

# OPD POLICE REPORT

## SUSPECT REPORT

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

RD #

03-051489

CRIME <b>242 PC</b>		INCIDENT NO. <b>2788</b>		V1		V2	
<b>SUSPECT</b>		Number <b>1</b>		LAST, First, Mid. <b>Mc Coy, JERMILO</b>		RELATIONSHIP TO VICTIM <b>Friend</b>	
SEX <b>F</b>		RACE <b>B</b>		AGE <b>5-1</b>		HEIGHT <b>5-1</b>	
WEIGHT <b>151</b>		HAIR <b>BLK</b>		EYES <b>BRO</b>		DL. NUMBER <b>[REDACTED]</b>	
HOME ADDRESS <b>[REDACTED]</b>		CITY <b>[ ] OAKLAND</b>		ZIP <b>[REDACTED]</b>		APT. NO. <b>1</b>	
WORK ADDRESS (Name of Business) (School) <b>[REDACTED]</b>		CITY <b>[ ] OAKLAND</b>		ZIP <b>[REDACTED]</b>		OCCUPATION <b>[REDACTED]</b>	
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): _____		[ ] PAROLE		AGENT _____		[ ] PAL	
DESCRIPTION PROVIDE BY <b>ALB</b>		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED <b>WHY TOP, BLK PANTS</b>					
<b>HAIR LENGTH</b>		<b>HAIR STYLE</b>		<b>FACIAL HAIR</b>		<b>COMPLEXION</b>	
<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		<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		<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		<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	
<b>APPEARANCE</b>		<b>SPEECH</b>		<b>DEMEANOR</b>			
<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		<input type="checkbox"/> LOW PITCH <input checked="" type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> STUTTER <input type="checkbox"/> ACCENT <input type="checkbox"/> TYPE <input type="checkbox"/> OTHER		<input checked="" 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			
<b>OTHER DISTINCTIVE FEATURES</b>		<input type="checkbox"/> BODY ODOR TYPE _____		<b>WEAPON USED</b>		<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"/> SILVER TOOTH <input type="checkbox"/> GLASSES <input type="checkbox"/> MISSING LIMBS		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	
<b>SUSPECT</b>		Number		LAST, First, Mid.		RELATIONSHIP TO VICTIM	
SEX		RACE		D.O.B.		CITE #	
HOME ADDRESS		CITY <input type="checkbox"/> OAKLAND		ZIP		APT. NO.	
WORK ADDRESS (Name of Business) (School)		CITY <input type="checkbox"/> OAKLAND		ZIP		OCCUPATION	
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): _____		[ ] PAROLE		AGENT _____		[ ] PAL	
DESCRIPTION PROVIDE BY		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED					
<b>HAIR LENGTH</b>		<b>HAIR STYLE</b>		<b>FACIAL HAIR</b>		<b>COMPLEXION</b>	
<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"/> ROCKMARK <input type="checkbox"/> BUDDY	
<b>APPEARANCE</b>		<b>SPEECH</b>		<b>DEMEANOR</b>			
<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 <input type="checkbox"/> 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			
<b>OTHER DISTINCTIVE FEATURES</b>		<input type="checkbox"/> BODY ODOR TYPE _____		<b>WEAPON USED</b>		<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"/> SILVER TOOTH <input type="checkbox"/> GLASSES <input type="checkbox"/> MISSING LIMBS		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	
<b>SUSPECT VEHICLE</b>		VEHICLE WAS		DAMAGE DETAILS, UNIQUE FEATURES		OTHER DESCRIPTION	
OWNER		<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) _____					
LIC./STATE/OR PLATE COLORS		YEAR MAKE		MODEL		ADDRESS CITY <input type="checkbox"/> OAKLAND ZIP PHONE	
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 <b>M. MARTINEZ</b>		SERIAL # <b>82580</b>		WATCH <b>1</b>		DISTRICT <b>1</b>	
SUPERVISOR <b>DET. LOZANO</b>		SERIAL #		PAGE <b>2</b> OF <b>3</b>			

# ADDITIONAL INFORMATION REPORT

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

RD #

03.051489

CRIME 242 PC	[ ] SUPPLEMENTAL	INCIDENT # 2788	V1	VICTIM - LAST FIRST MI
ECT LAST, First Mid. Mc Coy, Jermius	INCIDENT LOCATION 1731 SAN PABLO AVE	DATE OF THIS REPORT 9 JUN 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:

ON 9 JUN 03 AT ABOUT 0200 HRS. I RESPONDED TO SWEET JIMMIES (1731 SAN PABLO ST.) TO INVESTIGATE A REPORT OF AN ASSAULT WITH A DEADLY WEAPON. UPON ARRIVAL I WAS DIRECTED BY SECURITY TO THE OFFICE WHERE S-I Mc Coy WAS BEING DETAINED.

FOR SECURITY, COMP WAS GUA.

I THEN SPOKE TO SECURITY GUARD JACOBS, KEVIN MB [REDACTED] WHO SAID THAT ON 9 JUN 03 AT ABOUT 0100 HRS. HE WAS WORKING AT SWEET JIMMIES WHEN A FIGHT BROKE OUT ON THE DANCE FLOOR BETWEEN V-1 [REDACTED] AND S-I Mc Coy. JACOBS SAID THAT THEY BROKE UP THE FIGHT AND THAT V-1 [REDACTED] WAS SUFFERING FROM A LACERATION TO THE SIDE OF HIS FACE. JACOBS AND THE REST OF SECURITY DID NOT WITNESS THE FIGHT BUT STATED THAT THEY WERE TOLD BY PATRONS THAT S-I Mc Coy HIT V-1 [REDACTED] WITH A GLASS.

I THEN SPOKE TO R/P/WITNESS [REDACTED] WHO SAID THAT THE ON-VIEWED THE DISPUTE AND THAT IT APPEARED TO BE A MUTUAL COMBAT BETWEEN S-I Mc Coy AND V-1 [REDACTED] AND THAT V-1 [REDACTED] SUFFERED THE LACERATION FROM S-I Mc Coy's FIST.

I WAS UNABLE TO LOCATE ANY INDEPENDANT WITNESSES.

SECURITY GUARD JACOBS TOOK A STATEMENT FROM V-1 [REDACTED] ON AN OLD STATEMENT FORM, WHICH [REDACTED] DID NOT SIGN, AND IT'S INCLUDED WITH THE REPORT.

I ARRESTED Mc Coy FOR OUTSTANDING BENCH WARRANT AND TRANSPORTED HER TO JAIL.

APPARENTLY THE FIGHT STEMMED FROM AN OLD-QUING FEUD BETWEEN BOTH PARTIES. I CHECKED THE AREA FOR [REDACTED] WITH NEGATIVE RESULTS.

REPORTED BY M. MARTINEZ	SERIAL # 82580	WATCH 1	DISTRICT 1	SUPERVISOR Sgt. LOZAROS	SERIAL #	PAGE 3 OF 3
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STATEMENT Oakland Police Department 536-200-1 (6/93)		Page <u>1</u> of <u>1</u>	2. Report No. <u>03-051489</u>
1. Complainant <u>[REDACTED]</u>	Offense/Crime <u>042 PC</u>		
3. Name of Person Giving Statement <u>[REDACTED]</u>	Sex/Race/DOB <u>FB [REDACTED]</u>	<input checked="" type="checkbox"/> Complainant <input type="checkbox"/> Reporting Person	<input type="checkbox"/> Suspect <input type="checkbox"/> Driver <input type="checkbox"/> Witness
4. Residence Address <u>[REDACTED]</u>	City/Zip <u>[REDACTED]</u>	Phone <u>[REDACTED]</u>	
5. Employment (Name, Address, Phone, Occupation, Work Hours, Days Off) or Supplemental Information If Unemployed or Transient <u>STUDENT [REDACTED]</u>			
6. Statement Taken By <u>[REDACTED]</u>	Serial No. <u>[REDACTED]</u>	Date <u>[REDACTED]</u>	Time Started - Completed <u>[REDACTED]</u>
7. Location Where Statement Taken <u>1731 SANDABLO</u>	Names, Addresses of Persons Present During Statement <u>[REDACTED]</u>		

**FOR VEHICLE COLLISIONS ONLY**

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

**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 TODAY'S DATE 9 JUN 03, I WAS AT SWEET JIMMIES AT 1731 SANDABLO AVE. I WAS ON THE DANCE FLOOR IT WAS ABOUT 1:00 AM AND OUT OF THE BLUE JERMILA MCCOY HIT ME IN THE LEFT SIDE OF MY FACE WITH A GLASS. MY VISION WAS BLURRED AND JERMILA STARTED HITTING ME WITH HER FIST. I TRIED TO FIGHT HER OFF. PEOPLE BROKE UP THE FIGHT AND I TOLD SECURITY WHO HIT ME WITH THE GLASS AND THE DETAINED HER. I GREW UP WITH JERMILA AND EVEN POSTED BALL FOR HER WHEN SHE WAS [REDACTED]. I DON'T WHY SHE IS ANGRY WITH ME ESPECIALLY SINCE SHE JUMPED BALL AND NOW I OWE THE BALLS BONDSMAN. I HAVE A ABOUT A 3" CUT ON MY LEFT CHEEK. I WILL SEEK MY OWN MEDICAL ATTENTION AND I WANT JERMILA MCCOY ARRESTED FOR HITTING ME WITH THE GLASS IN MY FACE. THIS IS A TRUE STATEMENT

Signature of Person Giving Statement

Date

## RD No.

QBI 00100



# OPD POLICE REPORT

## SUSPECT REPORT

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

RD #

03-003743

CRIME <b>345(a)(2) PC</b>	INCIDENT NO. <b>169</b>	V1	
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<b>SUSPECT</b>		Number	LAST, First, Mid. <b>UNK</b>		RELATIONSHIP TO VICTIM <b>NONE</b>	IN CUSTODY THIS OFFENSE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
SEX <b>M</b>	RACE <b>B</b>	D.O.B.	AGE <b>25</b>	HEIGHT <b>6'1"</b>	WEIGHT <b>165</b>	HAIR	EYES
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: **R10** CLOTHING, SCARS, MARKS, TATOOS, WORDS USED  
**BLK 3/4 LENGTH LEATHER JKT, WHI SWEATER, BLK PANTS**

<b>HAIR LENGTH</b> <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	<b>HAIR STYLE</b> <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	<b>FACIAL HAIR</b> <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	<b>COMPLEXION</b> <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	<b>APPEARANCE</b> <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	<b>SPEECH</b> <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	<b>DEMEANOR</b> <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 checked="" type="checkbox"/> VIOLENT
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**OTHER DISTINCTIVE FEATURES** ☐ BODY ODOR TYPE \_\_\_\_\_

**WEAPON USED** ☐ REVOLVER ☒ SEMI-AUTO PISTOL ☐ SHOTGUN ☐ RIFLE

☐ GOLD TOOTH ☐ MISSING TEETH ☐ LARGE EYES ☐ CAL. **9mm** BARREL \_\_\_\_\_ ☐ SAWED OFF ☐ NICKEL ☐ BLUED

☐ SILVER TOOTH ☐ GLASSES ☐ MISSING LIMBS ☐ BLUDGEON / CLUB ☐ HANDS / FEET ☐ ROCK / BRICK ☐ CUT / STAB ☐ VEHICLE

<b>SUSPECT</b>		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
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

<b>HAIR LENGTH</b> <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	<b>HAIR STYLE</b> <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	<b>FACIAL HAIR</b> <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	<b>COMPLEXION</b> <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	<b>APPEARANCE</b> <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	<b>SPEECH</b> <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	<b>DEMEANOR</b> <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 \_\_\_\_\_

**WEAPON USED** ☐ REVOLVER ☐ SEMI-AUTO PISTOL ☐ SHOTGUN ☐ RIFLE

☐ GOLD TOOTH ☐ MISSING TEETH ☐ LARGE EYES ☐ CAL. \_\_\_\_\_ BARREL \_\_\_\_\_ ☐ SAWED OFF ☐ NICKEL ☐ BLUED

☐ SILVER TOOTH ☐ GLASSES ☐ MISSING LIMBS ☐ BLUDGEON / CLUB ☐ HANDS / FEET ☐ ROCK / BRICK ☐ CUT / STAB ☐ VEHICLE

<b>SUSPECT VEHICLE</b>		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
RIMS <input type="checkbox"/> STOCK <input type="checkbox"/> WIDE <input type="checkbox"/> STOCK <input type="checkbox"/> CHROME <input type="checkbox"/> SMALL <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 <b>M. OSANNA</b>	SERIAL # <b>8910P</b>	WATCH <b>1</b>	DISTRICT <b>1</b>	SUPERVISOR <b>SGT. BERNARD</b>	SERIAL #	PAGE <b>2</b> OF <b>5</b>
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# ADDITIONAL INFORMATION REPORT

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

RD #

03-003743

CRIME 245(A)(2) PC	( ) SUPPLEMENTAL	INCIDENT # 169	V1	VICTIM LAST FIRST MI
ST LAST, First Mid. UNK	INCIDENT LOCATION IFO 1731 San Pablo Ave	DATE OF THIS REPORT 13 JAN 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

On 13 JAN 03 at about 0135 I was working as OPD patrol unit 1A4 with Ofc M Osanna 8410P. we responded to the area of 1731 San Pablo Ave to Assist Officers who an viewed a 245(A)(2) shooting.

While in route officer S Sem 8436P attempted to arrest the suspect who fled on foot. He lost the suspect due to a very large amount of people that were in the area. A short time later Ofc C Johnson 8523P observed a person running from the area. Ofc Johnson believing this person was involved in the shooting chased him about four blocks through the city center and Frank Ogawa Plaza. Ofc Johnson with the assistance of Ofc C Borjesson caught the person and identified him as V1 ( [REDACTED] ).

I met with [REDACTED] who advised of the following incident.

On 13 JAN 03 at about 0130 [REDACTED] was with his friends across from Sweet Jimmies night club at 1731 San Pablo Ave. [REDACTED] unidentified friend got in a fist fight with an unknown person. [REDACTED] friend was apparently winning the fight. Then a Male Black 24 G'1 180 lbs with Blk hair and Brown eyes wearing Blue overalls got out of a Blue van and retrieved a Hand gun from the rear of the van. The suspect approached [REDACTED] and his friends and fired the gun two times in his direction.

REPORTED BY B Baker	SERIAL # 8448P	WATCH 1	DISTRICT 1	SUPERVISOR Sgt Bernand	SERIAL #	PAGE 3 OF 5
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# ADDITIONAL INFORMATION REPORT

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

RD #

03-003743

CRIME	(1) SUPPLEMENTAL	INCIDENT #	V1	VIC
245 (9)(2) PC		169		
OT LAST, First Mid.	INCIDENT LOCATION		DATE OF THIS REPORT	ORIGINAL DATE REPORTED
UNK	IFO 1731 San Pablo Ave		13 JAN 03	

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

[REDACTED] fled to avoid injury. [REDACTED] said the person fighting his friend was the driver of the Blue van and the person who shot at them was a passenger in the Blue van. See statement.

It appears as [REDACTED] and his friends got into an altercation with the occupants of a Blue van while loitering outside Sweet Jimmies night club. An occupant of the Blue van retrieved a firearm and shot at [REDACTED] and his friends. The suspect and victims all fled. [REDACTED] was the only person identified as being involved.

