEARANCE <input type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input type="checkbox"/> UNKEMPT <input type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED <input type="checkbox"/> BIRTHMARK <input type="checkbox"/> MOLE		SPEECH <input type="checkbox"/> LOW PITCH <input type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> STUTTER <input type="checkbox"/> ACCENT TYPE _____ <input type="checkbox"/> OTHER	
DEMEANOR <input type="checkbox"/> CALM <input type="checkbox"/> POLITE <input type="checkbox"/> APOLOGETIC <input type="checkbox"/> NERVOUS <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> OFFENSIVE <input type="checkbox"/> HOSTILE		OTHER DISTINCTIVE FEATURES <input type="checkbox"/> GOLD TOOTH <input type="checkbox"/> MISSING TEETH <input type="checkbox"/> LARGE EYES <input type="checkbox"/> SILVER TOOTH <input type="checkbox"/> GLASSES <input type="checkbox"/> MISSING LIMBS			
WEAPON USED CAL. _____ BARREL _____ <input type="checkbox"/> BLUDGEON / CLUB <input type="checkbox"/> HANDS / FEET <input type="checkbox"/> ROCK / BRICK		<input type="checkbox"/> REVOLVER <input type="checkbox"/> SEMI-AUTO PISTOL <input type="checkbox"/> SHOTGUN <input type="checkbox"/> RIFLE		<input type="checkbox"/> SAWED OFF <input type="checkbox"/> NICKEL <input type="checkbox"/> BLUEED	
<input type="checkbox"/> CUT / STAB <input type="checkbox"/> VEHICLE		ADMONISHMENT: ADMONISHED <input type="checkbox"/> YES <input type="checkbox"/> NO			
REFUSED <input type="checkbox"/> YES <input type="checkbox"/> NO		STATEMENT <input type="checkbox"/> YES <input type="checkbox"/> NO		[] PROBATION	
COUNTY _____ Officer _____		[] PAROLE		AGENT _____ [] PAL	
BY: (OFFICER/DATE/TIME)		DESCRIPTION PROVIDE BY			
CLOTHING, SCARS, MARKS, TATOOS, WORDS USED					
SUSPECT VEHICLE		VEHICLE WAS <input type="checkbox"/> SECURED AT SCENE <input type="checkbox"/> FINGERPRINTED <input type="checkbox"/> RELEASED TO OWNER <input type="checkbox"/> HOLD (UNIT)		DAMAGE DETAILS, UNIQUE FEATURES	
OWNER		ADDRESS		CITY <input type="checkbox"/> OAKLAND ZIP	
PHONE		LIC./STATE/OR PLATE COLORS		YEAR	
MAKE		MODEL		STYLE	
EXTERIOR COLOR		CONDITION <input type="checkbox"/> CLEAN <input type="checkbox"/> NEW <input type="checkbox"/> DIRTY <input type="checkbox"/> POOR		INTERIOR COLOR	
INTERIOR <input type="checkbox"/> CLEAN <input type="checkbox"/> ODOR <input type="checkbox"/> DIRTY <input type="checkbox"/>		WINDOWS <input type="checkbox"/> INTED <input type="checkbox"/> BROKEN		SEATS <input type="checkbox"/> VINYL <input type="checkbox"/> BENCH <input type="checkbox"/> CLOTH <input type="checkbox"/> BUCKET	
TRANSMISSION <input type="checkbox"/> AUTOMATIC <input type="checkbox"/> MANUAL		ROOF <input type="checkbox"/> VINYL <input type="checkbox"/> LANDAU <input type="checkbox"/> CONV		RIMS <input type="checkbox"/> STOCK <input type="checkbox"/> CHROME <input type="checkbox"/> MAGS <input type="checkbox"/> SPOKE	
LEVEL <input type="checkbox"/> STOCK <input type="checkbox"/> LOWERED <input type="checkbox"/> RAISED <input type="checkbox"/>		LEVEL		LEVEL	
REPORTED BY		SERIAL #		WATCH	
DISTRICT		SUPERVISOR		SERIAL #	
G. Melero		805SP		CR 5	
Sgt. Kelly					
PAGE 2 OF 5					

O P D
POLICE REPORT

**Victim
Witness**

Oakland Police Department
455 - 7th Street
Oakland, CA 94607

RD #

04-00062

CRIME 11351.5 H&S	INCIDENT NO.	V1	VICTIM LAST, First, Mid. <input type="checkbox"/> Business Name				
ADDITIONAL PERSONS		CLASS: V W R/P	LINKED TO: V R/P W S				
CLASS W	LINKED TO S	LAST, First, Mid <input type="checkbox"/> Business Name		SEX M	RACE B	D.O.B. [REDACTED]	AGE
HOME ADDRESS		CITY	<input type="checkbox"/> OAKLAND	ZIP	HOME PHONE		
BUSINESS ADDRESS / SCHOOL		CITY	<input checked="" type="checkbox"/> OAKLAND	ZIP	WORK PHONE		
OCCUPATION		WORKING HOURS		D.L. NUMBER / STATE			
VICTIM ACTIVITY: (Check All That Apply) <input type="checkbox"/> AT HOME <input type="checkbox"/> ON STREET <input type="checkbox"/> IN HOSPITAL <input type="checkbox"/> WALKING <input type="checkbox"/> DRIVING <input type="checkbox"/> AT SCHOOL <input type="checkbox"/> SHOPPING CNTR <input type="checkbox"/> AT WORK <input type="checkbox"/> ON VACATION <input type="checkbox"/> IN JAIL <input type="checkbox"/> JOGGING <input type="checkbox"/> SLEEPING <input type="checkbox"/> AT PARK							
CLASS [REDACTED]	LINKED TO [REDACTED]	LAST, First, Mid <input type="checkbox"/> Business Name		SEX	RACE	D.O.B.	AGE
HOME ADDRESS		CITY	<input type="checkbox"/> OAKLAND	ZIP	HOME PHONE		
BUSINESS ADDRESS / SCHOOL		CITY	<input type="checkbox"/> OAKLAND	ZIP	WORK PHONE		
OCCUPATION		WORKING HOURS		D.L. NUMBER / STATE			
VICTIM ACTIVITY: (Check All That Apply) <input type="checkbox"/> AT HOME <input type="checkbox"/> ON STREET <input type="checkbox"/> IN HOSPITAL <input type="checkbox"/> WALKING <input type="checkbox"/> DRIVING <input type="checkbox"/> AT SCHOOL <input type="checkbox"/> SHOPPING CNTR <input type="checkbox"/> AT WORK <input type="checkbox"/> ON VACATION <input type="checkbox"/> IN JAIL <input type="checkbox"/> JOGGING <input type="checkbox"/> SLEEPING <input type="checkbox"/> AT PARK							
CLASS [REDACTED]	LINKED TO [REDACTED]	LAST, First, Mid <input type="checkbox"/> Business Name		SEX	RACE	D.O.B.	AGE
HOME ADDRESS		CITY	<input type="checkbox"/> OAKLAND	ZIP	HOME PHONE		
BUSINESS ADDRESS / SCHOOL		CITY	<input type="checkbox"/> OAKLAND	ZIP	WORK PHONE		
OCCUPATION		WORKING HOURS		D.L. NUMBER / STATE			
VICTIM ACTIVITY: (Check All That Apply) <input type="checkbox"/> AT HOME <input type="checkbox"/> ON STREET <input type="checkbox"/> IN HOSPITAL <input type="checkbox"/> WALKING <input type="checkbox"/> DRIVING <input type="checkbox"/> AT SCHOOL <input type="checkbox"/> SHOPPING CNTR <input type="checkbox"/> AT WORK <input type="checkbox"/> ON VACATION <input type="checkbox"/> IN JAIL <input type="checkbox"/> JOGGING <input type="checkbox"/> SLEEPING <input type="checkbox"/> AT PARK							
CLASS [REDACTED]	LINKED TO [REDACTED]	LAST, First, Mid <input type="checkbox"/> Business Name		SEX	RACE	D.O.B.	AGE
HOME ADDRESS		CITY	<input type="checkbox"/> OAKLAND	ZIP	HOME PHONE		
BUSINESS ADDRESS / SCHOOL		CITY	<input type="checkbox"/> OAKLAND	ZIP	WORK PHONE		
OCCUPATION		WORKING HOURS		D.L. NUMBER / STATE			
VICTIM ACTIVITY: (Check All That Apply) <input type="checkbox"/> AT HOME <input type="checkbox"/> ON STREET <input type="checkbox"/> IN HOSPITAL <input type="checkbox"/> WALKING <input type="checkbox"/> DRIVING <input type="checkbox"/> AT SCHOOL <input type="checkbox"/> SHOPPING CNTR <input type="checkbox"/> AT WORK <input type="checkbox"/> ON VACATION <input type="checkbox"/> IN JAIL <input type="checkbox"/> JOGGING <input type="checkbox"/> SLEEPING <input type="checkbox"/> AT PARK							
CLASS [REDACTED]	LINKED TO [REDACTED]	LAST, First, Mid <input type="checkbox"/> Business Name		SEX	RACE	D.O.B.	AGE
HOME ADDRESS		CITY	<input type="checkbox"/> OAKLAND	ZIP	HOME PHONE		
BUSINESS ADDRESS / SCHOOL		CITY	<input type="checkbox"/> OAKLAND	ZIP	WORK PHONE		
OCCUPATION		WORKING HOURS		D.L. NUMBER / STATE			
VICTIM ACTIVITY: (Check All That Apply) <input type="checkbox"/> AT HOME <input type="checkbox"/> ON STREET <input type="checkbox"/> IN HOSPITAL <input type="checkbox"/> WALKING <input type="checkbox"/> DRIVING <input type="checkbox"/> AT SCHOOL <input type="checkbox"/> SHOPPING CNTR <input type="checkbox"/> AT WORK <input type="checkbox"/> ON VACATION <input type="checkbox"/> IN JAIL <input type="checkbox"/> JOGGING <input type="checkbox"/> SLEEPING <input type="checkbox"/> AT PARK							
REPORTED BY G. MELERO		SERIAL # 8053P	WATCH CRT	DISTRICT 5	SUPERVISOR SGT. REILLY	SERIAL #	PAGE 3 OF 5