At the time of this incident there were about 500 people outside of Jimmies night club. They were blocking and standing in the roadway as well as playing music from parked vehicles. This is consistent with the disorderly activity that frequently occurs outside the nightclub as it prepares to close. Ofc Osanna wrote a report documenting the violation of 25601 ABC. See his report.

Ofc S Sem wrote a supplemental report documenting that he interviewed the suspect fire at a group but could not determine if anyone was hit or if the rounds were fired at someone or into the air. See his supplemental. Ofc Sopsal also recovered a live round of ammunition from the scene.

REPORTED BY	SERIAL #	WATCH	DISTRICT	SUPERVISOR	SERIAL #	PAGE	OF
B Baker	8448P	1	1	Sgt Bernard		4	6

# O P D

## ADDITIONAL INFORMATION REPORT

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

RD #

03-003743

CRIME 245 (G)(2) PC	<input type="checkbox"/> SUPPLEMENTAL	INCIDENT # 169	V1	VICTIM LAST FIRST MI [REDACTED]
CT LAST, First Mid. unk	INCIDENT LOCATION IFO 1731 San Pablo Ave		DATE OF THIS REPORT 13 JAN 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

Due to the uncontrollable chaos after the shooting and the large amount of sideshow activity that followed we were unable to safely interview or attempt to locate any additional witnesses. Instead units were dispatched to control traffic a forced to disperse large crowds of people.

NO Technician requested to scene. NO injuries or evidence to document.

REPORTED BY B Baker	SERIAL # 8446P	WATCH 1	DISTRICT 1	SUPERVISOR Sgt Bernard	SERIAL #	PAGE 5 OF 5
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# **ADDITIONAL INFORMATION REPORT**

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

RD #

03-003743

CRIME <b>245(a)(2) PC</b>	<input checked="" type="checkbox"/> SUPPLEMENTAL	INCIDENT # <b>069</b>	V1	DATE OF THIS REPORT <b>13 JAN 03</b>	ORIGINAL DATE REPORTED
SUBJECT LAST, First Mid. <b>UNIK</b>		INCIDENT LOCATION <b>IFO 1731 San Pablo Ave</b>			

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

1. ONE (1) AMMUNITION, P.M.C., 9mm, LUGER, YEL; COPPER,  
I DELIVERED IT FROM THE WEST PARKING LOT OF THE  
[REDACTED] I GAVE IT TO OFC. B.  
BAKER 8448P.

## **SUMMARY:**

ON 13 JAN 03, AT APPROXIMATELY 0130 HOURS, I WAS WORKING  
AS ORD PATROL UNIT 3A14 WITH OFC. T. JEW 8448P.  
WE WERE IN FULL POLICE UNIFORM AND DRIVING  
MARKED PATROL CAR #1016. WE WERE ASSIGNED TO  
THE SIDE-SHOW DETAILS AND MONITORING 1701 SAN  
PABLO AVE, (SWEET JIMMY'S).

AT SUCH TIME, OFC. JEW AND I WERE INVESTIGATING A  
POSSIBLE WHITE VAN WITH BLUE HORIZONTAL STRIPE, POSSIBLY  
INVOLVED IN A MURDER. I WAS ON FOOT ON THE  
19<sup>TH</sup> STREET SIDE OF THE SOUTH PARKING LOT. I OBSERVED  
A CROWD OF APPROXIMATELY 500 PEOPLE SUDDENLY DISPERSED  
IN MULTIPLE DIRECTION. I HEARD A LOUD VOICE  
YELLING, "HE GOT A GUN!" I THEN SAW A MALE  
BLACK, DARK COMPLECTED, ABOUT [REDACTED] ABOUT  
6'1", ABOUT 165 LBS, THIN BUILD, HAD ON A BLACK  
3/4 LENGTH "LEATHER" COAT, WHITE SWEATER THAT HANG  
PAST THE JACKET AND BLACK PANTS. THE SUSPECT  
EMERGED FROM THE CROWD AND FIRED FOUR SHOTS  
INTO THE AIR.

REPORTED BY <b>J. SEM</b>	SERIAL # <b>8436P</b>	WATCH <b>3</b>	DISTRICT <b>3</b>	SUPERVISOR <b>SGT. LEW</b>	SERIAL #	PAGE <b>1</b> OF <b>2</b>
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03-003743

ORI 00109

1. Complainant [REDACTED]	Offense/Crime 245(a)(2) PC	2. Report No. 03-003743
3. Name of Person Giving Statement [REDACTED]	Sex/Race/DOB MB [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 [REDACTED]	City/Zip [REDACTED] CDC	Phone ( [REDACTED] )
5. Employment (Name, Address, Phone, Occupation, work hours, Days Off) or Supplemental Information if Unemployed or Transient None		
6. Statement Taken By R. Lee	Serial No. 79742	Date 13 Jan 03
7. Location Where Statement Taken 1300 Bl. Broadway		
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 13 Jan 03 at 0130 hrs, I was in the 1600 Bl. of San Pablo across the street from Sweet Jimmy's. I was talking to a girl and that's when I saw a blue van pull up and a male black 6'1" 170 Blk Bw wearing blue overalls got out of the driver's seat. This guy got into a fight with one of my friends. My friend was getting the best of him and that's when another male black 6'1" 170 Blk Bw wearing a black beanie and black overalls got out of the passenger seat. This guy went back into the back of the van and then came out with a handgun. This guy let off two shots from the gun and then I ran. I ran into the City Center and that's when I stopped because the police told me to freeze. The guy that was shooting at me and my friend got back in the van and drove off towards MLK. I can recognize the guy who shot at me and my friend. This is a true statement.	Signature of Person Giving Statement [REDACTED]	Date 13 Jan 03
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## RD #

10: A.1

03-003744

536-933 (11/00)

ORI 00109



# ADDITIONAL INFORMATION REPORT

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

RD #

03-003744

CRIME 25601 ABC	[ ] SUPPLEMENTAL	INCIDENT # 169	V1	VICTIM LAST, First, Mid. STATE OF CALIFORNIA
ECT LAST, First Mid.	INCIDENT LOCATION 1731 SAN PABLO	DATE OF THIS REPORT 13 JAN 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:

ON 13 JAN 03 AT APPROX 0125 HRS I WAS WORKING AS 1A4 WITH MY PARTNER OFF B BAKER 8448P WE WERE IN FULL OPD UNIFORM AND OPERATING FROM FULLY MARKED POLICE VEH #1309.

WE RESPONDED TO THE AREA OF 19TH / SAN PABLO TO ASSIST OTHER UNITS WITH A PORCON FIRING GUNSHOT IN THE AIR AND POSSIBLY AT PEOPLE. UNITS IN THE IMMEDIATE AREA ADVISED THAT THEY WERE CHASING A SUSPECT.

NUMEROUS UNITS WERE IN THE AREA PRIOR TO THIS TAKING UP CONTROL POSTS FOR TRAFFIC AND PEDESTRIANS. UNRULY PATRONS WERE LOITERING OUTSIDE 1731 SAN PABLO (SWEET JIMMY'S) AND ON ALL THE CORNERS. THERE WERE APPROX 500 PEOPLE ALL TOGETHER AND NUMEROUS VEHICLES BLASTING MUSIC AND DRIVING RECKLESSLY. I NOTICED THAT THE <sup>JAMES</sup> VEHICLES WERE DRIVING AROUND AND AROUND, WHICH IN TURN CAUSED TRAFFIC JAMS, LOUD NOISE, AND "SIDESHOW ACTIVITY."

IT ALSO APPEARS THAT SECURITY AT SWEET JIMMY'S PLACES DOWN COMES TO BLOCK OFF ENTRANCE AND EXIT ROUTES. THIS SEEMS TO HELP IN SOME SENSES, HOWEVER, NATURALITY OF THE TIME THIS ALLOWS MORE

REPORTED BY M. OSANNA	SERIAL # 8448P	WATCH 1	DISTRICT 1	SUPERVISOR Sgt. BERNARD	SERIAL #	PAGE 2 OF 3
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# O P D

## ADDITIONAL INFORMATION REPORT

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

RD #

03-003744

CRIME <b>25601</b> ECT LAST, First Mid.	[ ] SUPPLEMENTAL <b>ABC</b>	INCIDENT # <b>169</b>	V1	VICTIM LAST, First, Mid. <b>STATE OF CALIFORNIA</b>
INCIDENT LOCATION <b>1731 SAN PABLO</b>			DATE OF THIS REPORT	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).

PATRONS TO CONGREGATE ON ALL THE STREETS AND PROCAUSE MANY TRAFFIC JAMS. THIS ALSO ALLOWS FOR SIDESHOW ACTIVITY AND NOISE COMPLAINTS.

IT SHOULD ALSO BE NOTED THAT DUE TO THE AMOUNT OF ACTIVITY THAT IS INVOLVED WITH SWEET JIMMY'S AND SIDESHOW, THIS IS REQUIRING THAT BUSINESSES OF NORMAL OPERATION SUCH AS CHEVRON LOCATED AT [REDACTED] SHUTTING DOWN UNTIL CROWDS DISPERSE.

BASED ON THE ACTIONS AS WELL AS THE 245(C)(2) PC (SHOOTING) I FOUND THAT SWEET JIMMY'S LOCATED AT 1731 SAN PABLO TO BE IN VIOLATION OF 25601 ABC

REPORTED BY <b>M. OSANNA</b>	SERIAL # <b>8410</b>	WATCH <b>1</b>	DISTRICT <b>1</b>	SUPERVISOR <b>SGT. BERNARD</b>	SERIAL #	PAGE <b>3</b> OF <b>3</b>
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## CRIME REPORT

OAKLAND POLICE DEPARTMENT  
455 - 7<sup>th</sup> STREET  
OAKLAND, CA 94607-3985

Assign To:

A1

RD #

03-8083

## ROUTING

☐ CID☐ YSD☐ 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

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

Working Hours

☐ Victim's Support☒ Resource Info Provided

Request Conf.

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

☐ 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

☐ RESIDENTIAL  
☐ COMMERCIAL  
☐ OTHER  
☐ ALARM RESP

## WEAPON USED

☐ FIREARM  
☐ CUT/STAB INSTR  
☒ HANDS, FEET, FIST  
☐ CHEMICAL  
☐ NONE  
☐ OTHER☐ Gang Related☐ Hate Crime☐ Race☐ Ethnicity☐ Religion☐ Sexual Orientation☐ Physical Disability☐ Mental Disability☐ Gender

## CRIME

Common Name

Section/Subsection

Code

Pertains To:

S/C BATTERY

242

PC

V: 1

Location (Address/Block No./Intersection)

☐ OHA☐ ABC

1733 SAN PABLO

Occurred

Date

Time

Day

VANDALISM

On or From

26 JAN 03

0040

SUN

To

1

1

1

Reported

26 JAN 03

0140

SUN

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

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)

AOD

Setting  
(2 Digit #)

Juvenile

U

40

T

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

Reported By

Serial No.

Watch

Area

Supervisor

Serial No.

Reviewer

Serial No.

C. JOHNSON

8517P

1

1

SGT C. GONZALEZ

536-933 (11/00)

ORI 00109

# **O P D** **ADDITIONAL INFORMATION REPORT**

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

RD #

03-8083

CRIME SM 242 PC	[ ] SUPPLEMENTAL	INCIDENT # 79	V1	VICTIM LAST, First, Mid. [REDACTED]
ECT LAST, First Mid. UNK	INCIDENT LOCATION 1733 SAN PABLO AVE	DATE OF THIS REPORT 26 JAN 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:

ON 26 JAN 03, AT ABOUT 0130, I WAS WORKING AS OPD PATROL UNIT 143. RADIO DISPATCHED ME TO THE 1700 BLK OF SAN PABLO TO INVESTIGATE A POSSIBLE BATTERY. UPON ARRIVAL I MET W/ V#1 WHO SAID AS HE WAS LEAVING JIMMIE'S CLUB ONE OF THE SECURITY GUARDS PUSHED HIM.

V#1 SAID THAT AT ABOUT 0010 HE WAS ON HIS WAY OUT OF THE CLUB AT 1733 SAN PABLO WHEN ONE OF THE SECURITY GUARDS PUSHED HIM IN HIS BACK ON THE WAY OUT THE DOOR. V#1 SAID AS HE WAS PUSHED BY THE SECURITY GUARD, THE SECURITY GUARD HIT HIS KIDNEY, AND THE BACK OF HIS NECK.

V#1 APPEARED HBD AND HAD NO VISIBLE INJURIES. NO MEDICAL WAS NEEDED.

NO TECH WAS NEEDED DUE TO NO VISIBLE INJURIES.

I WAS UNABLE TO FIND THE SECURITY GUARD THAT HAD PUSHED V#1 AND V#1 WAS NOT SURE WHAT SECURITY GUARD HAD PUSHED HIM.

REPORTED BY C. JOHNSON	SERIAL # 8517P	WATCH 1	DISTRICT 1	SUPERVISOR SGT. C. GONZALEZ	SERIAL #	PAGE 2 OF 2
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A-1

02 19596

## ROUTING

- ☐ CID
- ☐ YSD
- ☐ 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

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☐ Other

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

Section/Subsection

Code

Pertains To:

Location (Address/Block No./Intersection)

☐ OHA☐ ABC

Occurred

Date

Time

Day

VANDALISM

1731 San Pablo

On or From

23 DEC 07

223

MON

To

23 DEC 07

223

MON

Reported

23 DEC 07

223

MON

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

## 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
- ☐ PURSESNATCH
- ☐ AUTO ACCESS
- ☐ AUTO CLOUT
- ☐ SHOPLIFTING
- ☐ BICYCLE
- ☐ COIN OP. DEVICE
- ☐ FROM BUILDING
- ☐ OTHER

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)

AOD

Setting (2 Digit #)

Juvenile

A

30

Y

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 2

Reported By

Serial No.

Watch

Area

Supervisor

Serial No.

Reviewer

Serial No.

B Baker

8448P

1

1

Sgt Bernard

# **ADDITIONAL INFORMATION REPORT**

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

RD #

02/19596

CRIME 23601 BP	[ ] SUPPLEMENTAL	INCIDENT # 1	V1	VICTIM LAST, First, Mid. City of Oakland
CT LAST, First, Mid. Jimmies nightclub	INCIDENT LOCATION 1731 San Pablo	DATE OF THIS REPORT 23 Decoz	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 23 Decoz at about 0220 I was working as OAD patrol unit 1A3 with OSc M Ozena 8410P. We were directed to the area of 19th St and San Pablo ave to Assist with side show activity. Sgt Baise 1675 had been monitoring the crowd at Jimmies night club at 1731 San Pablo. at about 0000 hrs 23 Decoz he started monitoring the activity. Once the club closed and the patrons left to their vehicles side show activity started developing. In the [REDACTED] there were about 100 cars blocking the road way playing loud music and spinning their car tires. Several people were exciting their cars and jumping and dancing in the street. The crowd of cars strung along all the way to [REDACTED] where they took over the chevron gas station. This caused the gas station to have to close down to disperse the crowd.

It took about (5) five patrol units to disperse the crowds of people and vehicles gathering through out the neighborhood. it took about 15-20 minutes to completely clear the crowds. It is obvious that the activity in the aftermath of a Ravens after party. Sgt's from other areas had to respond as well.