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

RD #

04-00062

CRIME	[] SUPPLEMENTAL	INCIDENT #	V1	VICTIM LAST, First, Mid.
11351.5485				
JECT LAST, First Mid. Hill, Kenneth	INCIDENT LOCATION PFO 1731 San Pablo	DATE OF THIS REPORT 1 Jan 04	ORIGINAL DATE REPORTED	

ITEM #	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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Additional Charges:

- 602(L) PC. Trespassing
- 647(f) PC. Public Intoxication
- 148(a) PC. Resist/Defy/Obstruct Peace Officers

Evidence:

- 1- One (1), clear, plastic sandwich bag containing three (3) off white rocks of suspected base cocaine, individually wrapped in clear plastic twists. Recovered by Off. C. Bunn Bosap from Hill's rlf pants pocket. Turned into OPD criminkites section by Off. Bunn.
- 2- U.S. Currency. One Hundred Twenty Four Dollars. \$20x2, \$10x6, \$5x3, \$1x9 = \$124. Recovered by Off. C. Bunn Bosap from Hill's rlf pants pocket. Turned into OPD property section by Off. Bunn.
- 3- One (1), cellular phone, "NOKIA", BK. Recovered by Off. Bunn from Hill's rlf pants pocket. Turned into OPD property section by Off. Bunn.

Summary:

On 1 Jan 04 I was working 20A53 with Off. C. Bunn Bosap. I was driving patrol vehicle #1144, we were both dressed in full police uniforms.

At approx. 0205 I was parked at 18th St. and San Pablo. At that time I observed a MB who was later ID'd as Hill in a verbal argument with security at "Sweet Jinnies" club. As I exited my vehicle club security [REDACTED] stated, "I want him out of the club, he's causing problems." [REDACTED] was

REPORTED BY G. Melero	SERIAL # Bos3P	WATCH CRT	DISTRICT 5	SUPERVISOR Sgt. Billy	SERIAL #	PAGE 4 OF 5
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OPD ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

04-00062

CRIME	[] SUPPLEMENTAL	INCIDENT #	V1	VICTIM LAST, First, Mid.
11351.5#ES		Hill, Kenneth		
JECT LAST, First Mid.	INCIDENT LOCATION	DATE OF THIS REPORT	ORIGINAL DATE REPORTED	
Hill, Kenneth	I/O 1731 San Pablo	1 Jan 04		

ITEM #	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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Summary Cont'd:

pointing at Hill. As Off Bunn and myself approached Hill, he stated, "I ain't gotta leave." At that point I smelled a strong odor of an alcoholic beverage about Hill's person and breath, I also observed blood shot watery eyes. Hill also continued to yell at security guards, stating that he did not have to leave the club. Off Bunn and myself decided to place Hill under arrest for public intoxication as he could not care for his safety or the safety of others. I also believed that Hill would continue to cause problems at "Sweet Timmer's" night club, where he was no longer welcome. I observed Off Bunn search Hill, incident to arrest, I observed Off Bunn recover U.S. Currency (evidence item #2), a cellular phone (evidence item #3), and suspected base cocaine (evidence item #1). As Off Bunn pulled out the suspected base cocaine from Hill's r/l pants pocket, Hill attempted to flee. Hill was able to take one step before Off Bunn and myself tackled Hill down to the sidewalk. Once on the ground Hill stated, "You'll put ten rocks on me" while Hill was I/O the police vehicle, he apparently observed Off Bunn packaging the suspected base cocaine, Hill then stated, "that's just three (3) Doves." I am familiar with the street term "Dove" as being a twenty dollar piece of base cocaine. That was consistent with the three rocks of suspected base cocaine recovered from Hill. Hill suffered a small cut to his chin, as he struck himself on the sidewalk when Off Bunn and myself tackled him. Off Bunn and myself transported Hill to the OPD sub jail.

REPORTED BY	SERIAL #	WATCH	DISTRICT	SUPERVISOR	SERIAL #	PAGE	OF
G. Melero	8053P	CET	5	Sgt. Billy		5	5

1. DEFENDANT'S TRUE NAME (Leave Blank) HILL, KENNETH EDWARD				ARREST NO. 30		BOOKING AGENCY 00109		REPORT NO. 04-00062		
2. DEFENDANT'S NAME HILL, KENNETH EDWARD				CRIME REPT. DETAILED TO		CP BEAT		INCIDENT NO.		
3. AKA or NICKNAME				DATE/TIME ARRESTED 01 JAN 03 / 0205		VEHICLE INFORMATION			JAIL USE ONLY	
4. DOB	POB	HEIGHT	WEIGHT	HAIR	EYES	RACE	SEX	AGE	LICENSE NO.	STATE YEAR
[REDACTED]	[REDACTED]	5-11	190	BUR BRN	B	B	M	[REDACTED]	[REDACTED]	[REDACTED]
5. SALIENT CHARACTERISTICS				CLOTHING BLO BROWN SWEATER, BLU JEANS		YEAR MAKE MODEL		COLOR		A 9 13V 0302
6. DEFENDANT'S RESIDENCE ADDRESS				CITY		TELEPHONE		TOWED TO		
7. DEFENDANT'S BUSINESS ADDRESS				SCHOOL		TELEPHONE		HOLD FOR		
8. DEFENDANT'S OCCUPATION				OCCUPATION						
9. LOCATION OF ARREST 1. F.O. 1731 SAN PABLO AVE.				SUPERVISOR SGT. PELLET						PHOTO TAKEN BY/SERIAL NO. DATE/TIME
10. ARRESTING OFFICER C. BURN		SERIAL NO. B0598		ARRESTING OFFICER G. MURPHY		SERIAL NO. B0538		CASH AT BOOKING 354		
11. TRANSPORTING OFFICER 11		SERIAL NO. "		TRANSPORTING OFFICER 11		SERIAL NO. "		ID CONFIRMED BY 3800		
12. CODE SEC		M/F	COURT	CC	WARRANT NO.	PIN NO.	BAIL	CITATION NO.		
[REDACTED]	M			1	[REDACTED]		1,500			
[REDACTED]	F			2	(6PR)		20,000	COURT		
[REDACTED]	M			1			2,500	COURT DATE/TIME		
[REDACTED]	M			1			2,500			
CODE SEC		M/F	COURT	CC	WARRANT NO.	PIN NO.	BAIL	IN-CUSTODY ARRESTS		
[REDACTED]							2,500			
								DATE/TIME ARRESTED		
								ARRESTING OFFICER SERIAL NO.		
								TOTAL BAIL		
I HEREBY ARREST THE ABOVE DEFENDANT ON THE CHARGE INDICATED AND REQUEST A PEACE OFFICER TAKE HIM INTO CUSTODY. I WILL APPEAR TO SIGN A COMPLAINT AGAINST THE PERSON I HAVE ARRESTED (see reverse side for instructions).										
13. SIGNATURE OF ARRESTING CITIZEN				ARRESTING CITIZEN'S RES. ADDRESS		CITY/ZIP		RES. PHONE		
14. ARRESTING CITIZEN'S NAME				SEX-RACE-AGE		ARRESTING CITIZEN'S BUS. ADDRESS		CITY/ZIP		
15. COMPLAINANT'S NAME				R.A00E TO B09I 01JAN2004 09:12:08		CITY/ZIP		ABC PREMISE INVOLVED		
16. CO-DEFENDANT				DEFENDANT		SEX-RACE-AGE				
17. <input type="checkbox"/> USED A FIREARM OR DEADLY <input type="checkbox"/> CAUSED GREAT BODILY HARM				UR HILL, KENNETH EDWARD CONFED TO FEN: [REDACTED] BY M7878/ELA		BURGLARY CLASSIFICATION				
18. Instructions: • List charges by name and code. • Enter names and charges of other arrested persons who are not codeendants. • If completing an offense or continuation report, DO NOT start narrative on this form. • If suspect is arrested WITHOUT A WARRANT for an offense which occurred in another jurisdiction, identify agency, investigator's name, and report number. • Describe known medical problems. • Document admonishment of arrested person. • Enter "En Route (agency)" if appropriate. • Enter reason for physical arrest (misdemeanor only).										

(CONT.) PLACED UNDER ARREST FOR (647(F) P.C. - PUBLIC INTOXICATION. UPON SEARCHING HILL INCIDENT TO ARREST P/O'S RECOVERED SEVERAL PIECES OF BASE ROCK COCAINE FROM HIS PERSON. UPON RECOVERED THE BASE ROCK COCAINE FROM HILL, HE ATTEMPTED TO BREAK FREE OF P/O'S GRASP AND FLEE. P/O'S BROUGHT HILL TO THE GROUND AND ADDITIONAL CHARGES OF (11351.5 M&S) AND (148(a) P.C.) WERE ADDED TO HILL.

EXTRA COPY TO:

TYPE OF REPORT MADE:

☐ OFFENSE

☐ ADDITIONAL INFO/SUPPLEMENTAL

☐ NONE

1. DEFENDANT'S TRUE NAME (Leave Blank)				ARREST NO. 30				BOOKING AGENCY 00109				REPORT NO. 04-00062																			
2. DEFENDANT'S NAME HILL, KENNETH EDWARD								CRIME REPT. DETAILED TO				CP BEAT				INCIDENT NO.															
3. AKA or NICKNAME								DATE/TIME ARRESTED 01 JAN 04 / 0205								VEHICLE INFORMATION								JAIL USE ONLY							
4. DOB		POB		HEIGHT		WEIGHT		HAIR		EYES		RACE		SEX		AGE		LICENSE NO.				STATE				YEAR					
		CA		5-11		190		BLK		BLN		B		M																	
5. SALIENT CHARACTERISTICS								CLOTHING BPN SWEATER, BLU JEANS								YEAR				MAKE				MODEL				COLOR			
6. DEFENDANT'S RESIDENCE ADDRESS								CITY								TELEPHONE								TOWED TO				TOW TAG			
7. DEFENDANT'S BUSINESS ADDRESS								SCHOOL								TELEPHONE								HOLD FOR							
8. DRIVER'S LICENSE NO.				SOCIAL SECURITY NO.				OCCUPATION				CII NO.																			
9. LOCATION OF ARREST 1.F.O. 1731 SAN PABLO AVE.								SUPERVISOR SGT. FEILLY								FBI NO.															
10. ARRESTING OFFICER C. BUNN				SERIAL NO. 8059P				ARRESTING OFFICER G. MELEPO				SERIAL NO. 8053P				CASH AT BOOKING															
11. TRANSPORTING OFFICER N				SERIAL NO. 11				TRANSPORTING OFFICER K				SERIAL NO. 11				ID CONFIRMED BY				CHECK <input type="checkbox"/> PIN <input type="checkbox"/> NCIC											
12. CODE SEC		M/F		COURT		CC		WARRANT NO.		CEN		PIN NO.		BAIL		CITATION NO.															
647(F)P.C.						1																									
11351.5P.C.		F				2																									
602(L)P.C.		M				1																									
148(G)P.C.		M				1																									
CODE SEC		M/F		COURT		CC		WARRANT NO.		CEN		PIN NO.		BAIL		IN-CUSTODY ARRESTS															
																DATE/TIME ARRESTED															
																ARRESTING OFFICER								SERIAL NO.							
																TOTAL BAIL															
I HEREBY ARREST THE ABOVE DEFENDANT ON THE CHARGE INDICATED AND REQUEST A PEACE OFFICER TAKE HIM INTO CUSTODY. I WILL APPEAR TO SIGN A COMPLAINT AGAINST THE PERSON I HAVE ARRESTED (see reverse side for instructions).																															
13. SIGNATURE OF ARRESTING CITIZEN								ARRESTING CITIZEN'S RES. ADDRESS								CITY/ZIP				RES. PHONE											
14. ARRESTING CITIZEN'S NAME								SEX—RACE—AGE				ARRESTING CITIZEN'S BUS. ADDRESS								CITY/ZIP				BUS. PHONE							
15. COMPLAINANT'S NAME								SEX—RACE—AGE				COMPLAINANT'S ADDRESS								CITY/ZIP				ABC PREMISE INVOLVED							
16. CO-DEFENDANT				SEX—RACE—AGE				CO-DEFENDANT				SEX—RACE—AGE				CO-DEFENDANT				SEX—RACE—AGE											
17. <input type="checkbox"/> USED A FIREARM OR DEADLY WEAPON												<input type="checkbox"/> ARMED WITH A FIREARM												BURGLARY CLASSIFICATION							
<input type="checkbox"/> CAUSED GREAT BODILY HARM												<input type="checkbox"/> ACTED IN CONCEPT (261, 286, 288a PC)																			
18. Instructions:																															
<ul style="list-style-type: none"> List charges by name and code section. Enter names and charges of other arrested persons who are not codefendants. If completing an offense or continuation report, DO NOT start narrative on this form. If suspect is arrested WITHOUT A WARRANT for an offense which occurred in another jurisdiction, identify agency, investigator's name, and report number. Indicate if suspect is on parole or probation. Complete probable cause narrative. Describe known medical problems. Document admonishment of arrested person. Enter "En Route (agency)" if appropriate. Enter reason for physical arrest (misdemeanor only). 																															
647(F)P.C. - PUBLIC INTOXICATION / 148(G)P.C. - RESISTING ARREST																															
11351.5P.C. - POSS. OF BASE ROCK COCAINE FOR SALE																															
602(L)P.C. - TRESPASSING																															
TO: HILL WAS DIRECTED BY SECURITY OF "SWEET JIMMIE'S" LOCATED AT 1731 SAN PABLO RETURNED TO LEAVE. HILL CAME BACK AND BECAME VERBALLY ABUSIVE TOWARD SECURITY, WHEN ASKED TO LEAVE AGAIN. P/O'S OBSERVED THREATENING , OBSERVED HILL THREATENING SECURITY. WHEN APPROACHED HILL, HE HAD A STAGGERED GAIT, SHUFFLED SPEECH, AND A STRONG ODOOR OF A ALCOHOL BEVERAGE. HILL WAS																															
TYPE OF REPORT MADE: <input type="checkbox"/> OFFENSE <input type="checkbox"/> ADDITIONAL INFO/SUPPLEMENTAL <input type="checkbox"/> NONE																															

CRIME REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th STREET
OAKLAND, CA 94607-3985

Assign To:

A-1

RD #

03-70014

ROUTING

☐ CID

Outside Reporting Agency

Case No.