REPORTED BY B. Baker	SERIAL # 8448P	WATCH 1	DISTRICT 1	SUPERVISOR Sgt Bernard	SERIAL #	PAGE 2 OF 2
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CRIME REPORT		OAKLAND POLICE DEPARTMENT 455 - 7 <sup>th</sup> STREET OAKLAND, CA 94607-3985		Assign To: <b>A-1</b>		RD# <b>2105643</b>	
ROUTING <input type="checkbox"/> CID		Outside Reporting Agency		Case No.		Police Beat <b>4</b>	
ECT <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		Last, First, Mid <b>STATE OF CALIFORNIA</b>		<input type="checkbox"/> Business Name <input checked="" type="checkbox"/> Local <input type="checkbox"/> State <input type="checkbox"/> Federal		Incident No. <b>2777</b>	
		Home Address		City <input type="checkbox"/> Oakland Zip		Sex Race D.O.B. Age	
		Business Address / School		City <input type="checkbox"/> Oakland Zip		Home/Msg. Phone ( )	
		Occupation		D.L. Number State		Work Phone ( )	
		Working Hours		<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	
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 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"/> BRY 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 checked="" 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 <b>Disorderly House</b>		Section/Subsection <b>25601 ABC</b>		Code	
Location (Address/Block No./Intersection) <b>1731 SAN PABLO AVE.</b>		<input type="checkbox"/> OHA <input checked="" type="checkbox"/> ABC		Occurred Date <b>10 NOV 02</b> Time <b>2315</b> Day <b>SUN.</b>		Pertains To: <b>V: 1</b>	
Loss <input checked="" type="checkbox"/> None		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		On or From <b>To</b> <b>11 NOV 02</b> <b>0200</b> <b>M.W.N.</b>		Reported <b>11 NOV 02</b> <b>0200</b> <b>M.W.N.</b>	
(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		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 checked="" type="checkbox"/> R/O REQUESTS INVEST.	
U.C.R. CODE <b>1</b> (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. 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"/> Mtn. <input type="checkbox"/> Road		Color Brand Model Speed		License No. Serial No.	
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			
AOD and Juvenile Reporting Code (Refer to AOD Code Card)		Item Qty. Item Type Brand Model No. Size Color Marks Etc.		Serial No.		\$ Value	
		<b>CONT ON NEXT PAGE</b>					
AOD Setting (2 Digit #) <b>63</b> Juvenile <b>X</b>							
Vict. <b>1</b> Wit. <b>0</b> Susp. <b>0</b> Arr. <b>0</b>		Phone Report <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	
Reported By <b>C BAKER</b>		Serial No. <b>8406P</b> Watch <b>1</b> Area <b>1</b>		Supervisor <b>SGT. BERNARD</b>		Rec. Value <b>0</b> Loss Value <b>0</b> Page 1 of <b>3</b>	

RD # 02186640

[illegible]



1. Complainant STATE OF CALIFORNIA		Offense/Crime 25601 ABC		2. Report No.	
3. Name of Person Giving Statement KEITH A JACOBS MB		Sex/Race/DOB [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 [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		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:

ON TODAY'S DATE 10 NOV 02, AT APPROX 2200 HRS.  
I WAS WORKING AS THE CHIEF OF SECURITY FOR  
SWEET JIMMIES AT 1731 SAN PABLO AVE. WE WERE  
GIVING OUR WEEKLY SUNDAY OAKLAND RAIDED PARTY  
AND DANCE. WE NORMALLY HAVE TWO OPD OFFICERS  
WORKING WDDOP OVERTIME. USUALLY WE HAVE NO  
PROBLEMS WITH THE CROWD OR OUTSIDE THE CLUB.  
HOWEVER TONIGHT WE HAD APPROX. 700+ PEOPLE OUTSIDE  
THE CLUB. THEY BEGAN TO GET UNRULY WHEN  
THE SECURITY STAFF ASKED THEM TO LINE UP IN  
AN ORDERLY FASHION. THE OFC WE HAD WORKING  
OVERTIME AT THE CLUB CALLED FOR ADDITIONAL  
UNITS AT APPROX 2300 HRS. AT THAT POINT WE  
HAD APPROX 250 PEOPLE INSIDE THE CLUB.  
WE SHUT THE DOOR AND REFUSED TO ADMIT  
ANY MORE PATRONS. OPD LT. K WHITMAN THEN  
CAME TO ASSESS THE SITUATION AND REQUESTED  
ADDITIONAL UNITS

Signature of Person Giving Statement

Date

1. Complainant

STATE OF CA

Offense/Crime

28601 APC.

3. Name of Person Giving Statement

LETHA R JACOBS

Sex/Race/DOB

W/B

☐ Complainant

☐ Suspect

☐ Driver

☒ Reporting Person

☐ Witness

STATEMENT:

TO HELP CLEAR THE CLUB. APPROX 20-30 OPD  
UNITS ARRIVED AND CLEARED THE FRONT & SIDES  
OF THE CLUB. WE CLOSED THE CLUB AT APPROX  
0115 (15 MINS EARLIER THAN USUAL). WE HAVE  
NOT HAD ANY PROBLEMS WITH LARGE CROWDS  
RECENTLY. PARTIALLY BECAUSE OF THE MEASURES  
WE TAKE, FROM BLOCKING THE STREETS TO CLEARING  
THE SIDEWALKS AND LOTS WE HAVE WORKED  
WITH THE POLICE AT EVERY TURN AND  
HIDE OPD EVERY WEEK FOR THE CLUB.  
THERE WAS NO WAY FOR US TO ANTICIPATE  
SUCH A LARGE CROWD ESPECIALLY SINCE THIS  
IS A WEEKLY EVENT. I DONT KNOW WHY  
THE CROWD CAME OUT IN SUCH NUMBERS  
SO EARLY. \*THIS IS A TRUE STATEMENT\*

Signature of Person Giving Statement

Date

02105643

1. Complainant STATE OF CA		Offense/Crime 25601 NBL		2. Report No. 02105643	
3. Name of Person Giving Statement WARD, JIMMIE LEE		Sex/Race/DOB M/B/ [REDACTED]		<input type="checkbox"/> Complainant <input type="checkbox"/> Suspect <input type="checkbox"/> Driver <input type="checkbox"/> Reporting Person <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 SWEET JIMMIES. [REDACTED]					
6. Statement Taken By O BAKER		Serial No. 3406P		Date 11-11-02	
		Time Started - Completed 0210-0220			
7. Location Where Statement Taken 1731 San Pablo Ave		Names, Addresses of Persons Present During Statement NONE			

## 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:

I AM THE OWNER OF SWEET JIMMIES. TONIGHT, WE WERE HAVING A BIRTHDAY PARTY FOR MY SON AT THE CLUB. I WAS ONLY EXPECTING ABOUT 200 PEOPLE TO COME TO THE CLUB. BUT AT ABOUT 11:00 P.M. WE HAD ABOUT 250 PEOPLE COME INSIDE OF THE CLUB. I REALIZED THAT WE HAD AN OVERFLOW AND TOO MANY PEOPLE OUTSIDE TO COME INTO THE CLUB. SO WE SHUT THE DOORS COMPLETELY AND DID NOT ALLOW ANYBODY ELSE IN. I KNEW IF I ALLOWED MORE PEOPLE IN THAT THERE WOULD BE A PROBLEM. WE HAD REQUESTED (3) THREE OAKLAND POLICE OFFICERS TO WORK SECURITY, BUT ONLY ONE (1) HAD SHOWED UP. J.J. THE OFFICER THAT WAS HERE, CALLED FOR ADDITIONAL UNITS FOR THE CROWD. I DON'T KNOW HOW MANY PEOPLE WERE OUTSIDE BUT THERE WAS A MOB. WE DIDN'T HAVE ANY PROBLEMS INSIDE OR OUTSIDE OF THE CLUB. THIS IS A TRUE STATEMENT.

Signature of Person Giving Statement

Date

11-11-02

23142777 C70 230410 04 04X ONVW S/38 1731 SAN PAZ LG 02106643 U=16L03 (D:2  
304/#C70) U=3L03 (D:2315/#C70) U=3L01 (D:2320/#C70) U=3L11 (D:2320/#C70)  
U=3L71 (D:2321/#C70) U=3L08 (D:2322/#C70) U=3L75 (D:2327/#C66) U=3L29 (D:  
2327/#C66) U=3L76 (D:2327/#C66) U=3L33 (D:2327/#C66) U=3L26 (D:2327/#C66)  
U=3T53 (D:2327/#C66) U=3A32 (D:2329/#C66) U=3L34 (D:2329/#C66)  
....SUPL C66 233015 S/29 D=ALL DIST 5 UNITS WILL [REDACTED]  
[REDACTED] U=3A30 (D:2331/#C66) U=3A31 (D:2332/#C66) U=3L33 (S:2327 /2332) U  
=3L33 (D:2332/#C66) U=3L27 (D:2335/#C66) U=3L12 (D:2335/#C70) U=3L02 (D:23  
36/#C70) U=3A10 (D:2337/#C70) U=3L04 (D:2338/#C70) U=3L26 (S:2327 /2344)  
U=3L26 (D:2344/#C70) U=3L06 (D:2349/#C70) U=1L72 (D:2358/#C70)  
....SUPL C70 235843 S/39 D=PER 1L72 - NEEDS CD2 TO STAND BY  
\*\*\*AMB\*\*\* [AMB CLRD BY #C76/2358]  
....SUPL C76 000105 S/ 6 D=FAMED ADV TO STANDY BY AT 15, [REDACTED]  
U=3A62 (D:0001/#C70) U=1L08 (D:0006/#C70)  
....SUPL C70 000734 S/39 D=1L72 REQ 1L8 TO 17,SP U=3A62 (S:  
0001 /0012)  
....SUPL C70 002639 S/39 D=15,SP FOR AMR IN THE CULDESAC -- J  
UST IN CASE AMB IS NEEDED -- UNITS HERE FOR RIOT CONTROL SITUATION  
....SUPL C35 002829 S/ 1 D=FAMED ADV 15, SP CULDESAC U=1T13  
(D:0051/#C33)  
....SUPL C33 005115 S/25 D=1T13 [REDACTED] U=1L08  
(S:0006 /0052) U=1L08 (D:0052/#C76)  
....SUPL C33 005622 S/25 D=SEE 2812 U=3L13 (D:0107/#C33)  
U=1L04 (D:0115/#C33)  
....SUPL C33 011532 S/25 D=1L4 [REDACTED] U=3L20 (D:0  
120/#C33) U=3L19 (D:0120/#C33) U=3L23 (D:0121/#C33) U=3L17 (D:0121/#C33)  
U=3L18 (D:0121/#C33) U=3A21 (D:0121/#C33) U=3L22 (D:0121/#C33) U=3L24 (D:  
0121/#C33) U=3L25 (D:0122/#C33) U=3L14 (D:0122/#C33) U=1K21 (D:0122/#C33)  
U=1K21 (S:0122 /0122) U=1K21 (D:0122/#C33) U=1K23 (D:0122/#C33) U=3A32 (S  
329 /0201) U=3L19 (S:0120 /0201)  
....SUPL C76 020139 S/39 U=3A31 (S:2332 /0201) U=3A21 (S  
:0121 /0201) U=3L75 (S:2327 /0202) U=3L18 (S:0121 /0202) U=1L08 (S:0052 /0  
202) U=3L25 (S:0122 /0202) U=3L76 (S:2327 /0203) U=3L27 (S:2335 /0204) U  
=3L34 (S:2329 /0205) U=3L29 (S:2327 /0205) U=3L08 (S:2322 /0206) U=3L20 (S  
:0120 /0206) U=3A30 (S:2331 /0206) U=3L26 (S:2344 /0206) U=3L24 (S:0121 /0  
206)  
....SUPL C33 020719 S/25 D=1L4 HANDLING 950 FOR ILLEGAL CABER  
ET AT SWEET JIMMYS U=3T53 (S:2327 /0209) U=1K21 (S:0122 /0210) U=3L11 (S:2  
320 /0210) U=3L03 (S:2315 /0210) U=3L04 (S:2338 /0210) U=3A10 (S:2337 /021  
0) U=3L02 (S:2336 /0210) U=3L12 (S:2335 /0212) U=1K23 (S:0122 /0213) U=3  
L13 (S:0107 /0213) U=3L06 (S:2349 /0213) U=16L03 (S:2304 /0218) U=3L71 (S:  
2321 /0234) U=1T13 (S:0051 /0234) U=3L01 (S:2320 /0243)  
....SUPL C33 024355 S/25 U=3L33 (S:2332 /0243)

23142812 C16 232442 04 04X ONVW S/34 [REDACTED] U=1L92  
(D:2324/#C16) U=3L16 (D:2324/#C16) U=3L16 (S:2324 /2324) U=3L16 (D:2324/#C  
68) U=3L15 (D:2324/#C16) 02106643  
....SUPL C16 232536 S/35 D=ALL 3RD WATCH AREA 2 -- 940 W/1L92  
U=3L20 (D:2327/#C16) U=3L19 (D:2328/#C16) U=3L23 (D:2328/#C16) U=3L17 (D:2328/#C16)  
U=3L18 (D:2328/#C16) U=3A32 (D:2328/#C16) U=3A32 (S:2328 /2329)  
U=3A21 (D:2330/#C68) U=3L22 (D:2330/#C68) U=3L24 (D:2330/#C68) U=3L25 (D:2330/#C68)  
U=3L14 (D:2331/#C16)  
....SUPL C70 000239 S/39 D=18,SP - 1K23,1K21 TO 40 W/1L92 U=1K21 (D:0003/#C70) U=1K23 (D:0003/#C70)  
....SUPL C33 005616 S/25 D=SEE 2777 ALSO U=3L18 (S:2328 /0116) U=3L18 (D:0116/#C76) U=3L20 (S:2327 /0120) U=3L19 (S:2328 /0120) U=3L23 (S:2328 /0121) U=3L17 (S:2328 /0121) U=3L18 (S:0116 /0121) U=3A21 (S:2330 /0121) U=3L22 (S:2330 /0121) U=3L24 (S:2330 /0121) U=3L25 (S:2330 /0122) U=3L14 (S:2331 /0122) U=1K21 (S:0003 /0122) U=1K23 (S:0003 /0122) U=3L16 (S:2324 /0202) U=1L92 (S:2324 /0204)  
....SUPL C33 020559 S/25 U=3L15 (S:2324 /0205)

## CRIME REPORT

OAKLAND POLICE DEPARTMENT  
455 - 7<sup>th</sup> STREET  
OAKLAND, CA 94607-3985

Assign To:

A1

RD #

02-06214

<b>ROUTING</b> <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. VIC/WIT <input type="checkbox"/> <input type="checkbox"/>		Outside Reporting Agency		Case No.		Police Beat		CP Beat 4X		Incident No. 813									
<b>VICTIM</b> Last, First, Mid SWEET Jimmie's		<input checked="" type="checkbox"/> Business Name <input 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		Zip		Work Phone													
Occupation NIGHT CLUB 7 DAYS		D.L. Number		State		<input type="checkbox"/> Domestic Violence <input type="checkbox"/> Victim Injured <input type="checkbox"/> Sex Assault Victim Request Conf.													
Working Hours 1000-0200		<input type="checkbox"/> Victim's Support		<input type="checkbox"/> Resource Info Provided															
<b>ADDITIONAL PERSON</b> <input type="checkbox"/> R/P <input type="checkbox"/> Parent <input type="checkbox"/> Witness 1		Last, First, Mid		Sex F		Race A		D.O.B.		Age									
Home Address		City <input checked="" type="checkbox"/> Oakland		Zip		Home/Msg. Phone													
Business Address / School		City <input checked="" type="checkbox"/> Oakland		Zip		Work Phone													
<b>LOCATION</b> <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.		<b>POINT OF ENTRY</b> <input checked="" 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		<b>LOCATION P.O.E.</b> <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input checked="" type="checkbox"/> SIDE <input type="checkbox"/> ROOF <input type="checkbox"/> UNK.		<b>METHOD OF ENTRY</b> <input checked="" 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		<b>BURGLARY</b> <input type="checkbox"/> AUTO <input type="checkbox"/> RESIDENTIAL <input checked="" type="checkbox"/> COMMERCIAL <input type="checkbox"/> OTHER <input type="checkbox"/> ALARM RESP		<b>WEAPON USED</b> <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															
<b>CRIME</b> Common Name BURGLARY		Section/Subsection 459 PC		Code		Pertains To: V: 1													
Location (Address/Block No./Intersection) 1731 SAN PABLO AVE		<input type="checkbox"/> OHA <input type="checkbox"/> ABC		Occurred On or From 9 NOV 02 0810 To ↓ Reported 9 NOV 02 0900		Date 9 NOV 02		Time 0810		Day SAT		<b>VANDALISM</b> <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							
<b>(CHECK ALL THAT APPLY)</b> 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 checked="" type="checkbox"/> CONSUMABLE GOODS 9 <input type="checkbox"/> LIVESTOCK 10 <input type="checkbox"/> MOTOR VEHICLES 11 <input type="checkbox"/> MISCELLANEOUS		<b>TYPE OF THEFT</b> <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 checked="" type="checkbox"/> FROM BUILDING <input type="checkbox"/> OTHER		<b>SOLVABILITY FACTORS (Check All That Apply)</b> <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.													
U.C.R. CODE: 2 (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. There are no known suspects. This report is made to alert the police. No narrative was completed.																			
<b>VICTIM VEHICLE</b>		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"/> Min. <input type="checkbox"/> Road		Color		Brand		Model		Speed							
<b>PROPERTY NARRATIVE</b>		<input checked="" type="checkbox"/> Loss <input type="checkbox"/> Evidence <input type="checkbox"/> Safekeeping <input type="checkbox"/> Recovered		Location When Stolen <input type="checkbox"/> Interior <input checked="" type="checkbox"/> Exterior <input type="checkbox"/> Garage															
AOD and Juvenile Reporting Code (Refer to AOD Code Card)		Item		Qty.		Item Type		Brand		Model No.		Size, Color, Marks, Etc.							
AOD		Setting (2 Digit #)		Juvenile		Serial No.		\$ Value											
A		63		T															
Vict.		Wit.		Susp.		Arr.		<input type="checkbox"/> Phone Report <input type="checkbox"/> Photos Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Rec. Value \$ 500.00		Loss Value \$ 500.00		Page 1 of 5	
Reported By K. ALBINO		Serial No. 8541P		Watch 2		Area 1		Supervisor SGT. R. GRIMES		Serial No.		Reviewer [Signature]		Serial No.					

# OPD POLICE REPORT

## SUSPECT REPORT

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

RD #

02-106214

CRIME <b>SURGLARY 459 PC</b>		INCIDENT NO. <b>813</b>		V1		VICTIM LAST, First, Mid. <b>[REDACTED]</b>	
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<b>SUSPECT</b>		Number <b>1</b>		LAST, First, Mid. <b>UNK</b>		RELATIONSHIP TO VICTIM <b>NONE</b>		IN CUSTODY THIS OFFENSE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
SEX <b>M</b>	RACE <b>B</b>	D.O.B.	AGE <b>[REDACTED]</b>	HEIGHT <b>5'-10</b>	WEIGHT <b>250</b>	HAIR <b>BLK</b>	EYES <b>BRN</b>	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 _____ <input type="checkbox"/> PAROLE AGENT _____ <input type="checkbox"/> PAL			
BY: (OFFICER/DATE/TIME): _____									
DESCRIPTION PROVIDE BY <b>RIP</b>		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED <b>BLU JEANS, HOMELESS APPEARANCE, NFD</b>							

<b>HAIR LENGTH</b>		<b>HAIR STYLE</b>		<b>FACIAL HAIR</b>		<b>COMPLEXION</b>		<b>APPEARANCE</b>		<b>SPEECH</b>		<b>DEMEANOR</b>	
<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		<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		<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		<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"/> BUDDY		<input type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input checked="" 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 <input type="checkbox"/> 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	
<b>OTHER DISTINCTIVE FEATURES</b>				<input type="checkbox"/> BODY ODOR TYPE _____		<b>WEAPON USED</b>				<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"/> 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			

<b>SUSPECT</b>		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				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 _____ <input type="checkbox"/> PAROLE AGENT _____ <input type="checkbox"/> PAL			
BY: (OFFICER/DATE/TIME): _____									
DESCRIPTION PROVIDE BY		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED							

<b>HAIR LENGTH</b>		<b>HAIR STYLE</b>		<b>FACIAL HAIR</b>		<b>COMPLEXION</b>		<b>APPEARANCE</b>		<b>SPEECH</b>		<b>DEMEANOR</b>	
<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 <input type="checkbox"/> 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	
<b>OTHER DISTINCTIVE FEATURES</b>				<input type="checkbox"/> BODY ODOR TYPE _____		<b>WEAPON USED</b>				<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"/> 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			

<b>SUSPECT VEHICLE</b>		VEHICLE WAS		DAMAGE DETAILS, UNIQUE FEATURES		OTHER DESCRIPTION	
		<input type="checkbox"/> SECURED AT SCENE <input type="checkbox"/> FINGERPRINTED <input type="checkbox"/> RELEASED TO OWNER <input type="checkbox"/> HOLD(UNIT) _____					
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"/>
WHEELS		RIMS	LEVEL	ROOF	WINDOWS	SEATS	TRANSMISSION
<input type="checkbox"/> STOCK <input type="checkbox"/> WIDE <input type="checkbox"/> SMALL <input type="checkbox"/>	<input type="checkbox"/> STOCK <input type="checkbox"/> CHROME <input type="checkbox"/> MAGS <input type="checkbox"/> SPOKE	<input type="checkbox"/> STOCK <input type="checkbox"/> LOWERED <input type="checkbox"/> RAISED <input type="checkbox"/>	<input type="checkbox"/> VINYL <input type="checkbox"/> LANDAU <input type="checkbox"/> CONV	<input type="checkbox"/> TINTED <input type="checkbox"/> BROKEN	<input type="checkbox"/> VINYL <input type="checkbox"/> BENCH <input type="checkbox"/> CLOTH <input type="checkbox"/> BUCKET	<input type="checkbox"/> AUTOMATIC <input type="checkbox"/> MANUAL	
REPORTED BY		SERIAL #	WATCH	DISTRICT	SUPERVISOR	SERIAL #	
<b>K. ALBINO</b>		<b>8541A</b>	<b>2</b>	<b>1</b>	<b>SGT. R. GRIMES</b>	<b>PAGE 2 OF 5</b>	

# O P D

## POLICE REPORT

Victim  
Witness

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

RD #

02-106214

CLASS		INCIDENT NO.		VICTIM LAST, First, Mid.		[ ] Business Name	
MURDER		45900		813		V1 SWEET JIMMIE'S	

<b>ADDITIONAL PERSONS</b>		CLASS: V W R/P			LINKED TO: V R/P W S		
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CLASS	LINKED TO	LAST, First, Mid	[ ] Business Name	SEX	RACE	D.O.B.	AGE
V42	V41	WARD, JIMMIE		M	R		
HOME ADDRESS		CITY	OAKLAND	ZIP	HOME PHONE		
BUSINESS ADDRESS / SCHOOL		CITY	OAKLAND	ZIP	WORK PHONE		
OCCUPATION			WORKING HOURS	D.L. NUMBER/STATE			
NIGHT CLUB OWNER							
VICTIM ACTIVITY:		[ ] AT HOME	[ ] ON STREET	[ ] IN HOSPITAL	[ ] WALKING	[ ] DRIVING	[ ] AT SCHOOL
(Check All That Apply)		[ ] AT WORK	[ ] ON VACATION	[ ] IN JAIL	[ ] JOGGING	[ ] SLEEPING	[ ] SHOPPING CNTR

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

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

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

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

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

REPORTED BY	SERIAL #	WATCH	DISTRICT	SUPERVISOR	SERIAL #
K. ALBINO	8541P	2	1	SGT. R. GRIMES	



# ADDITIONAL INFORMATION REPORT

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

RD #

02-106214

CRIME <b>BURGLARY</b>	[ ] SUPPLEMENTAL <b>459PC</b>	INCIDENT # <b>813</b>	V1	VICTIM LAST, First, Mid. <b>SWEET JIMMIE'S</b>
ECT LAST, First Mid. <b>UNK</b>	INCIDENT LOCATION <b>1731 SAN PABLO AVE</b>		DATE OF THIS REPORT <b>9 NOV 02</b>	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 9 NOV 02 I WAS ON DUTY WORKING OPA UNIT 2K4 I WAS DRESSED IN FULL UNIFORM AND DRIVING MARKED POLICE VEH # 1204. AT APPROXIMATELY 0855 HRS RADIO DISPATCHED ME TO SWEET JIMMIE'S NIGHT CLUB AT 1731 SAN PABLO AVE WHERE R/P HUANG-WARD ARRIVED AND SAW A SUBJECT EXITING THE BUSINESS.

UPON ARRIVAL, R/P HUANG-WARD WAS B.D.A. BUT I MET WITH HER HUSBAND / OWNER JIMMIE WARD WHO CONTACTED R/P HUANG-WARD V/A TELEPHONE AT HOME. I SPOKE W/R/P HUANG-WARD WHO STATED SHE ARRIVED AT THE BUSINESS THIS MORNING (9 NOV 02) AT ABOUT 0810 HRS. SHE SAID SHE FOUND THE KITCHEN DOOR ON THE 18<sup>th</sup> ST. AND SAN PABLO AVE CLOSED BUT UNLOCKED.

UPON ENTRY HUANG-WARD SAID THE LISTED SUSP, SHE DESCRIBED AS A MB 30's, 5'10, 250 lbs, BIK HAIR, BRO EYES, BLU JEANS AND HAVING A HOMELESS APPEARANCE QUICKLY EXITED THE KITCHEN DOOR. HUANG-WARD SAID THE SUSP WAS CARRYING A LARGE GRN PLASTIC GARBAGE BAG CONTAINING THE LOSS. HUANG-WARD SAID, SHE TOLD THE SUSP WHAT ARE YOU DOING? AND THE SUSP PLACED THE BAG DOWN BUT PICKED IT UP AND QUICKLY WALKED N/R SAN PABLO AVE FROM 18<sup>th</sup> ST. HUANG-WARD THEN GOT INTO HER VEHICLE AND DROVE AWAY TO NOTIFY HER HUSBAND. HUANG-WARD CANNOT ID SUSP IF SEEN AGAIN.

APPARENTLY, SUSP GAINED ENTRY VIA AN UNLOCKED KITCHEN DOOR. ONCE INSIDE, SUSP CONDUCTED A NEAT AND SELECTIVE SEARCH OF THE PREMISES. SUSP THEN EXITED THE BUILDING AND ENTERED AN ENCLOSED COURTYARD WHERE THE SUSP USED A BLUNT INSTRUMENT AND SMASHED OPEN A GLASS BAR TAKING THE ABOVE LOSS.

REPORTED BY <b>K. ALBINO</b>	SERIAL # <b>8541P</b>	WATCH <b>2</b>	DISTRICT <b>1</b>	SUPERVISOR <b>SGT. R. GRIMES</b>	SERIAL #	PAGE <b>4</b> OF <b>5</b>
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# O P D

## ADDITIONAL INFORMATION REPORT

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

RD #

02-06214

CRIME <b>BURGLARY</b>	[ ] SUPPLEMENTAL <b>459 PC</b>	INCIDENT # <b>813</b>	V1 <b>VI</b>	VICTIM LAST, First, Mid. <b>SWEET JIMMIE'S</b>
ECT LAST, First Mid. <b>UNK</b>	INCIDENT LOCATION <b>1731 SAN PABLO AVE</b>	DATE OF THIS REPORT <b>9 NOV 02</b>	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-

SUSP THEN EXITED VIA THE P.D.E. AND FLEW W/ LOSS.

OTHER INFO:

NO TECH AVAILABLE TECH TAG LEFT AT THE SCENE.

R/O CANVASSED THE AREA FOR SUSP AND PHYSICAL EVIDENCE AND  
MET W/ NEGATIVE RESULTS.

REPORTED BY <b>K. ALBINO</b>	SERIAL # <b>8541P</b>	WATCH <b>2</b>	DISTRICT <b>1</b>	SUPERVISOR <b>SGT. R. GRIMES</b>	SERIAL #	PAGE <b>5</b> OF <b>5</b>
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ORI 00109

## CRIME REPORT

OAKLAND POLICE DEPARTMENT  
455 - 7<sup>th</sup> STREET  
OAKLAND, CA 94607-3985

Assign To:

A1

RD #

02102158

## ROUTING

- ☐ CID  
☐ YSD  
☐ VICE  
☐ CSD  
☐ TRAFFIC  
☐ D.A.  
VIC/WIT  
☐  
☐

Outside Reporting Agency

Case No.

Police Beat

CP Beat

Incident No.

VICTIM 1

Last, [REDACTED]

Federal

Sex

Race

D.O.B.

Age

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 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

Batter

Section/Subsection

242 PC

Code

Pertains To:

V: 1

Location (Address/Block No./Intersection)

☐ OHA☐ ABC

1731 San Pablo

## 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

U.C.R. CODE

(LIST MOST EXPENSIVE ITEM ABOVE)

- ☐ PICKPOCKET  
☐ PURSE/NATCH  
☐ AUTO ACCESS  
☐ AUTO CLOUT  
☐ SHOPLIFTING  
☐ BICYCLE  
☐ COIN OP. DEVICE  
☐ FROM BUILDING  
☐ OTHER

Occurred

Date

Time

Day

VANDALISM

On or From

27 Oct 07

0100

Sun

To

/

/

/

Reported

27 Oct 07

0108

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

- ☐ 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)

See Summary →

AOD

Setting  
(2 Digit #)

Juvenile

A

63

T

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 1  
of 4

Reported By

Serial No.

Watch

Area

Supervisor

Serial No.

Reviewer

Serial No.