Police Beat

4

CP Beat

44

Incident No.

199

☐ YSD
☐ VICE
☐ CSD
☐ TRAFFIC
☐ D.A.
☐ VIC/WIT

VICTIM 3

Last, First, Mid

☐ Business Name☐ Local / State / Federal

Sex

Race

D.O.B.

Age

Home Address

Zip

Home/Msg. Phone

Business Address / School

City ☐ Oakland

Zip

Work Phone

Occupation

D.L. Number

State

☐ Domestic Violence☐ Victim Injured☐ Sex Assault Victim
Request Conf.☐ Victim's Support☐ Resource Info Provided

Working Hours

ADDITIONAL
PERSON☐ R/P
☐ Parent
☐ Witness 1

Last, First, Mid

Sex

Race

D.O.B.

Age

Home Address

City ☐ Oakland

Zip

Home/Msg. Phone
()

Business Address / School

City ☐ Oakland

Zip

Work Phone
()

LOCATION

POINT OF ENTRY

LOCATION P.O.E.

METHOD OF ENTRY

☐ BREAK GLASS

BURGLARY

WEAPON USED

☐ BANK/ATM
☐ CONVENT MKT
☐ GAS STATION
☐ OTHER COMM.
☐ RESIDENCE
☐ STREET
☒ MISC.☐ DOOR
☐ WINDOW
☐ GARAGE
☐ ADJ. PREM.
☐ VENT/SKYLIGHT
☐ OTHER☐ FRONT
☐ REAR
☐ SIDE
☐ ROOF
☐ UNK.☐ OPEN/UNLOCKED
☐ FORCED SCREEN
☐ CUTTING DEVICE
☐ BODY FORCE
☐ PRY TOOL
☐ CHANNEL LOCKS
☐ ATTEMPT FORCE☐ REMOVE DOOR
☐ REMOVE WINDOW
☐ POSS. EMPLOYEE
☐ KEY
☐ WATER METER
☐ NONE
☐ UNK☐ AUTO
☐ RESIDENTIAL
☐ COMMERCIAL
☐ OTHER
☐ ALARM RESP☐ FIREARM
☐ CUT/STAB INSTR
☒ HANDS, FEET, FIST
☐ CHEMICAL
☐ NONE
☐ OTHER☐ Gang Related☐ Hate Crime
Motivated By:☐ Race☐ Ethnicity☐ Religion☐ Sexual
Orientation☐ Physical
Disability☐ Mental
Disability☐ Gender

CRIME

Common Name

SIL BATTERY

042 PC

Section/Subsection

Code

Pertains To:

V: 1+2+3

Location (Address/Block No./Intersection) ☐ OHA ☐ ABC
1731 SAN PABLO AVE

Occurred

Date

Time

Day

VANDALISM

On or
From

4 AUG 03

0130

MON

To

1

Reported

4 AUG 03

0130

MON

☐ EGGED
☐ BREAK WINDOW
☐ SHOOT WINDOW
☐ GRAFFITI
☐ MAIL BOX
☐ KEYING / SCRATCHING
☐ SLASH TIRES
☐ OTHER

LOSS

☒ None

TYPE OF THEFT

☐ PICKPOCKET
☐ PURSENATCH
☐ AUTO ACCESS
☐ AUTO CLOUT
☐ SHOPLIFTING
☐ BICYCLE
☐ COIN OP. DEVICE
☐ FROM BUILDING
☐ OTHER

(CHECK ALL THAT APPLY)

1 ☐ CURRENCY / NOTES
2 ☐ CLOTHING / FURS
3 ☐ JEWELRY / PRECIOUS METAL
4 ☐ FIREARMS
5 ☐ OFFICE EQUIPMENT
6 ☐ TVS, RADIO, STEREO
7 ☐ HOUSEHOLD GOODS
8 ☐ CONSUMABLE GOODS
9 ☐ LIVESTOCK
10 ☐ MOTOR VEHICLES
11 ☐ MISCELLANEOUS

U.C.R. CODE (LIST MOST EXPENSIVE ITEM ABOVE)

SOLVABILITY FACTORS (Check All That Apply)

☐ SURVEILLANCE PHOTO
☐ SERIOUS INJURY
☐ EVIDENCE
☐ SUSPECT IN-CUSTODY
☐ NAMED SUSPECT
☐ IDENTIFIABLE SUSPECT
☒ R/O REQUESTS INVEST.☐ The VICTIM / REPORTING PARTY contacted the police department to report the THEFT / LOSS / DAMAGE of the listed property.
There are no known suspects. This report is made to alert the police. No narrative was completed.VICTIM
VEHICLE

License No.

State

☐ Secured at the Scene
☐ Released to the Owner☐ Hold (Unit)
☐ Towed☐ Fingerprinted
☐ Stolen

Tow Number

☐ Car
☐ Truck
☐ Other

Year

Make

Model

Body Type

Color

Vin No.

☐ Stolen
Bicycle☐ Mens
☐ Womens☐ Mtn.
☐ Road

Color

Brand

Model

Speed

License No.

Serial No.

PROPERTY /
NARRATIVE☐ Loss☐ Evidence☐ Safekeeping☐ Recovered☐ Interior

Location When Stolen

☐ Exterior☐ Garage

Item

Qty.

Item Type, Brand, Model No., Size, Color, Marks, Etc.

Serial No.

\$ Value

AOD and Juvenile
Reporting Code
(Refer to AOD Code Card)

AOD

Setting
(2 Digit #)

Juvenile

Total Number of

Vict.

Wit.

Susp.

Arr.

☐ Phone
ReportPhotos Taken
☐ Yes
☒ NoEvidence Collected
☐ Yes
☒ NoTech:
On Scene ☐ Yes ☒ No
Tech Tag Left ☐ Yes ☒ No

Rec. Value

Loss Value

Page 3

of 7

Reported By

Serial No.

Watch

Area

Supervisor

Serial No.

Reviewer

Serial No.

M. MARTINEZ

02580

1

1

J. L. LUTHER

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

0370014

CRIME SIC 242 PC	[] SUPPLEMENTAL	INCIDENT # 194	V1	
ECT LAST, First Mid. N/A	INCIDENT LOCATION 1731 SAN PABLO AVE	DATE OF THIS REPORT 4 AUG 03	ORIGINAL DATE REPORTED	

ITEM #	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
<u>SUMMARY:</u>				
ON 4 AUG 03 AT ABOUT 0130 HRS RADIO DISPATCHED ME TO 1731 SAN PABLO AVE (SWEET JIMMIES) ON A REPORTED FIGHT WHERE SECURITY PERSONNEL HAD TWO FEMALES DETAINED. UPON ARRIVAL I CONTACTED SECURITY GUARD [REDACTED] (V-1) WHO TOLD ME THAT HE HAD TWO FB'S (LATER ID'ED AS V-2 [REDACTED] & V-3 [REDACTED]) DETAINED INSIDE. [REDACTED] THEN DIRECTED ME TO [REDACTED] & [REDACTED]. [REDACTED] SAID THAT ON 4 AUG 03, AT ABOUT 0130 HRS HE WAS WORKING AS A SECURITY GUARD AT SWEET JIMMIES WHEN HE OBSERVED A HEATED VERBAL DISPUTE IN THE PATIO AREA BETWEEN [REDACTED] (V-3) AND A MB (NFD). [REDACTED] APPROACHED [REDACTED] AND THE MB AND ATTEMPTED TO DE-ESCALATE THE DISPUTE. [REDACTED] TOLD [REDACTED] THAT THE BUSINESS WAS CLOSING AND ASKED THEM TO LEAVE AND [REDACTED] REFUSED TO COMPLY. [REDACTED] STATED THAT HE ATTEMPTED TO ESCORT [REDACTED] OUT OF THE BUSINESS AND SHE BECAME BILIGERENT AND HOSTILE TOWARDS HIM. [REDACTED] THEN ATTEMPTED TO PHYSICALLY REMOVE [REDACTED] AND HE GRABBED HER BY HER ARM WITH HIS HAND. [REDACTED] SAID THAT AT THAT TIME, V-2 [REDACTED] (SISTER) INTERFERED WITH HIS DUTY AND THAT HE ALSO ASKED HER TO LEAVE THE PREMISES. [REDACTED] SAID THAT AS HE ATTEMPTED TO ESCORT BOTH [REDACTED] AND [REDACTED] THEY BOTH TURNED AROUND AND BEGAN TO PUSH HIM BACK AND SUBSEQUENTLY SWUNG AT HIM. [REDACTED] THEN PHYSICALLY RESTRAINED BOTH [REDACTED] AND [REDACTED] IN HAND CUFFS AFTER BEING ASSISTED BY OTHER SECURITY GUARDS. [REDACTED] SAID THAT HE WAS NOT INJURED AND WANTED NOTHING DONE.				
REPORTED BY M. MARTINEZ	SERIAL # 8250P	WATCH 1	DISTRICT 1	SUPERVISOR SGT. LOZANES
PAGE 4				OF 7