D. Burke

2506P

Z

1

SOT Vansloten

# O P D

## SUSPECT REPORT

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

RD #

02-102158

CRIME <b>242 PC</b>		INCIDENT NO. <b>2904</b>		V1		[REDACTED]	
------------------------	--	-----------------------------	--	----	--	------------	--

<b>SUSPECT</b>		Number		LAST, First, Mid. <b>Holmes, Leonore</b>		RELATIONSHIP TO VICTIM		IN CUSTODY THIS OFFENSE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
SEX <b>M</b>		RACE <b>B</b>		D.O.B. [REDACTED]		AGE [REDACTED]		CITE # <b>4464471</b>	
HOME ADDRESS [REDACTED]		CITY <input checked="" type="checkbox"/> OAKLAND		ZIP [REDACTED]		APT. NO.		HOME /MSG. PHONE [REDACTED]	
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: **R/O** CLOTHING, SCARS, MARKS, TATOOS, WORDS USED  
**Burg shirt BLK pants**

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

**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

<b>SUSPECT VEHICLE</b>		VEHICLE WAS <input type="checkbox"/> TOW (#) _____		DAMAGE DETAILS, UNIQUE FEATURES		OTHER DESCRIPTION	
		<input type="checkbox"/> SECURED AT SCENE <input type="checkbox"/> FINGERPRINTED					
		<input type="checkbox"/> RELEASED TO OWNER <input type="checkbox"/> HOLD (UNIT) _____					
OWNER		ADDRESS		CITY <input type="checkbox"/> OAKLAND		ZIP	
LIC./STATE/OR PLATE COLORS		YEAR		MAKE		MODEL	
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 <input type="checkbox"/>		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 <input type="checkbox"/>	
WINDOWS <input type="checkbox"/> TINTED <input type="checkbox"/> BROKEN <input type="checkbox"/>		SEATS <input type="checkbox"/> VINYL <input type="checkbox"/> BENCH <input type="checkbox"/> CLOTH <input type="checkbox"/> BUCKET <input type="checkbox"/>		TRANSMISSION <input type="checkbox"/> AUTOMATIC <input type="checkbox"/> MANUAL <input type="checkbox"/>			

REPORTED BY <b>D. Burke 8506P</b>	SERIAL #	WATCH	DISTRICT	SUPERVISOR <b>Sgt Vansliten</b>	SERIAL #	PAGE <b>2</b> OF <b>4</b>
		<b>2</b>	<b>1</b>			

# ADDITIONAL INFORMATION REPORT

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

RD #

02-102158

CRIME 2 1/2 PC	[ ] SUPPLEMENTAL	INCIDENT # 2904	V1	VICTIM LAST, First Mid [REDACTED]
ST LAST, First Mid. Holmes, Leonore	INCIDENT LOCATION 1731 San Pablo	DATE OF THIS REPORT 2/20/02	ORIGINAL DATE REPORTED	

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

Statement of [REDACTED] Taken By Ofc D. Burke 8506P  
my name is [REDACTED] I live at [REDACTED]  
[REDACTED]. Tonight I was at Sweet Jimmies Club  
located at 1731 San Pablo Ave. I was walking through  
the door that lead into the club and this guy grabbed  
me around my waist and I told him not to touch me.  
He said "Bitch move out my way", I told him He don't  
even know me. He grabbed me by my neck and I got  
away from him and he slapped me in the face. He walked  
off into the crowd and I got my cousins. He was a Black  
male wearing a Burgundy shirt and he is the same one  
I pointed out to the police and I want him arrested.  
This is a true statement.

X [REDACTED]

(Summary)

Today at about 0108 Hrs, I was contacted by  
(VI) [REDACTED] while I was working at 1731 San Pablo Ave  
(Sweet Jimmies). [REDACTED] was upset and stated that s/he was  
assaulted by (SI) identified as Holmes as s/he tried to  
enter the club. [REDACTED] provided the above statement and  
had no visible signs of injuries or complaints of pain and  
requested no medical attention.

[REDACTED] lead me to the dance floor area and pointed out  
( ) Holmes as the one who assaulted her.

REPORTED BY D. Burke 8506P	SERIAL #	WATCH	DISTRICT	SUPERVISOR	SERIAL #	PAGE 3 OF 4
		2	1	Sgt Vansloten		

# **ADDITIONAL INFORMATION REPORT**

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

RD #

02-102158

CRIME <b>242PC</b>	[ ] SUPPLEMENTAL	INCIDENT # <b>2904</b>	V1	VICTIM LAST First Mid [REDACTED]
ECT LAST, First Mid. <b>Holmes, Leonore</b>	INCIDENT LOCATION <b>1731 SAN PABLO AVE</b>	DATE OF THIS REPORT <b>270602</b>	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)*

I detained Holmes to further conduct an investigation since no independent witnesses could be located to corroborate (N) [REDACTED] accounts of this incident.

I asked (SI) Holmes what took place and he stated that got into a verbal argument with [REDACTED] who he did not know. Holmes said [REDACTED] was blocking the entrance and he asked her to move and when she refused he pushed her out of the way. Holmes declined to provide a written statement.

Holmes was cited and released for this involvement in this incident citation # 4464471 (attached).

(VI) [REDACTED] sustained no visible injuries and requested (SI) Holmes be arrested for assaulting her.

REPORTED BY <b>D. Burke</b>	SERIAL # <b>85060</b>	WATCH <b>2</b>	DISTRICT <b>2</b>	SUPERVISOR <b>SGT [REDACTED]</b>	SERIAL #	PAGE <b>4</b> OF <b>4</b>
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ORI 00109



836-001 (REV. 1-01)

OAKLAND POLICE DEPARTMENT  
NOTICE TO APPEAR

02-102158

<input type="checkbox"/> TRAFFIC <input checked="" type="checkbox"/> MISDEMEANOR		<input type="checkbox"/> NONTRAFFIC		OAKLAND CITATION NUMBER	
Date of Violation	Time	Day of Week	<input type="checkbox"/> No Report	4464471	
Name (First, Middle, Last)			<input type="checkbox"/> Owner's Responsibility (Veh. Code, § 40001)		
Leonore Holmes					
Address					
City			State	ZIP Code	
OAKLAND			CA	94601	
Driver License No.			Birth Date	<input type="checkbox"/> Juvenile - Phone No.	
Sex	Hair	Eyes	Height	Weight	Race
M	Blk	Blk	5-8	210	B
Veh. Lic. No.			State	<input type="checkbox"/> COMMERCIAL VEHICLE (Veh. Code, §15210(b))	
				<input type="checkbox"/> HAZARDOUS MATERIAL (Veh. Code, §353)	
Yr. of Veh.	Make	Model	Body Style	Color	
Evidence of Financial Responsibility					
Registered Owner or Lessee			<input type="checkbox"/> Same as Driver		
Address			<input type="checkbox"/> Same as Driver		
City			State	ZIP Code	
Correctable Violation (Veh. Code, §40610)			<input checked="" type="checkbox"/> Booking Required		Misdemeanor or Infraction (Circle)
Yes	No	Code and Section	Description		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	242	P.C. Battery	(M)	I
<input type="checkbox"/>	<input type="checkbox"/>			M	I
<input type="checkbox"/>	<input type="checkbox"/>			M	I
<input type="checkbox"/>	<input type="checkbox"/>			M	I
Speed Approx.		P.F./Max. Spd.	Veh. Lmt.	Direction	City
Location of Violation(s)					
At 1731 San Pablo Ave					
Weather		Road Cond.	Traffic Cond.	Accident? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<input checked="" type="checkbox"/> Violations not committed in my presence, declared on information and belief.					
I declare under penalty of perjury under the laws of the State of California the foregoing is true and correct.					
Arresting or Citing Officer			Serial No.		
D. Burke			8506P		
J. Wilford			7483P		
Date			Name of Arresting Officer, if different from Citing Officer		
WITHOUT ADMITTING GUILT, I PROMISE TO APPEAR AT THE TIME AND PLACE INDICATED BELOW.					
X Signature Leonore Holmes					
WHEN: ON OR BEFORE THIS DATE: 11 26 02 TIME: 0830 AM <input type="checkbox"/> PM					
WHAT TO DO: FOLLOW THE INSTRUCTIONS ON THE REVERSE					
WHERE: SUPERIOR COURT					
TRAFFIC DIVISION					
<input type="checkbox"/> 661 WASHINGTON ST., OAKLAND, CA 94607					
TRAFFIC BAIL INFO. (510) 268-7673					
<input type="checkbox"/> SUPERIOR COURT DEPT. NO. 107					
<input type="checkbox"/> 600 <input type="checkbox"/> 561 WASHINGTON ST					
OAKLAND, CA 94607					
(510) 268-7700					
<input type="checkbox"/> TO BE NOTIFIED					

To Appear form approved by the Judicial Council of California  
12-18-00 (Veh. Code, §§40500(b), 40513(b), 40522, 40600; Pen. Code, §853.9)

SEE REVERSE TR-130

D  
O  
C  
K  
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T  
  
N  
O

**CALIFORNIA**  
DRIVER LICENSE

CLASS: C

SEX: F    HAIR: BRN    EYES: BRN  
HT: 5-02    WT: 110



[Redacted Address]

[Redacted Signature]



## Killey, Barbara

---

**From:** Killey, Barbara  
**Sent:** Thursday, January 26, 2006 1:17 PM  
**To:** Jackson, Izetta C. R.  
**Cc:** Hodgkins, James  
**Subject:** Draft of cabaret permit conditions for jimmies



Cabaret Conditions  
- Jimmie's....

Hello oh great and wonderful advisor & litigator!

there are several references to @17th - it is the nearest club to jimmie's & the one with the most similar (shared?) problems.

This would be a 6 month permit (see condition 34)  
The conditions that are unique to Jimmie's are  
#3 (the most important one),

#4 (the way to deal with their 'first amendment right to have any kind of music they want' according to their counsel, Dorothy Guillory, even though they have agreed to keep it to blues & jazz),

5 - what is different here is a mechanism for resolving disputed invoices - they currently owe @ \$16,000 for excessive and/or contracted police services since 2002, which they have just ignored. can i commit the city to splitting the arbitration cost? if not, any ideas?

14 - a standard condition except for the part about Special Events - @17th has signed for a similar condition

22 - @17th has signed for this condition

23 - @17th self-imposed this condition

24 - not completely standard but imposed upon several cabarets that have had similar problems

33 - i want them to clear up their old invoices & for that to be a condition of continuing their permit.

34

Thanks for your review & your input

Barbara B. Killey  
Assistant to the City Administrator  
Administrative Hearing Officer  
City of Oakland  
1 Frank Ogawa Plaza, 11th Floor  
Oakland, CA 94612

Office (510) 238-2257  
Fax: (510) 238-7084  
email: bkilley@oaklandnet.com

1/20/06

Meeting w/ Jimmie at  
Mayor's Office

Tues 3:00  
11th floor

Stan Blitt

Kerth Jacobs

Joe Smith - Pastor Good Hope Baptist

Al Covington "

Carletta

John Minor

coordinate leaving times - staggered

Jimmies 250-300 patrons

back to jazz and blues

security address before OPD

off duty in uniform

8 disorderly houses - big parties w/  
hip hop rap artists

\$4000/night = 6 officers 1 sgt club car

hip hop  
concert

= special

event = 24 officers, 3 sgts

@ 17th + Sweet Jimmies meeting

Name	Cell	Email
Barb Kikey		bkikey@oaklandnet.com
Kyle Thomas	750-4561	
KEITH JACOBS (JIMMIES)		
C. GARRETT AGAT	717 8673	C.Garrett@oaklandnet.com
David Ward (Sweet Jimmies)		
Hakeem Bey U.D.		
Saraa + Naef		
Paul Benlin	238-7149 773-2753	pbenlin@oaklandnet.com

Send notice of any major events to: <sup>phone</sup> Sgt. Tom Hogenmiller 238-3154 fax 238-7196

10/2/05

Jimmi's

7 disorderly house reports '05  
crowd that hangs out outside, no intention  
of going in  
midnight - 1:30  
start coming out at 1:30 - hanging out

Chevron

Nation's

no dress code

turned over to David a couple of weeks ago  
hip hop

what are his operating conditions?

more security

parking problem? no

pay for OPD security

\*

haven't paid a single bill

9/15

Meeting w/ Sweet Jimmies + @ 17th

Kieth Jacobs - security for Jimmies

do traffic control on event nights

(block off) 6 streets

over 200

no later than 12:45, end 1:50

Bay willing to block

coordination bt clubs

cool down inside club 15 min

scrimage line to move all to cars

routinely block

Chevron lot + Nations

notify Sgt Thomas if someone notable  
coming in

use cones unless someone to monitor  
visible security

motorcycles won't be deterred by cones  
security needs to take control then

What are outstanding 'invoice \$?

## Sweet Jimmie's

05-066051 10/21/05 25601 PB  
10/22/05 Disorderly House 9.52.030 Keith the Sneak 400-500  
23:30 No special event permit 200-250 directly IFO club  
not videotaped (security can't control) on sidewalk + streets  
2.25 sgt hrs loud music, blocking  
15.25 officer hrs traffic, intoxicated  
persons, 1 shot outside  
shooting reported inside, not confirmed

05-011408 2/26/05 DVI 1900 San Pablo assoc w/ Jimmie's?  
Disorderly House (incomplete report)  
05-011437 " Sideshow 1733 San Pablo 200 people in street  
3.5 sgt hrs fights, 50-75 vehicles  
21 officer hrs club exits intox,  
civil disob, sideshow

?  
05-13166 10/22/05 Disorderly house (incomplete)  
videotaped uncontrolled crowd,  
vandalized a business

?  
05-019404 10/22/05 Disorderly house (incomplete)  
No special event permit

05-026620 4/10/05 Disorderly house 300-400 vehicles  
videotaped No special events permit  
3.0 sgt hrs  
23.5 officer hrs

?  
05-027086 10/22/05 ?

no #  
M. Trenkamp  
? + no special event  
2.5 sgt hrs  
24 officer hrs

04-105235

9/4/04

1820 Jefferson  
diabetic  
uncoop 911 caller

Moses (Moseley?)  
walked from shelter  
to Jimmie's

meeting w/ Sweet Timmies 1/24/06

fax

Name	Phone	Email
Barb Killey	238-2257	bKilley@oaklandnet.com
Pastor Joe L Smith	[REDACTED]	
Pastor A.C. Covington	[REDACTED]	
Jimmie WARD	[REDACTED]	
Donothu Gulleriy	[REDACTED]	
David Ward	[REDACTED]	
P. Benlin	238-7149	pbenlin@oaklandnet.com
K. Thomas	750-4561	
Carletta Starks	238-7032	cstarks@oaklandnet.com
MONIQUE TSANG	238-6803	NSC1205@GMAIL.COM
SANDRA V. SANDERS-WEST	(510) 777-8720	ssanders-west@oaklandnet.com





# 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
------------------------------------	------------------	----	---

<b>SUSPECT</b>		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											
<b>HAIR LENGTH</b> <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		<b>HAIR STYLE</b> <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		<b>FACIAL HAIR</b> <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		<b>COMPLEXION</b> <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		<b>APPEARANCE</b> <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		<b>SPEECH</b> <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		<b>DEMEANOR</b> <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		<b>WEAPON USED</b> 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"/> RIFLE <input type="checkbox"/> NICKEL <input type="checkbox"/> BLUED <input type="checkbox"/> CUT/STAB <input type="checkbox"/> VEHICLE			

<b>SUSPECT</b>		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											
<b>HAIR LENGTH</b> <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		<b>HAIR STYLE</b> <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		<b>FACIAL HAIR</b> <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		<b>COMPLEXION</b> <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		<b>APPEARANCE</b> <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		<b>SPEECH</b> <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		<b>DEMEANOR</b> <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		<b>WEAPON USED</b> 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"/> RIFLE <input type="checkbox"/> NICKEL <input type="checkbox"/> BLUED <input type="checkbox"/> CUT/STAB <input type="checkbox"/> VEHICLE			

<b>SUSPECT VEHICLE</b>		<b>VEHICLE WAS</b> <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"/> <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 - 7<sup>th</sup> 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