OPD ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

03E70014

CRIME SIC 242 PC	[] SUPPLEMENTAL	INCIDENT # 194	V1	VICTIM LAST, FIRST MI
CT LAST, First Mid. N/A	INCIDENT LOCATION 1731 San Pablo Ave	DATE OF THIS REPORT 4 AUG 03	ORIGINAL DATE REPORTED	

ITEM #	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
SUMMARY CONT.				
I THEN CONTACTED V-7 [REDACTED] AND ATTEMPTED TO TALK TO HER. SHE WAS HOSTILE, BELLIGERENT AND UNCOOPERATIVE. [REDACTED] DID MANAGE TO CALM DOWN SLIGHTLY AFTER A FEW MINUTES.				
[REDACTED] TOLD ME THAT ON 4 AUG 03 AT ABOUT 0130 HRS, SHE WAS IN VERBAL ALTERCATION WITH A MB INSIDE SWEET JIMMIES WHEN HER AND HER SISTER WERE ASKED TO LEAVE BY SECURITY GUARD [REDACTED]. [REDACTED] SAID THAT [REDACTED] BECAME RUDE AND OVERLY AGGRESSIVE TOWARD THEM. [REDACTED] SAID THAT [REDACTED] ATTEMPTED TO ESCORT THEM OUT OF THE BUSINESS IN AN AGGRESSIVE MANNER AND THAT SHE TURNED AROUND AND THAT SHE AND [REDACTED] PUSHED [REDACTED] BACK. [REDACTED] ALSO ADMITTED TO SWINGING AT [REDACTED] IN SELF-DEFENSE. [REDACTED] SAID THAT [REDACTED] THEN PLACED HIS ARM AROUND HER NECK AND SUBSEQUENTLY PLACED HER AND [REDACTED] IN HAND CUFFS. [REDACTED] AGAIN BECAME HOSTILE AND UNCOOPERATIVE AND STATED THAT SHE WANTED NOTHING DONE.				
[REDACTED] DID NOT HAVE ANY SIGNS OF VISIBLE INJURIES. [REDACTED] YELLED AT HER SISTER [REDACTED] NOT TO COOPERATE AND FOR HER NOT GIVE UPD ANY INFORMATION.				
I THEN ATTEMPTED TO TALK TO [REDACTED] SHE WAS UNCOOPERATIVE AND HOSTILE BUT ADMITTED TO PUSHING AND SWINGING AT [REDACTED] IN SELF-DEFENSE.				
I NOTICED THAT [REDACTED] DISPLAYED RED BLOOD SHOT WATERY EYES, SLURRED SPEECH, WAS INCOHERENT.				
REPORTED BY M. MARTINEZ	SERIAL # 8258P	WATCH 1	DISTRICT 1	SUPERVISOR JLT. LOZANES
			SERIAL #	PAGE 5 OF 7

ADDITIONAL INFORMATION REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th Street
Oakland, CA 94607

0370014

CRIME SIC 242 PC	() SUPPLEMENTAL	INCIDENT # 194	V1	VIC
ECT LAST, First Mid. N/A	INCIDENT LOCATION 1731 SAN PABLO AVE	DATE OF THIS REPORT 4 AUG 03	ORIGINAL DATE REPORTED	

ITEM #	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
SUMMARY CONT.				
SWAYED FROM SIDE TO SIDE AND A STRONG ODOR OF ALCOHOL WAS COMING FROM HER PERSON. I BELIEVED THAT [REDACTED] WAS UNABLE TO EXERCISE SAFETY FOR HERSELF / OTHERS AND I ARRESTED HER FOR PUBLIC INTOXICATION.				
I TRANSPORTED HER TO OPD JAIL.				
I DID NOT OBSERVE ANY SIGNS OF VISIBLE INJURY ON HER.				
WHILE EN-ROUTE TO JAIL, SHE STATED THAT SHE ALSO GOT KICKED ON THE FACE BY [REDACTED] DURING THE ALTERCATION. AT THE JAIL, SHE ADVISED RECEIVING NURSE THAT SHE WAS OK AND THAT SHE WAS NOT INJURED.				
[REDACTED] WAS RELEASED ON SCENE.				
SHORTLY AFTER, [REDACTED] PHONED HER FATHER AND HE ARRIVED ON SCENE. HE THEN SPOKE TO SGT. CORTAZES.				
[REDACTED] THEN CHANGED HER MIND AND ELECTED TO GIVE OFC. A. JONES A WRITTEN STATEMENT AND REQUESTED TO PRESS CHARGES AGAINST [REDACTED] SEE STATEMENT FOR DETAILS.				
APPARENTLY BOTH [REDACTED] AND [REDACTED] WERE ASKED TO LEAVE STREET IMMEDIATELY BY SECURITY GUARD [REDACTED] BOTH [REDACTED] AND [REDACTED] WERE UNCOOPERATIVE AND BECAME HOSTILE AND BELLIGERENT TOWARDS [REDACTED] THEN PHYSICALLY ATTEMPTED TO REMOVE BOTH SUBJECTS FROM THE PREMISES WITH THE BOTH [REDACTED] AND [REDACTED]				
REPORTED BY M. MARTINEZ	SERIAL # 82588	WATCH 1	DISTRICT 1	SUPERVISOR SGT. LOZAROS
PAGE 6 OF 7				

ORI 00109

STATEMENT

Oakland Police Department

536-200-1 (6/93)

Page

of

2

2. Report No.

0370014

1. Complainant

Offense/Crime

SIC 242 PC

Name of Person Giving Statement

Sex/Race/DOB

F B

Complainant

Reporting Person

☐ Suspect☐ Witness☐ Driver

4. Residence Address

City/Zip

Phone

5. Employment (Name, Address, Phone, Occupation, Work Hours, Days Off) or Supplemental Information if Unemployed or Transient

6. Statement Taken By

Serial No.

Date

Time Started - Completed

A. JONES

8596 P

4 AUG 03

0250

7. Location Where Statement Taken

Names, Addresses of Persons Present During Statement

SCENE

FOR VEHICLE COLLISIONS ONLY

8. License No.

State

Veh. Yr.

Make

Model

Type

Color(s)

Driver License No.

State

9. Registered Owner

Address

City/Zip

Residence/Business Phone

()

ADMONITION: You have the right to remain silent. Anything you say can be used against you in a court of law. You have the right to talk to a lawyer and have him present with you while you are being questioned. If you cannot afford a lawyer, one will be appointed to represent you before any questioning if you wish one.

Subject's Initials

WAIVER: Do you understand each of these rights I have explained to you?

Having these rights in mind, do you wish to talk to us now?

Statement:

MY NAME IS [REDACTED], AND TODAY IS AUGUST

4, 2003. TONIGHT AT ABOUT 1:30 A.M., I WAS AT JIMMIES

NIGHT CLUB ON 18TH AND SAN PABLO. WHEN I WAS IN THE

CLUB, ONE OF THE SECURITY GUARDS (MALE, BLACK, 6'2, 200, BALD HEAD, BROWN SUIT) TOLD ME AND MY SISTER TO LEAVE THE CLUB.

WE STARTED WALKING OUT THE CLUB, THEN THE GUY IN THE

BROWN SUIT STARTED PUSHING ME AND MY DISTER OUT OF

THE CLUB. THAT SAME SECURITY GUARD GRABBED ME BY MY

LEFT ARM AND SQUEEZED IT VERY TIGHT. I PUSHED HIS

HAND OFF OF MY ARM, THEN HE STARTED CHOKING ME WITH

HIS LEFT HAND. I FELL TO THE GROUND WHILE HE CHOKED

ME. I WAS BEING CHOKED FOR ABOUT A MINUTE. THE GUY

IN THE BROWN SUIT CHOKED ME, AND PUSHED ME OUT THE

DOOR ~~BY~~ BY MY THROAT. WHEN I GOT OUTSIDE, A BUNCH

OF SECURITY GUARDS RUSHED ME, AND HANDCUFFED ME.

ALL THE TIME I WAS STILL BEING CHOKED BY THE MAN

IN THE BROWN SUIT. THE SECURITY GUARDS BROUGHT ME

BACK INSIDE THE CLUB

Signature of Person Giving Statement

Date

8/4/03

STATEMENT CONTINUATION
Oakland Police Department

536-200-2 (6/93)

Page 2 of 2

2. Report No.

0370014

1. Complainant

Offense/Crime

SEC 242 PC

3. Name of Person Giving Statement

Sex/Race/DOB

☒ Complainant

☐ Suspect

☐ Driver

☐ Reporting Person

☐ Witness

STATEMENT:

AND SAT ME AND MY SISTER IN A ROOM. AFTER
THE GUY IN THE BROWN SUIT LEFT ME ALONE, I SAW
HIM START CHOKING MY SISTER SHANNON WRIGHT ~~BY~~ ^{SDW}
THE NECK, ~~SDW~~ ALONG WITH ANOTHER SHORT, HISPANIC
SECURITY GUARD. ABOUT FIVE MINUTES LATER, OPD SHOWED
UP. I CAN IDENTIFY THE SECURITY GUARD. I WOULD LIKE
TO PRESS CHARGES. THIS IS A TRUE STATEMENT.

X 8/4/03

Signature of Person Giving Statement

Date

CRIME REPORT

OAKLAND POLICE DEPARTMENT
455 - 7th STREET
OAKLAND, CA 94607-3985

Assign To:

A-1

RD #

0370015

ROUTING <input type="checkbox"/> CID <input type="checkbox"/> YSD <input type="checkbox"/> VICE <input type="checkbox"/> CSD <input type="checkbox"/> TRAFFIC <input type="checkbox"/> D.A. <input type="checkbox"/> VIC/WIT <input type="checkbox"/> <input type="checkbox"/>		Outside Reporting Agency		Case No.		Police Beat 4		CP Beat 4X		Incident No. 199			
VICTIM <input checked="" type="checkbox"/>		Last, First, Mid [REDACTED]		<input type="checkbox"/> Business Name <input type="checkbox"/> Local / State / Federal		Sex F		Race B		D.O.B. [REDACTED] Age [REDACTED]			
Home Address		City <input type="checkbox"/> Oakland		Zip		Home/Msg. Phone [REDACTED]							
Business Address / School		City <input type="checkbox"/> Oakland		Zip		Work Phone ()							
Occupation		D.L. Number		State		<input type="checkbox"/> Domestic Violence <input type="checkbox"/> Victim Injured <input type="checkbox"/> Sex Assault Victim Request Conf.							
Working Hours						<input type="checkbox"/> Victim's Support <input type="checkbox"/> Resource Info Provided							
ADDITIONAL PERSON <input type="checkbox"/> R/P <input type="checkbox"/> Parent <input type="checkbox"/> Witness 1		Last, First, Mid		Sex		Race		D.O.B.		Age			
Home Address		City <input type="checkbox"/> Oakland		Zip		Home/Msg. Phone ()							
Business Address / School		City <input type="checkbox"/> Oakland		Zip		Work Phone ()							
LOCATION <input type="checkbox"/> BANK/ATM <input type="checkbox"/> CONVENT MKT <input type="checkbox"/> GAS STATION <input type="checkbox"/> OTHER COMM. <input type="checkbox"/> RESIDENCE <input type="checkbox"/> STREET <input checked="" type="checkbox"/> MISC.		POINT OF ENTRY <input type="checkbox"/> DOOR <input type="checkbox"/> WINDOW <input type="checkbox"/> GARAGE <input type="checkbox"/> ADJ. PREM. <input type="checkbox"/> VENT/SKYLIGHT <input type="checkbox"/> OTHER		LOCATION P.O.E. <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> SIDE <input type="checkbox"/> ROOF <input type="checkbox"/> UNK.		METHOD OF ENTRY <input type="checkbox"/> OPEN/UNLOCKED <input type="checkbox"/> FORCED SCREEN <input type="checkbox"/> CUTTING DEVICE <input type="checkbox"/> BODY FORCE <input type="checkbox"/> PRY TOOL <input type="checkbox"/> CHANNEL LOCKS <input type="checkbox"/> ATTEMPT FORCE		<input type="checkbox"/> BREAK GLASS <input type="checkbox"/> REMOVE DOOR <input type="checkbox"/> REMOVE WINDOW <input type="checkbox"/> POSS. EMPLOYEE <input type="checkbox"/> KEY <input type="checkbox"/> WATER METER <input type="checkbox"/> NONE <input type="checkbox"/> UNK		BURGLARY <input type="checkbox"/> AUTO <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> OTHER <input type="checkbox"/> ALARM RESP		WEAPON USED <input type="checkbox"/> FIREARM <input type="checkbox"/> CUT/STAB INSTR <input checked="" type="checkbox"/> HANDS, FEET, FIST <input type="checkbox"/> CHEMICAL <input type="checkbox"/> NONE <input type="checkbox"/> OTHER	
<input type="checkbox"/> Gang Related		<input type="checkbox"/> Hate Crime Motivated By:		<input type="checkbox"/> Race <input type="checkbox"/> Ethnicity <input type="checkbox"/> Religion <input type="checkbox"/> Sexual Orientation <input type="checkbox"/> Physical Disability <input type="checkbox"/> Mental Disability <input type="checkbox"/> Gender									
CRIME		Common Name S/C BATTERY 242 PC		Section/Subsection		Code 1		Pertains To: V: 1+2+3					
Location (Address/Block No./Intersection) <input type="checkbox"/> OHA <input type="checkbox"/> ABC 1731 SAN PABLO AVE		<input type="checkbox"/> OHA <input type="checkbox"/> ABC		Occurred		Date		Time		Day		VANDALISM <input type="checkbox"/> EGGED <input type="checkbox"/> BREAK WINDOW <input type="checkbox"/> SHOOT WINDOW <input type="checkbox"/> GRAFFITI <input type="checkbox"/> MAIL BOX <input type="checkbox"/> KEYING / SCRATCHING <input type="checkbox"/> SLASH TIRES <input type="checkbox"/> OTHER	
LOSS		<input checked="" type="checkbox"/> None		TYPE OF THEFT <input type="checkbox"/> PICKPOCKET <input type="checkbox"/> PURSE/NECK <input type="checkbox"/> AUTO ACCESS <input type="checkbox"/> AUTO CLOUT <input type="checkbox"/> SHOPLIFTING <input type="checkbox"/> BICYCLE <input type="checkbox"/> COIN OP. DEVICE <input type="checkbox"/> FROM BUILDING <input type="checkbox"/> OTHER		On or From 4 AUG 03		6130		MON			
(CHECK ALL THAT APPLY) 1 <input type="checkbox"/> CURRENCY / NOTES 2 <input type="checkbox"/> CLOTHING / FURS 3 <input type="checkbox"/> JEWELRY / PRECIOUS METAL 4 <input type="checkbox"/> FIREARMS 5 <input type="checkbox"/> OFFICE EQUIPMENT 6 <input type="checkbox"/> TVS, RADIO, STEREO		7 <input type="checkbox"/> HOUSEHOLD GOODS 8 <input type="checkbox"/> CONSUMABLE GOODS 9 <input type="checkbox"/> LIVESTOCK 10 <input type="checkbox"/> MOTOR VEHICLES 11 <input type="checkbox"/> MISCELLANEOUS				To 1		1		1			
U.C.R. CODE _____ (LIST MOST EXPENSIVE ITEM ABOVE)						Reported 4 AUG 03		6130		MON		SOLVABILITY FACTORS (Check All That Apply) <input type="checkbox"/> SURVEILLANCE PHOTO <input type="checkbox"/> NAMED SUSPECT <input type="checkbox"/> SERIOUS INJURY <input type="checkbox"/> IDENTIFIABLE SUSPECT <input type="checkbox"/> EVIDENCE <input checked="" type="checkbox"/> R/O REQUESTS INVEST. <input type="checkbox"/> SUSPECT IN-CUSTODY	
<input type="checkbox"/> The VICTIM / REPORTING PARTY contacted the police department to report the THEFT / LOSS / DAMAGE of the listed property. There are no known suspects. This report is made to alert the police. No narrative was completed.													
VICTIM VEHICLE		License No.		State		<input type="checkbox"/> Secured at the Scene <input type="checkbox"/> Hold (Unit) <input type="checkbox"/> Fingerprinted <input type="checkbox"/> Released to the Owner <input type="checkbox"/> Towed <input type="checkbox"/> Stolen		Tow Number					
<input type="checkbox"/> Car <input type="checkbox"/> Truck <input type="checkbox"/> Other		Year		Make		Model		Body Type		Color		Vin No.	
<input type="checkbox"/> Stolen <input type="checkbox"/> Bicycle		<input type="checkbox"/> Mens <input type="checkbox"/> Womens		<input type="checkbox"/> Min. <input type="checkbox"/> Road		Color		Brand		Model		Speed	
PROPERTY / NARRATIVE		<input type="checkbox"/> Loss <input type="checkbox"/> Evidence <input type="checkbox"/> Safekeeping		Location When Stolen <input type="checkbox"/> Interior <input type="checkbox"/> Exterior <input type="checkbox"/> Garage									
		Item		Qty.		Item Type, Brand, Model, etc., Size, Color, Marks, Etc.		Serial No.		\$ Value			
AOD and Juvenile Reporting Code (Refer to AOD Code Card)													
AOD		Setting (2 Digit #)		Juvenile									
Total Number of		<input type="checkbox"/> Phone Report		Photos Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Evidence Collected <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Tech: On Scene <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Tech Tag Left <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Rec. Value 0		Loss Value 0	
Vict. 3		Wil. 4		Susp. 0		Arr. 0		Supervisor Sgt. LOZANES		Serial No.		Page 2 of 2	
Reported By M. MARTINEZ		Serial No. 8258P		Watch 1		Area 1		Reviewer		Serial No.			