☐

VICTIM 1 Last, First, Mid ☐ Business Name ☒ Local / State / Federal Sex Race D.O.B. Age

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 1

Last, First, Mid Sex Race D.O.B. Age  
Sgt. K. Thomas 8069p

Home Address City ☐ Oakland Zip Home/Msg. Phone

Business Address / School City ☒ Oakland Zip Work Phone  
OPD 455 7<sup>th</sup> Street (3<sup>rd</sup> watch, 2B Squad) 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"/> 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		

☐ 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 Occurred Date Time Day  
1733 San Pablo Ave. 22-Oct-05 15 Sat

LOSS ☒ None TYPE OF THEFT On or From To Reported  
22-Oct-05 230 Sat

(CHECK ALL THAT APPLY)  
1 ☐ CURRENCY / NOTES 7 ☐ HOUSEHOLD GOODS  
2 ☐ CLOTHING / FURS 8 ☐ CONSUMABLE GOODS  
3 ☐ JEWELRY / PRECIOUS METAL 9 ☐ LIVESTOCK  
4 ☐ FIREARMS 10 ☐ MOTOR VEHICLES  
5 ☐ OFFICE EQUIPMENT 11 ☐ MISCELLANEOUS  
6 ☐ TVS, RADIO, STEREO  
U.C.R. CODE (LIST MOST EXPENSIVE ITEM ABOVE)  
☐ PICKPOCKET  
☐ PURSENATCH  
☐ AUTO ACCESS  
☐ AUTO CLOUT  
☐ SHOPLIFTING  
☐ BICYCLE  
☐ COIN OP. DEVICE  
☐ FROM BUILDING  
☐ OTHER

☐ 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 ☐ Towed  
☐ Released To The Owner ☐ Fingerprinted  
☐ Hold (Unit) ☐ Stolen Tow Number

☐ Car Year Make Model Body Type Color Vin No.  
☐ Truck  
☐ Other

☐ Stolen Bicycle ☐ Mens ☐ Mtn. Color Brand Model Speed License No. Serial No.  
☐ Womens ☐ Road

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				<input type="checkbox"/> Phone Report	Photos Taken	Evidence Collected	Tech:	Rec. Value	Loss Value	Page 1 of 5
Vict.	Wit.	Susp.	Arr.		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	On Scene <input type="checkbox"/> Yes <input type="checkbox"/> No Tech Tag Left <input type="checkbox"/> Yes <input type="checkbox"/> No			
1	0	0	0							

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

# 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 18<sup>th</sup> St and Jefferson, and from my vantage point could see 18<sup>th</sup> St, San Pablo, and 17<sup>th</sup> 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 17<sup>th</sup> 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 17<sup>th</sup> 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 18<sup>th</sup> St., and San Pablo N/B on the West curb, while I formed a skirmish line and cleared out E/B 18<sup>th</sup> 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 19<sup>th</sup> St. and San Pablo to the liquor store, as well as the Chevron Gas Station at 18<sup>th</sup> 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 18<sup>th</sup> 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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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.

# 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	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 17<sup>th</sup> 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 17<sup>th</sup> 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	Serial No. 7819P	Watch 1	Area 1	Supervisor Lt. Anderson	Serial No.	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 1700 B/LC SAN PABLO	DATE OF THIS REPORT 22 OCT 85	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 OCT 85 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. 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. Hemmelt	SERIAL # 8425P	WATCH 3	DISTRICT 2	SUPERVISOR SGT. R. THOMAS	SERIAL #	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	α1 SUPPLEMENTAL BP	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 220608	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 220608 AT APP. 0015 HOURS I WAS WORKING AS UNIT 4601. I WAS IN FULL POLICE UNIFORM DRIVING MARKED 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 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 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 # 85898	WATCH 3	DISTRICT 1	SUPERVISOR SGT. 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 #  
 05-066051

CRIME 25601 BP	INCIDENT # 060	VICTIM LAST, First, Mid. SOL City of Oakland
SUSPECT LAST, First, Mid. "Sweet Jimmies"	INCIDENT LOCATION 1700 BLK SAN PABLO	DATE OF THIS REPORT 02/01/05
		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 02/01/05, AT ABOUT 0030, I WAS WORKING AS ODD PATROL UNIT 4A2 W/OFC 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.

ONCE AT OUR TRAFFIC POST I OBSERVED ABOUT 100-200 VEHICLES RUNNING RED LIGHTS, MAKING 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.

AFTER LEAVING THE CLUB WE WERE DIRECTED TO CONDUCT TRAFFIC EBF/IN AND AROUND THE CLUB. UPON CONDUCTING TRAFFIC EBF/WE NOTICED NUMEROUS TRAFFIC VIOLATIONS AND WROTE MULTIPLE TRAFFIC CITES I ALSO NOTICED THAT THE VEHICLE TRAFFIC WAS VERY THICK AND SLOW MOVING.

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 38	<input checked="" type="checkbox"/> SUPPLEMENTAL	INCIDENT # 60	V1	VICTIM LAST, First, Mid. Soc / City & Oakland
SUSPECT LAST, First, Mid. "Sweet Jimmies"	INCIDENT LOCATION 1733 San Pablo	DATE OF THIS REPORT 10/22 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 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 (2450 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 L. AUSMUS	SERIAL # 8432	WATCH 3	DISTRICT SA	SUPERVISOR SGT. GUTTORFSON	SERIAL # 7738	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	<input type="checkbox"/> SUPPLEMENTAL	INCIDENT # 60	V1	VICTIM LAST, First, Mid. SDC / 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)	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 T.C.P. AT 19<sup>TH</sup> ST. & JEFFERSON, WHERE I STAYED UNTIL THE UNRULY CROWD WAS FINALLY DISPERSED AT ABOUT 0230.

REPORTED BY S. BOWEN	SERIAL # 8411P	WATCH 3	DISTRICT 6	SUPERVISOR SGT. E. LEWIS	SERIAL #	PAGE 1 OF 1
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# ADDITIONAL INFORMATION REPORT

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

RD #

05-066051

CRIME 25601 BPK	SUPPLEMENTAL	INCIDENT # 60	V1	VICTIM LAST, First, Mid. SOC / City of 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
<u>SUPPLEMENTAL:</u>				
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 JIMMIE'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 MOTO) AND 16028 VC (NO INSURANCE) AND THE OTHER FOR 12500 VC (NO LICENSE), 27007 VC (LOUD MOTO), 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. HOPKINHAUER	SERIAL #	PAGE ____ OF ____
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# ADDITIONAL INFORMATION REPORT

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

RD #

05-066051

CRIME 25601 <sup>OP</sup> SUPPLEMENTAL	INCIDENT # 60	V1	VICTIM LAST, First, Mid. SOL / City of Oakland
SUSPECT LAST, First, Mid. Suspect 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 ( [REDACTED] ) 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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# 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 of 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 17<sup>TH</sup> 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. CATEX I.D.OO 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 04761	SERIAL #	WATCH 1	DISTRICT 6	SUPERVISOR SPT-K. COLEMAN	SERIAL #	PAGE 1 OF 1
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05-66051

**3<sup>rd</sup> 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 #
<b>4L1</b>	F. Gysin	8589P
<b>4A2</b>	C. Johnson	8517P
	S. Seder	8532P
<b>4A3</b>	M. Trenkamp	8463P
	D. Chimpky	8431P
<b>4L4</b>	D. Kemmitt	8425P
<b>4L5</b>	D. Jim	8156P
	L Ausmus	8432P
<b>4L6</b>	S. Bowling	8411P

**Total Officers: 9**



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 & 3 SHOTS HEARD	C73
05/10/22	01:06 Original Location : SWEET JIMMY'S	C73
05/10/22	01:06 Operator OPC73 Overrode 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 TRANE - 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	01:14 3L72 FOR INFO .. NO 245 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 LOP051022006051 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

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	Date/ Time	Operator
					BEAT TEAM/Dist AREA					
05/10/22	02:08	Primary unit		CHANGED From:OP/3L72			To:OP/5S14			C05
05/10/22	02:09	IAAssocInc		LOP051022000079 UPDATE PriUnt to OP/1L08						C05
05/10/22	02:13	Unit OP/5S14		reassigned to LOP051022000118						C05
05/10/22	02:13	Primary unit		CHANGED From:OP/4L06			To:OP/5S22			C05
05/10/22	02:32	IAAssocInc		LOP051022000095 UPDATE PriUnt 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

05-66051

OAKLAND PD

PAGE: 000001

Date: 10/22/05 Time: 02:53

Requested By: C21

## 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	Date/ Time	Operator	Close	
051022000145	02:51	COMM	2		1901 SAN PABLO AV *IFO 04X CO PCW						Active	OPC21

Date	Time	Operator
05/10/22	02:51	Incident Initiated By: OF/C21
05/10/22	02:51	
05/10/22	02:51	
05/10/22	02:51	ATTN UNITS A 245A2 OCCURRED 22OCT05 AT 0130HRS,
05/10/22	02:51	Original Location : IFO
05/10/22	02:53	SUSP MB 209, 5'10 185, DK COMPLX, SHOULDER LENGTH DREADLOCKS, ALL BLK
05/10/22	02:53	CLOTHING, ARMED W/BLK 9MM SEMI-AUTO, FLED W/B 19TH ST ON FOOT, 4A03/8431P
05/10/22	02:53	Incident Associated to: LOP051022000096 01
05/10/22	02:53	Incident Associated to: LOP051022000079 01
05/10/22	02:53	Incident Associated to: LOP051022000060 01
05/10/22	02:53	Incident Associated to: LOP051022000139 01

--- Vehicle / Subject Information ---

05-66051

OAKLAND PD

PAGE: 000001

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

Requested By: C73

## 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	Date/ Time	Operator
051022000177	03:52	COMM	2		3448 PAXTON AV		1L14			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] 210CT05 @ 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 COMPLX

C73

05/10/22 03:53 WEARING A GRY JKT, WHI TSHRT, BLU JEANS...DRIVES A VOLV 4D M&amp;R,

C73

05/10/22 03:53 BUT UNK IF SUSP LFT IN THE VEH...8585P

C73

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

07

C73

05/10/22 03:53 Incident Associated to: LOP0510220000038

07

C73

--- Vehicle / Subject Information ---

OCT 22 2005  
G73

OAKLAND POLICE DEPARTMENT  
455 - 7<sup>th</sup> STREET  
OAKLAND, CA 94607-3985

Assign To:

AST

RD #

05-066065

## 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

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

Section/Subsection

Code

Pertains To:

ASSAULT W/ DEADLY WEAPON

245(a)(2) PC.

V: 1

Location (Address/Block No./Intersection)

☐ OHA ☐ ABC

INFO. 1901 SAN PABLO AVE.

## LOSS

☒ None

(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

Occurred

Date

Time

Day

VANDALISM

On or From

2207 05

0130

SAT

To

Reported

2207 05

0150

SAT

## SOLVABILITY FACTORS (Check All That Apply)

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

- ☐ NAMED SUSPECT  
☐ IDENTIFIABLE SUSPECT  
☐ R/O REQUESTS INVESTIGATION

☐ 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

- ☐ Stolen  
☐ Fingerprinted

- ☐ Towed  
☐ Hold (Unit)

Tow No.

- ☐ 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

## Total Number of

Vict. Wit. Susp. Arr.

☐ Phone ReportPhotos Taken  
☒ Yes  
☐ NoEvidence Collected  
☐ Yes  
☒ NoTech:  
On Scene ☐ Yes ☒ No  
Tag Left ☒ Yes ☐ No

Recovered Value

Loss Value

Page 1  
of 5

Reported By

Serial No.

Watch

Area

Supervisor

Serial No.

Reviewer

Serial No.

M. TRENKAMP 8463P

3

1

SGT. K. THOMAS 869P

SGT. K. THOMAS 869P

# OPD POLICE REPORT

## SUSPECT REPORT

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

RD #

05-066065

CRIME <i>245 (a)(2) PC</i>	INCIDENT NO. <i>96</i>	V1 <i>[REDACTED]</i>
-------------------------------	---------------------------	-------------------------

<b>SUSPECT</b>		Number <i>1</i>	LAST, First, Mid.			RELATIONSHIP TO VICTIM <i>NONE</i>		INCUSTODY THIS OFFENSE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
SEX <i>M</i>	RACE <i>B</i>	D.O.B.	AGE <i>20</i>	HEIGHT <i>5'10"</i>	WEIGHT <i>185</i>	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 ☐ YES ☐ NO REFUSED ☐ YES ☐ NO STATEMENT ☐ YES ☐ NO

☐ PROBATION COUNTY \_\_\_\_\_ Officer \_\_\_\_\_

☐ PAROLE AGENT \_\_\_\_\_ ☐ PAL

BY: (OFFICER/DATE/TIME): \_\_\_\_\_

DESCRIPTION PROVIDE BY *(V-1)* CLOTHING, SCARS, MARKS, TATOOS, WORDS USED  
*BLACK CLOTHING, SWEATSHIRT [69 AVE VILLAGE] "CLAMMING"*

<b>HAIR LENGTH</b> <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	<b>HAIR STYLE</b> <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	<b>FACIAL HAIR</b> <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	<b>COMPLEXION</b> <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	<b>APPEARANCE</b> <input type="checkbox"/> CASUAL <input type="checkbox"/> WELL GROOMED <input type="checkbox"/> UNKEMPT <input checked="" type="checkbox"/> RIGHT HANDED <input type="checkbox"/> LEFT HANDED <input type="checkbox"/> BIRTHMARK <input type="checkbox"/> MOLE	<b>SPEECH</b> <input checked="" type="checkbox"/> LOW PITCH <input type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> SIUTTER <input type="checkbox"/> ACCENT <input type="checkbox"/> OTHER	<b>DEMEANOR</b> <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 checked="" type="checkbox"/> VIOLENT
---	--	--	---	--	--	---

**OTHER DISTINCTIVE FEATURES** ☐ BODY ODOR TYPE \_\_\_\_\_ ☐ GOLD TOOTH ☐ MISSING TEETH ☐ LARGE EYES ☐ SILVER TOOTH ☐ GLASSES ☐ MISSING LIMBS

**WEAPON USED** ☐ REVOLVER *AK BCK.* ☒ SEMI-AUTO PISTOL ☐ SHOTGUN ☐ RIFLE  
CAL. *9mm* BARREL \_\_\_\_\_ ☐ SAWED OFF ☐ NICKEL ☐ BLUE  
☐ BLUDGEON / CLUB ☐ HANDS / FEET ☐ ROCK / BRICK ☐ CUT / STAB ☐ VEHICLE

<b>SUSPECT</b>		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	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 ☐ 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

<b>HAIR LENGTH</b> <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	<b>HAIR STYLE</b> <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	<b>FACIAL HAIR</b> <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	<b>COMPLEXION</b> <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	<b>APPEARANCE</b> <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	<b>SPEECH</b> <input type="checkbox"/> LOW PITCH <input type="checkbox"/> HIGH PITCH <input type="checkbox"/> SLURRED <input type="checkbox"/> SIUTTER <input type="checkbox"/> ACCENT <input type="checkbox"/> OTHER	<b>DEMEANOR</b> <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 ☐ BLUE  
☐ BLUDGEON / CLUB ☐ HANDS / FEET ☐ ROCK / BRICK ☐ CUT / STAB ☐ VEHICLE

<b>SUSPECT VEHICLE</b>		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 <i>chk. -</i>				ADDRESS			CITY <input type="checkbox"/> OAKLAND ZIP PHONE		
LIC./STATE/OR PLATE COLORS <i>chk. -</i>		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	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 <i>M. TRENKAMP</i>	SERIAL # <i>8463P</i>	WATCH <i>3</i>	DISTRICT <i>2</i>	SUPERVISOR <i>56T. K. THOMAS</i>	SERIAL # <i>8069P</i>	PAGE <i>2</i> OF <i>5</i>
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# ADDITIONAL INFORMATION REPORT

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

RD #

05-066065

CRIME 245 (a)(2) PC	[ ] SUPPLEMENTAL	INCIDENT # 96	V1	VICTIM LAST, First, Mid [REDACTED]
SUSPECT LAST, First, Mid.	INCIDENT LOCATION 1901 SAN PABLO AVE	DATE OF THIS REPORT 22OCT05	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 22OCT.05, OFF. D. CHIMPY 8431P AND I WERE WORKING AS A TWO OFFICER UNIT (4A03) ASSIGNED TO THE AREA OF 1700 SAN PABLO AVE. AT APPROX. 0150 HRS. WE RESPONDED TO A.C.H. HIGHLAND TO INVESTIGATE THE REPORT OF A 245 PC. SHOOTING VICTIM.