03-70016

ORI 00109

530-930 (1100)

CRIME SEXUAL BATTERY 243.4(a) 2458		INCIDENT NO. V1		VICTIM LAST, First, Mid [REDACTED]											
SUSPECT		Number 1		LAST, First, Mid. RICHARDSON / ROBINSON, AL		RELATIONSHIP TO VICTIM		INCUSTODY THIS OFFENSE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO							
SEX M	RACE B	D.O.B. [REDACTED]	AGE [REDACTED]	HEIGHT 5'8"	WEIGHT 180	HAIR BLK	EYES BRO	DL. NUMBER	PFN						
HOME ADDRESS				CITY <input checked="" type="checkbox"/> OAKLAND		ZIP		APT. NO.	HOME /MSG. PHONE						
WORK ADDRESS (Name of Business) (School) [REDACTED]				CITY <input checked="" type="checkbox"/> OAKLAND		ZIP		OCCUPATION MANAGER	WORK PHONE						
ADMONISHMENT: ADMONISHED <input type="checkbox"/> YES <input type="checkbox"/> NO REFUSED <input type="checkbox"/> YES <input type="checkbox"/> NO STATEMENT <input type="checkbox"/> YES <input type="checkbox"/> NO						<input type="checkbox"/> PROBATION COUNTY _____ Officer _____									
BY: (OFFICER/DATE/TIME): _____						<input type="checkbox"/> PAROLE AGENT _____ <input type="checkbox"/> PAL									
DESCRIPTION PROVIDE BY CLOTHING, SCARS, MARKS, TATOOS, WORDS USED															
HAIR LENGTH		HAIR STYLE		FACIAL HAIR		COMPLEXION		APPEARANCE		SPEECH		DEMEANOR			
<input type="checkbox"/> SHORT <input type="checkbox"/> MED. (HALF EAR) <input type="checkbox"/> LONG (COVER EAR) <input type="checkbox"/> COLLAR <input type="checkbox"/> SHOULDER <input type="checkbox"/> BALD/SHAVED <input type="checkbox"/> RECEDING		<input type="checkbox"/> NATURAL / AFRO <input type="checkbox"/> BRAIDED <input type="checkbox"/> CREWCUT <input type="checkbox"/> CURLY <input type="checkbox"/> PONYTAIL <input type="checkbox"/> PUNK <input type="checkbox"/> CONSERVATIVE		<input type="checkbox"/> NONE <input type="checkbox"/> BEARD <input type="checkbox"/> MUSTACHE <input type="checkbox"/> BEARD & MUSTACHE <input type="checkbox"/> GOATEE <input type="checkbox"/> SIDEBURNS		<input type="checkbox"/> LIGHT <input type="checkbox"/> MEDIUM <input type="checkbox"/> DARK <input type="checkbox"/> FRECKLED <input type="checkbox"/> ACNE <input type="checkbox"/> POCKMARK <input type="checkbox"/> BUDDY		<input type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input type="checkbox"/> UNKEMPT <input type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED <input type="checkbox"/> BIRTHMARK <input type="checkbox"/> MOLE		<input type="checkbox"/> LOW PITCH <input type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> STUTTER <input type="checkbox"/> ACCENT TYPE _____ <input type="checkbox"/> OTHER		<input type="checkbox"/> CALM <input type="checkbox"/> POLITE <input type="checkbox"/> APOLOGETIC <input type="checkbox"/> NERVOUS <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> OFFENSIVE <input type="checkbox"/> HOSTILE <input type="checkbox"/> VIOLENT			
OTHER DISTINCTIVE FEATURES				<input type="checkbox"/> BODY ODOR TYPE _____		WEAPON USED		<input type="checkbox"/> REVOLVER <input type="checkbox"/> SEMI-AUTO PISTOL <input type="checkbox"/> SHOTGUN <input type="checkbox"/> RIFLE		<input type="checkbox"/> GOLD TOOTH <input type="checkbox"/> MISSING TEETH <input type="checkbox"/> LARGE EYES		<input type="checkbox"/> CAL. _____ BARREL _____ <input type="checkbox"/> SAWED OFF <input type="checkbox"/> NICKEL <input type="checkbox"/> BLUED			
<input type="checkbox"/> SILVER TOOTH <input type="checkbox"/> GLASSES <input type="checkbox"/> MISSING LIMBS				<input type="checkbox"/> BLUDGEON / CLUB <input type="checkbox"/> HANDS / FEET <input type="checkbox"/> ROCK / BRICK <input type="checkbox"/> CUT / STAB <input type="checkbox"/> VEHICLE											
SUSPECT		Number 1		LAST, First, Mid.		RELATIONSHIP TO VICTIM		INCUSTODY THIS OFFENSE <input type="checkbox"/> YES <input type="checkbox"/> NO							
SEX	RACE	D.O.B.	AGE	HEIGHT	WEIGHT	HAIR	EYES	DL. NUMBER	PFN						
HOME ADDRESS				CITY <input type="checkbox"/> OAKLAND		ZIP		APT. NO.	HOME /MSG. PHONE						
WORK ADDRESS (Name of Business) (School)				CITY <input type="checkbox"/> OAKLAND		ZIP		OCCUPATION	WORK PHONE						
ADMONISHMENT: ADMONISHED <input type="checkbox"/> YES <input type="checkbox"/> NO REFUSED <input type="checkbox"/> YES <input type="checkbox"/> NO STATEMENT <input type="checkbox"/> YES <input type="checkbox"/> NO						<input type="checkbox"/> PROBATION COUNTY _____ Officer _____									
BY: (OFFICER/DATE/TIME): _____						<input type="checkbox"/> PAROLE AGENT _____ <input type="checkbox"/> PAL									
DESCRIPTION PROVIDE BY CLOTHING, SCARS, MARKS, TATOOS, WORDS USED															
HAIR LENGTH		HAIR STYLE		FACIAL HAIR		COMPLEXION		APPEARANCE		SPEECH		DEMEANOR			
<input type="checkbox"/> SHORT <input type="checkbox"/> MED. (HALF EAR) <input type="checkbox"/> LONG (COVER EAR) <input type="checkbox"/> COLLAR <input type="checkbox"/> SHOULDER <input type="checkbox"/> BALD/SHAVED <input type="checkbox"/> RECEDING		<input type="checkbox"/> NATURAL / AFRO <input type="checkbox"/> BRAIDED <input type="checkbox"/> CREWCUT <input type="checkbox"/> CURLY <input type="checkbox"/> PONYTAIL <input type="checkbox"/> PUNK <input type="checkbox"/> CONSERVATIVE		<input type="checkbox"/> NONE <input type="checkbox"/> BEARD <input type="checkbox"/> MUSTACHE <input type="checkbox"/> BEARD & MUSTACHE <input type="checkbox"/> GOATEE <input type="checkbox"/> SIDEBURNS		<input type="checkbox"/> LIGHT <input type="checkbox"/> MEDIUM <input type="checkbox"/> DARK <input type="checkbox"/> FRECKLED <input type="checkbox"/> ACNE <input type="checkbox"/> POCKMARK <input type="checkbox"/> BUDDY		<input type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input type="checkbox"/> UNKEMPT <input type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED <input type="checkbox"/> BIRTHMARK <input type="checkbox"/> MOLE		<input type="checkbox"/> LOW PITCH <input type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> STUTTER <input type="checkbox"/> ACCENT TYPE _____ <input type="checkbox"/> OTHER		<input type="checkbox"/> CALM <input type="checkbox"/> POLITE <input type="checkbox"/> APOLOGETIC <input type="checkbox"/> NERVOUS <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> OFFENSIVE <input type="checkbox"/> HOSTILE			
OTHER DISTINCTIVE FEATURES				<input type="checkbox"/> BODY ODOR TYPE _____		WEAPON USED		<input type="checkbox"/> REVOLVER <input type="checkbox"/> SEMI-AUTO PISTOL <input type="checkbox"/> SHOTGUN <input type="checkbox"/> RIFLE		<input type="checkbox"/> GOLD TOOTH <input type="checkbox"/> MISSING TEETH <input type="checkbox"/> LARGE EYES		<input type="checkbox"/> CAL. _____ BARREL _____ <input type="checkbox"/> SAWED OFF <input type="checkbox"/> NICKEL <input type="checkbox"/> BLUED			
<input type="checkbox"/> SILVER TOOTH <input type="checkbox"/> GLASSES <input type="checkbox"/> MISSING LIMBS				<input type="checkbox"/> BLUDGEON / CLUB <input type="checkbox"/> HANDS / FEET <input type="checkbox"/> ROCK / BRICK <input type="checkbox"/> CUT / STAB <input type="checkbox"/> VEHICLE											
SUSPECT VEHICLE		VEHICLE WAS		<input type="checkbox"/> TOW (#) _____ <input type="checkbox"/> SECURED AT SCENE <input type="checkbox"/> FINGERPRINTED <input type="checkbox"/> RELEASED TO OWNER <input type="checkbox"/> HOLD(UNIT) _____		DAMAGE DETAILS, UNIQUE FEATURES				OTHER DESCRIPTION					
OWNER						ADDRESS				CITY <input type="checkbox"/> OAKLAND		ZIP		PHONE	
LIC./STATE/OR PLATE COLORS				YEAR MAKE		MODEL		STYLE		EXTERIOR COLOR		CONDITION <input type="checkbox"/> CLEAN <input type="checkbox"/> NEW <input type="checkbox"/> DIRTY <input type="checkbox"/> POOR		INTERIOR COLOR <input type="checkbox"/> CLEAN <input type="checkbox"/> ODOR <input type="checkbox"/> DIRTY <input type="checkbox"/>	
<input type="checkbox"/> STOCK <input type="checkbox"/> WIDE <input type="checkbox"/> SMALL		RIMS <input type="checkbox"/> STOCK <input type="checkbox"/> CHROME <input type="checkbox"/> MAGS <input type="checkbox"/> SPOKE		LEVEL <input type="checkbox"/> STOCK <input type="checkbox"/> LOWERED <input type="checkbox"/> RAISED		ROOF <input type="checkbox"/> VINYL <input type="checkbox"/> LANDAU <input type="checkbox"/> CONV		WINDOWS <input type="checkbox"/> TINTED <input type="checkbox"/> BROKEN		SEATS <input type="checkbox"/> VINYL <input type="checkbox"/> BENCH <input type="checkbox"/> CLOTH <input type="checkbox"/> BUCKET		TRANSMISSION <input type="checkbox"/> AUTOMATIC <input type="checkbox"/> MANUAL			
REPORTED BY J. ANDERSON		SERIAL # 77389		WATCH 31		DISTRICT 507. K. JOHNSON		SUPERVISOR		SERIAL #		PAGE 2 OF 3			