UPON ARRIVAL, WE MADE CONTACT WITH AN APPARENT GUNSHOT VICTIM IN ROOM NO. 14 IN THE EMERGENCY. THE GUNSHOT VICTIM STATED THAT HIS NAME WAS [REDACTED] AND CURRENTLY LIVES IN HAYWARD. [REDACTED] WAS VERY UNCOOPERATIVE WITH PROVIDING ANY INFORMATION REGARDING THE SHOOTING INCIDENT.

OFF. D. KENNITT 8425P WAS ON SCENE AND ASSISTED WITH OBTAINING A TAPED STATEMENT OF HARRIS. HARRIS TOLD OFF. KENNITT THAT HE WAS IFO. 1901 SAN PABLO AVE, (MARKET) AT APPROX. 0130 HRS. WITH NO FRIENDS OR ASSOCIATES IN HIS PRESENCE. [REDACTED] STATED THAT ALL OF THE SUDDEN, HE HEARD A SINGLE GUNSHOT AND HE RAN. [REDACTED] THEN DISCOVERED THAT HE WAS SHOT. [REDACTED] PROVIDED NO SUSPECT DESCRIPTIONS OR INFORMATION TO OFF. KENNITT.

BASED ON THE LIMITED INFORMATION PROVIDED BY [REDACTED], OFF. CHIMPY AND I ATTEMPTED TO CONDUCT A CANNVAS OF THE HOSPITAL EMERGENCY WAITING AREA. WE WERE UNSUCCESSFUL WITH MAKING CONTACT WITH ANY OF [REDACTED] ASSOCIATES. BELIEVING THAT [REDACTED] WAS WITHHOLDING INFORMATION, WE TOLD [REDACTED] THAT WE SPOKE WITH HIS FRIENDS AND THEY "APPARENTLY" PROVIDED US WITH INFORMATION ABOUT THE SHOOTING. AFTER MINUTES OF TALKING WITH [REDACTED] [REDACTED] PROVIDED LIMITED INFORMATION ABOUT THE SHOOTING, BUT [REDACTED] WAS CONSISTANTLY AGAINST PROVIDING A STATEMENT OR SIGNING ANY DOCUMENTATION.

REPORTED BY M. TRENKAMP	SERIAL # 8403P	WATCH 3	DISTRICT 2	SUPERVISOR SGT. K. THOMAS	SERIAL # 80697	PAGE 3 OF 5
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# ADDITIONAL INFORMATION REPORT

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

RD #

05-066065

CRIME 245 (A)(2) PC.	[ ] SUPPLEMENTAL	INCIDENT # 96	V1	VICTIM LAST, First, Mid. [REDACTED]
SUSPECT LAST, First, Mid.	INCIDENT LOCATION 1901 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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SUMMARY CONT:

[REDACTED] TOLD OFF. CHIMPITY AND I THAT ON 22 OCT. 05 AT APPROX. 0130 HRS. HE HAD LEFT CLUB JIMMIES, AT 1733 SAN PABLO AVE. AND WAS WALKING TO THE CORNER OF 19<sup>TH</sup> ST. AND SAN PABLO AVE, CORNER MARKET. [REDACTED] STATED THAT HE WAS WAITING DIRECTLY IN FRONT OF THE MARKET, WHEN HE HAD A CONFRONTATION WITH A WHITE BLACK, "YOUNGBSTER". [REDACTED] SAID THAT HE WAS ALONE, WHEN THIS "YOUNGBSTER" APPROACHED HIM. [REDACTED] DESCRIBED THE SUBJECT, AS A WHITE BLACK IN HIS 20's, APPROX. 5'-10" - 185 LBS WITH SHOULDER LENGTH DREADS AND HAD A DARK COMPLEXION. [REDACTED] ADVISED THAT HE WAS WEARING A BLACK COLORED SWEATSHIRT AND DARK PANTS. HARRIS TOLD ME THAT THIS SUBJECT, IDENTIFIED AS (S-1), WAS CLAIMING "EAST OAKLAND", "OG-VILL" - OR KNOWN AS (OG<sup>TH</sup> AVE. IMAGE APARTMENTS). [REDACTED] SAID THAT THE TWO OF THEM HAD A BRIEF FIGHT, WHEN (S-1) SUDDENLY PULLED A BLACK SEMI-AUTO PISTOL FROM HIS FRONT - PANTS WAISTBAND AREA. [REDACTED] STATED THAT (S-1) HAD POSSIBLY USED HIS RIGHT HAND TO RETRIEVE THE FIREARM, WHEN (S-1) FIRED ONE (1) GUNSHOT FROM APPROX. TWO - THREE FEET AWAY, STRIKING [REDACTED] IN THE STOMACH. [REDACTED] SAID THAT (S-1) THEN POSSIBLY RAN W/B 19<sup>TH</sup> ST. AND HE RAN TOWARDS THE DIRECTION OF CLUB JIMMIES. [REDACTED] THEN SAID THAT TWO UNKNOWN FEMALE BLACK SUBJECT, PICKED HIM UP IN AN UNKNOWN TYPE OR COLORED VEHICLE AND DROPPED HIM OFF AT HIGHLAND HOSPITAL.

[REDACTED] REFUSED TO PROVIDE ANY NAMES OF THE SUBJECTS THAT WERE WITH HIM AT THE TIME OF THE SHOOTING. [REDACTED] ALSO REFUSED TO PROVIDE THE NAMES OF THE TWO UNKNOWN FEMALE BLACK SUBJECTS WHO DROVE HIM TO A.C.H.

WHILE AT A.C.H., I SPOKE WITH HOSPITAL STAFF WHO ADVISED THAT [REDACTED] HAD SUFFERED A SINGLE GUNSHOT WOUND TO HIS LEFT ABDOMINAL AREA,

REPORTED BY H. TRENKAMP	SERIAL # 8463P	WATCH 3	DISTRICT 2	SUPERVISOR SGT. K. THOMAS	SERIAL # 8064P	PAGE 4 OF 5
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# OPD ADDITIONAL INFORMATION REPORT

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

RD #

05-066065

CRIME 245 (a)(2) PC.	[ ] SUPPLEMENTAL	INCIDENT # 96	V1	VICTIM LAST, First Mid [REDACTED]
SUSPECT LAST, First Mid. [REDACTED]	INCIDENT LOCATION 1901 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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SUMMARY CONT:

WHICH APPEARED TO BE NOT LIFE THREATENING. [REDACTED] ADVISED THAT THIS WAS HIS THIRD TIME BEING SHOT.

OFF. CHIMPITY AND I THEN CANVASSED THE NORTH-WEST CORNER OF 19TH ST. AND SAN PABLO AVE. FOR EVIDENCE WITH NEGATIVE RESULTS. WE DID NOT LOCATE ANY EXTERIOR SURVEILLANCE CAMERAS IN THE IMMEDIATE AREA. WE ATTEMPTED TO MAKE CONTACT WITH THE BUSINESS OWNER AT 1901 SAN PABLO AVE, WITH NEGATIVE RESULTS.

OFF. CHIMPITY REQUESTED A EVIDENCE TECHNICIAN FOR PHOTOGRAPHS OF (V-1) [REDACTED] AND A COMMUNICATIONS BROADCAST OF THE INCIDENT. I NOTIFIED SGT. K. THOMAS AND COMPLETED A LOG ENTRY.

AT APPROX. 0130 HRS, WHILE CONDUCTING A PROTECTIVE SWEEP OF CLUB TIMMIES, REGARDING A REPORTED ASSAULT W/ DEADLY WEAPON INSIDE OF THE CLUB, SGT. K. COLEMAN AND I MAINTAINED EXTERIOR SECURITY DIRECTLY IFO. CLUB TIMMIES. AT THIS TIME, WE HEARD A SINGLE GUNSHOT APPROX. 30'-40' FT NORTH OF OUR LOCATION, ON THE WEST SIDEWALK. SUDDENLY HUNDREDS OF CLUB PATRONS BEGAN SCREAMING AND RUNNING S/B SAN PABLO AVE, SHOUTING "THEY SHOOTING." LARGE GROUPS OF PATRONS THEN ATTEMPTED TO REGAIN ENTRY INTO THE CLUB FLEEING FROM THE UNKNOWN GUNMAN.

SEVERAL OPD PERSONNEL THEN CANVASSED THE AREA FOR POSSIBLE VICTIMS AND SUSPECTS WITH NEGATIVE RESULTS. BASED ON [REDACTED] STATEMENTS, AND HIS SHOOTING, WHICH OCCURRED AT THE APPROX. SAME TIME AS STATED BY [REDACTED] THIS SHOOTING WAS POSSIBLY RELATED TO [REDACTED] SHOOTING AND NOT AT 1901 SAN PABLO AVE.

REPORTED BY M. TRENKAMP	SERIAL # 8463P	WATCH 3	DISTRICT 2	SUPERVISOR SGT. K. THOMAS	SERIAL # 806AP	PAGE 5 OF 5
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## STATEMENT

Oakland Police Department

536-200-1 (6/93)

Page 1 of 1

2. Report No.

1. Complainant

Offense/Crime

05-066065

245(a)(2)PC

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

OFC D. KENNITT

8425P

2201.05

0220-0230

7. Location Where Statement Taken

Names, Addresses of Persons Present During Statement

A.C.H. Rd. 14

## 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:

(\*REFUSED TO SIGN\*)

TAPED

Signature of Person Giving Statement

Date

(\*REFUSED TO SIGN\*)

OAKLAND POLICE DEPARTMENT

OAKLAND POLICE DEPARTMENT  
455 - 7<sup>th</sup> STREET  
OAKLAND, CA 94607-3985

Assign To:

AST

ID #

05-0660001

<input type="checkbox"/> JTJNG		Outside Reporting Agency		Case No.		Police Beat 4		CP Beat X		Incident No. 79			
<input type="checkbox"/> CID		Last, First, Mid		<input type="checkbox"/> Business Name		<input type="checkbox"/> Local / State / Federal		Sex		Race			
<input type="checkbox"/> YSS		VICTIM 1		[REDACTED]		[REDACTED]		D.O.B.		Age 25			
<input type="checkbox"/> VICE		Home Address		City		State / Zip		Home/Msg. Phone		[REDACTED]			
<input type="checkbox"/> CSD		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]			
<input type="checkbox"/> TRAFFIC		Business Address / School		City		State / Zip		Work Phone		[REDACTED]			
<input type="checkbox"/> D.A. VIC/WIT		Occupation		D.L. No.		State		<input type="checkbox"/> Domestic Violence		<input type="checkbox"/> Victim Injured			
<input type="checkbox"/> [REDACTED]		Working Hours		[REDACTED]		[REDACTED]		<input type="checkbox"/> Victim's Support		<input type="checkbox"/> Sex Assault Victim Request Conference			
<input type="checkbox"/> [REDACTED]		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		City		State / Zip		Home/Msg. Phone		[REDACTED]			
Home Address		[REDACTED]		City		State / Zip		Work Phone		[REDACTED]			
Business Address / School		[REDACTED]		City		State / Zip		Work Phone		[REDACTED]			
LOCATION		POINT OF ENTRY		LOCATION P.O.E.		METHOD OF ENTRY		BURGLARY		WEAPON USED			
<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.		<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"/> 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 checked="" type="checkbox"/> OTHER 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		CRIME		Common Name		Section/Subsection			
AD W (UNK. OBJECT)		245 (M) (1) P.C.		Code		Pertains To:		V: 1		[REDACTED]			
Location (Address/Block No./Intersection)		<input type="checkbox"/> CHA <input type="checkbox"/> ABC		Occurred		Date		Time		Day			
1901 SAN PABLO		[REDACTED]		On or From		22 OCT 05		0105		SAT			
LOSS		<input checked="" type="checkbox"/> None		TYPE OF THEFT		To		[REDACTED]		[REDACTED]			
(CHECK ALL THAT APPLY)		7 <input type="checkbox"/> HOUSEHOLD GOODS		<input type="checkbox"/> PICKPOCKET		Reported		22 OCT 05		0210 SAT			
1 <input type="checkbox"/> CURRENCY / NOTES		8 <input type="checkbox"/> CONSUMABLE GOODS		<input type="checkbox"/> PURSE/NATCH		[REDACTED]		[REDACTED]		[REDACTED]			
2 <input type="checkbox"/> CLOTHING / FURS		9 <input type="checkbox"/> LIVESTOCK		<input type="checkbox"/> AUTO ACCESS		[REDACTED]		[REDACTED]		[REDACTED]			
3 <input type="checkbox"/> JEWELRY / PRECIOUS METAL		10 <input type="checkbox"/> MOTOR VEHICLES		<input type="checkbox"/> AUTO CLOUT		[REDACTED]		[REDACTED]		[REDACTED]			
4 <input type="checkbox"/> FIREARMS		11 <input type="checkbox"/> MISCELLANEOUS		<input type="checkbox"/> SHOPLIFTING		[REDACTED]		[REDACTED]		[REDACTED]			
5 <input type="checkbox"/> OFFICE EQUIPMENT		[REDACTED]		<input type="checkbox"/> BICYCLE		[REDACTED]		[REDACTED]		[REDACTED]			
6 <input type="checkbox"/> TVS, RADIO, STEREO		[REDACTED]		<input type="checkbox"/> COIN OP. DEVICE		[REDACTED]		[REDACTED]		[REDACTED]			
U.C.R. CODE		LIST MOST EXPENSIVE ITEM ABOVE)		<input type="checkbox"/> FROM BUILDING		[REDACTED]		[REDACTED]		[REDACTED]			
<input type="checkbox"/> OTHER		[REDACTED]		<input type="checkbox"/> [REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]			
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.		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]			
VICTIM VEHICLE		License No.		State		<input type="checkbox"/> Secured at the Scene		<input type="checkbox"/> Stolen		<input type="checkbox"/> Towed			
<input type="checkbox"/> Car		Year		Make		Model		Body Type		Color			
<input type="checkbox"/> Truck		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]			
<input type="checkbox"/> Other		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]			
<input type="checkbox"/> Stolen		<input type="checkbox"/> Mens		<input type="checkbox"/> Mtn.		Color		Brand		Model			
<input type="checkbox"/> Bicycle		<input type="checkbox"/> Womens		<input type="checkbox"/> Road		[REDACTED]		[REDACTED]		[REDACTED]			
PROPERTY / NARRATIVE		<input type="checkbox"/> Loss		<input type="checkbox"/> Evidence		<input type="checkbox"/> Safekeeping		<input type="checkbox"/> Recovered		Location When Stolen			
[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		<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		[REDACTED]		[REDACTED]			
Summary:		ON 22 OCT 05 @ APPROX. 0210 HRS I		RESPONDED TO SUMMIT HOSPITAL E/R TO INVESTIGATE		A REPORT OF AN ADW. UPON MY ARRIVAL I		CONTACTED OFF. F. ROMERO (SLSS) WHO ADVISED		[REDACTED]			
Total Number of		<input type="checkbox"/> Photos Taken		<input type="checkbox"/> Evidence Collected		Tech: On Scene		<input type="checkbox"/> Yes <input type="checkbox"/> No		Recovered Value			
Vict. i		0		0		Tag Left		<input type="checkbox"/> Yes <input type="checkbox"/> No		Loss Value			
[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]			
Reported By		Serial No.		Watch		Area		Supervisor		Serial No.			
V. GARCIA 8322P		1		1		SGT. GONZALEZ 7617		[REDACTED]		7617			