OPD **ADDITIONAL INFORMATION REPORT**

OAKLAND POLICE DEPARTMENT
 455 - 7th Street
 Oakland, CA 94607

RD #

03-68919

CRIME SEXUAL BATTERY 243.4(a)	() SUPPLEMENTAL	INCIDENT # 2158	V1	VICTIM - LAST, First, Mid [REDACTED]
ECT LAST, First, Mid. RICHARDSON / ROBINSON, AL	INCIDENT LOCATION 1731 SAN PABLO AVE	DATE OF THIS REPORT 31 JUL 03	ORIGINAL DATE REPORTED	

ITEM #	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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Summary CONT:

UNIFORM, OPERATING MARKED POLICE VEH #1204. VICT ADVISED ON 4 JUL 03 AT APPROX 1900-2000 SHE WAS EMPLOYED AT SWEET JEMMIE'S NITE CLUB LOCATED AT 1731 SAN PABLO AVE. VICTIM ADVISED SHE WAS EMPLOYED AS A WAITRESS.

VICTIM ADVISED THAT AL RICHARDSON OR ROBINSON (SUSP) WAS ALSO EMPLOYED THERE AS A MANAGER. VICT ADVISED ON 4 JUL 03 AT THE ABOVE MENTIONED TIME SUSP GRABBED VICT BUTTOCKS TWICE & MADE A SEXUAL COMMENT TO VICTIM. VICTIM ADVISED SHE BECAME UPSET & DEPARTED SWEET JEMMIE'S AND HAS NOT RETURNED. SEE STATEMENT TAKEN FROM [REDACTED]

[REDACTED] (VIC) FURTHER ADVISED, THIS HAS OCCURRED TO OTHER FEMALE EMPLOYEES, BUT COULD NOT GIVE THEIR NAMES.

REPORTED BY J. ANDERSON	SERIAL # 7738P	WATCH 3	DISTRICT 1	SUPERVISOR DET. K. JOHNSON	SERIAL #	PAGE 3 OF 3
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FOR VEHICLE COLLISIONS ONLY

ADMONITION: You have the right to remain silent. Anything you say can be used against you in a court of law. You have the right to talk to a lawyer and have him present with you while you are being questioned. If you cannot afford a lawyer, one will be appointed to represent you before any questioning if you wish one.

Subject's Initials

Statement: ON 4TH JULY 03 AT ABOUT 7 OR 8:00PM I WORKED
AT SWEET JIMMIES, LOCATED AT 1731 SAN PABLO AVENUE.
I WAS WORKING AS A WAITRESS. I WAS IN THE PATIO
NEAR THE BAR WHEN AL RICHARDSON OR ROBINSON
APPROACHED ME. HE GRABBED MY BUTT TWICE AND
SAID "I CAN JUST TAKE YOU UPSTAIRS RIGHT NOW."
SO I GOT MAD AND JUST LEFT. I HAVE NOT BEEN
BACK TO WORK SINCE. AL IS ABOUT [REDACTED]
OLD, DARK SKINNED, 5'8" MEDIUM BUILD, DARK COMPLEXED.
THAT DAY HE WAS WEARING A WHITE CAP, WHITE
TEE SHIRT & BLUE SWEATPANTS. THERE WERE A LOT
OF PEOPLE AT THE BAR. THERE SHOULD BE A CAMERA
THERE. THIS IS A TRUE STATEMENT X X X X X
X [REDACTED] 7-31-03

Date _____