# ADDITIONAL INFORMATION REPORT

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

RD #

05066001

CRIME 245(A)(1) P.C.	[ ] SUPPLEMENTAL	INCIDENT # 79	V1	VICTIM LAST, First, Mid. [REDACTED]
SUSPECT LAST, First, Mid.	INCIDENT LOCATION 1901 SAN PABLO	DATE OF THIS REPORT	ORIGINAL DATE REPORTED	

ITEM #	QNTY.	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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THAT V1 HAD WALKED INTO SUMMIT E/R  
SUFFERING FROM 2 LACERATIONS TO HIS FACE  
THE FIRST CUT WAS 2 1/2" & WAS HORIZONTAL  
AT HAIRLINE. THE SECOND CUT WAS 1 1/2"  
AND RAN VERTICALLY ABOVE HIS L EYEBROW.  
V1 STATED THAT IT OCCURRED AT SWEET JIMMIES  
AND HE DID NOT SEE WHO DID IT.  
WOODROW WHO WAS MEDICATED WAS UNABLE  
TO GIVE A STATEMENT.  
SUMMIT STAFF ADVISED HE WOULD BE TRANSFERRED  
TO ACH.  
NO STATEMENT WAS TAKEN. NO SUSPECT INFO  
PENDING FURTHER INVESTIGATION.

REPORTED BY V. GARCIA	SERIAL # 8322P	WATCH 1	DISTRICT 1	SUPERVISOR SGT. GONZALEZ	SERIAL #	PAGE 2 OF 2
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SUNDAY, October 23, 2005

# Nightclub violence causes police to push for citation

■ Rowdy crowd at Oakland's Sweet Jimmie's forces closure of multiple streets, leaves two men hospitalized

By William Brand

STAFF WRITER

OAKLAND — Oakland police have recommended the owner of a downtown nightclub be cited for keeping a disorderly establishment after one man was hospitalized early Saturday with a gunshot wound in the stomach and another taken to the hospital unconscious after a beating.

Both the gunshot victim, 34, of Oakland, who was taken to Highland Hospital, and the man who was beaten in a fight, who was taken to Alta Bates Summit Medical Center, were expected to recover, police said.

Oakland Police Sgt. Kyle Thomas said the combination of an overflow crowd that came to hear rap artist "Keat the Sneak" perform at Sweet Jimmie's, 577 18th St., and sideshow action that began a block away at 19th and San Pablo, forced early closure of the club.

At its peak, the disturbance forced closure

of San Pablo Avenue, and 17th, 18th and Jefferson streets, Thomas said.

At least 25 officers were required to control the situation. "It was gridlock," he said.

As officers moved to control the sideshow activity, police received a call that shots had been fired inside Sweet Jimmie's, and people were fighting and trampling each other in an effort to leave the club.

Officers responded and began clearing the club, when there was a report of a shot fired outside. People began running back inside, Thomas said.

The shooting victim told police he was shot at 19th and San Pablo. The beating to the other man apparently occurred inside the club, Thomas said.

Thomas said he believed Sweet Jimmie's security could not control the crowd.

"This crowd 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 traveling safely on San Pablo Avenue," he said.

**Oakland Police Department**  
455 - 7<sup>th</sup> 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

CP Beat

Incident No.

4

4X

60

**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 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 455 7<sup>th</sup> Street (3<sup>rd</sup> watch, 2B Squad)

750-4561

**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) ☐ OHA  
1733 San Pablo Ave.

☒ 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  
☐ PURSE/NATCH  
☐ AUTO ACCESS  
☐ AUTO CLOUT  
☐ SHOPLIFTING  
☐ BICYCLE  
☐ COIN OP. DEVICE  
☐ FROM BUILDING  
☐ OTHER

On or From

22-Oct-05

15

Sat

To

22-Oct-05

230

Sat

Reported

22 Oct 05

15

Sat

**SOLVABILITY FACTORS (Check All That Apply)**

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

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

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  
☐ 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  
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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<b>SUSPECT</b>		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											
<b>HAIR LENGTH</b> <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		<b>HAIR STYLE</b> <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		<b>FACIAL HAIR</b> <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		<b>COMPLEXION</b> <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		<b>APPEARANCE</b> <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		<b>SPEECH</b> <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		<b>DEMEANOR</b> <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	
<b>OTHER DISTINCTIVE FEATURES</b> <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		<b>WEAPON USED</b> 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				

<b>SUSPECT</b>		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											
<b>HAIR LENGTH</b> <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		<b>HAIR STYLE</b> <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		<b>FACIAL HAIR</b> <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		<b>COMPLEXION</b> <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		<b>APPEARANCE</b> <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		<b>SPEECH</b> <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		<b>DEMEANOR</b> <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	
<b>OTHER DISTINCTIVE FEATURES</b> <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		<b>WEAPON USED</b> 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				

<b>SUSPECT VEHICLE</b>		<b>VEHICLE WAS</b> <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"/>
<b>TIRES</b> <input type="checkbox"/> STOCK <input type="checkbox"/> WIDE <input type="checkbox"/> SMALL	<b>RIMS</b> <input type="checkbox"/> STOCK <input type="checkbox"/> CHROME <input type="checkbox"/> MAGS <input type="checkbox"/> SPOKE	<b>LEVEL</b> <input type="checkbox"/> STOCK <input type="checkbox"/> LOWERED <input type="checkbox"/> RAISED <input type="checkbox"/>		<b>ROOF</b> <input type="checkbox"/> VINYL <input type="checkbox"/> LANDAU <input type="checkbox"/> CONV		<b>WINDOWS</b> <input type="checkbox"/> TINTED <input type="checkbox"/> BROKEN	<b>SEATS</b> <input type="checkbox"/> VINYL <input type="checkbox"/> BENCH <input type="checkbox"/> CLOTH <input type="checkbox"/> BUCKET		<b>TRANSMISSION</b> <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 18<sup>th</sup> St and Jefferson, and from my vantage point could see 18<sup>th</sup> St, San Pablo, and 17<sup>th</sup> 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 17<sup>th</sup> 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 17<sup>th</sup> 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 18<sup>th</sup> St., and San Pablo N/B on the West curb, while I formed a skirmish line and cleared out E/B 18<sup>th</sup> 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 19<sup>th</sup> St. and San Pablo to the liquor store, as well as the Chevron Gas Station at 18<sup>th</sup> 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 18<sup>th</sup> 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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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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**Oakland Police Department**  
455 - 7<sup>th</sup> 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 <b>4</b>	CP Beat <b>4X</b>	Incident No. <b>42</b>				
<b>VICTIM 1</b>	Last, First, Mid <b>State Of California</b>	<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						

<b>ADDITIONAL PERSON</b>	<input checked="" type="checkbox"/> R/P Parent Witness 1	Last, First, Mid <b>Sgt. K. Thomas 8069p</b>	Sex	Race	D.O.B.	Age
Home Address		City <input type="checkbox"/> Oakland		Zip	Home/Msg. Phone	
Business Address / School <b>OPD 455 7<sup>th</sup> St</b>		City <input checked="" type="checkbox"/> Oakland		Zip <b>94607</b>	Work Phone <b>238-3455</b>	

<b>LOCATION</b>	<b>POINT OF ENTRY</b>	<b>LOCATION P.O.E.</b>	<b>METHOD OF ENTRY</b>	<input type="checkbox"/> BREAK GLASS	<b>BURGLARY</b>	<b>WEAPON USED</b>
<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

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

<b>CRIME</b>	Common Name <b>Disorderly House</b>	Section/Subsection <b>25601</b>	Code <b>BP</b>	Pertains To: <b>V: 1</b>
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Location (Address/Block No./Intersection) <input type="checkbox"/> OHA <input checked="" type="checkbox"/> ABC <b>1733 San Pablo Ave.</b>	Occurred	Date	Time	Day	<b>VANDALISM</b>
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<b>LOSS</b>	<input checked="" type="checkbox"/> None	<b>TYPE OF THEFT</b>	On or From	Date	Time	Day	<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) 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	To	Date	Time	Day		
		Reported	Date	Time	Day		

U.C.R. CODE _____ (LIST MOST EXPENSIVE ITEM ABOVE)	<b>SOLVABILITY FACTORS (Check All That Apply)</b> <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.

<b>VICTIM VEHICLE</b>	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 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.
---	--	--	-------	-------	-------	-------	-------------	------------

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

<b>AOD and Juvenile Reporting Code (Refer to AOD Code Card)</b>			
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 4
Vict. 1	Wit. 0	Susp. 0	Arr. 0							

Reported By <b>K. THOMAS</b>	Serial No. <b>8069P</b>	Watch <b>3</b>	Area <b>2B</b>	Supervisor <b>LT. K. MULLNIX</b>	Serial No.	Reviewer	Serial No.
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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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<b>SUSPECT</b>		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											
<b>HAIR LENGTH</b> <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		<b>HAIR STYLE</b> <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		<b>FACIAL HAIR</b> <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		<b>COMPLEXION</b> <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		<b>APPEARANCE</b> <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		<b>SPEECH</b> <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		<b>DEMEANOR</b> <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	
<b>OTHER DISTINCTIVE FEATURES</b> <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		<b>WEAPON USED</b> 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			

<b>SUSPECT</b>		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											
<b>HAIR LENGTH</b> <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		<b>HAIR STYLE</b> <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		<b>FACIAL HAIR</b> <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		<b>COMPLEXION</b> <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		<b>APPEARANCE</b> <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		<b>SPEECH</b> <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		<b>DEMEANOR</b> <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	
<b>OTHER DISTINCTIVE FEATURES</b> <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		<b>WEAPON USED</b> 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			

<b>SUSPECT VEHICLE</b>		<b>VEHICLE WAS</b> <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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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 Jimmmies 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 17<sup>th</sup> 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, License 33NKG635 parked approximately 100 feet IFO my patrol vehicle which was in the intersection of 17<sup>th</sup> 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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# O P D

ADDITIONAL INFORMATION REPORT

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

RD #  
05-027086

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.

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

**Oakland Police Department**  
455 - 7<sup>th</sup> Street  
Oakland, CA 94607-3985

ASSIGN TO:

RD #

## ROUTING

☒ CID

Outside Reporting Agency

Case No.

Police Beat

4

CP Beat

4X

Incident No.

☐ YSD

☐ VICE

☐ CSD

☐ TRAFFIC

☐ D.A.

☐ VIC/WIT

☒ ABAT

**ADDITIONAL PERSON**

☒ R/P

☐ Parent

☐ Witness 1

Last, First, Mid  
**Officer M. Trenkamp 8463p**

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)  
**1733 San Pablo Ave.**

☐ OHA

☒ ABC

## 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

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.



# 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
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<b>SUSPECT</b>		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											
<b>HAIR LENGTH</b> <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		<b>HAIR STYLE</b> <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		<b>FACIAL HAIR</b> <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		<b>COMPLEXION</b> <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		<b>APPEARANCE</b> <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		<b>SPEECH</b> <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		<b>DEMEANOR</b> <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	
<b>OTHER DISTINCTIVE FEATURES</b> <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		<b>WEAPON USED</b> 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			

<b>SUSPECT</b>		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											
<b>HAIR LENGTH</b> <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		<b>HAIR STYLE</b> <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		<b>FACIAL HAIR</b> <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		<b>COMPLEXION</b> <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		<b>APPEARANCE</b> <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		<b>SPEECH</b> <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		<b>DEMEANOR</b> <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	
<b>OTHER DISTINCTIVE FEATURES</b> <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		<b>WEAPON USED</b> 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			

<b>SUSPECT VEHICLE</b>		<b>VEHICLE WAS</b> <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 M. TRENKAMP	SERIAL # 8463P	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 #

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 17<sup>th</sup> 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 17<sup>th</sup> 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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# OPD

## ADDITIONAL INFORMATION REPORT

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

RD #

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

ITEM	QNTY	PROPERTY (and/or 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 <b>M. TRENKAMP</b>	Serial No. <b>8463P</b>	Watch <b>3</b>	Area <b>2B</b>	Supervisor	Serial No.	<b>Page 4 of 4</b>
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# CRIME REPORT

**Oakland Police Department**  
455 - 7<sup>th</sup> Street  
Oakland, CA 94607-3985

ASSIGN TO:

RD #

05-020260

## ROUTING

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

Outside Reporting Agency	Case No.	Police Beat <b>4</b>	CP Beat <b>4X</b>	Incident No. <b>165</b>
<b>VICTIM 1</b>		Last, First, Mid <input type="checkbox"/> Business Name <input checked="" type="checkbox"/> Local / State / Federal		
State Of California		Sex	Race	D.O.B.
Home Address		City	<input type="checkbox"/> Oakland	Zip
Business Address / School		City	<input type="checkbox"/> Oakland	Zip
Occupation		D.L. Number	State	
Working Hours		<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		

## ADDITIONAL PERSON

- ☒ R/P  
☐ Parent  
☐ Witness 1

Last, First, Mid <b>Sgt. K. Thomas 8069p</b>		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	POINT OF ENTRY	LOCATION P.O.E.	METHOD OF ENTRY	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	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
1733 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
<b>LOSS</b> <input checked="" type="checkbox"/> None (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	10-Apr-05	300	Sun	
U.C.R. CODE _____ (LIST MOST EXPENSIVE ITEM ABOVE) 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	10 Apr 05	1	Sun	
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	Secured At The Scene	Towed	Tow Number
				<input type="checkbox"/> Released To The Owner	<input type="checkbox"/> Fingerprinted	
				<input type="checkbox"/> Hold (Unit)	<input type="checkbox"/> Stolen	
<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	Mens	Mtn.	Color	Brand	Model	Speed
	Womens	Road				

PROPERTY / NARRATIVE	Loss	Evidence	Safekeeping	Recovered	Location When Stolen
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<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)			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: On Scene	Rec. Value	Loss Value	Page 1 of 4
Vict. 1	Wit. 0	Susp. 0	Arr. 0		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Reported By <b>K. THOMAS</b>		Serial No. <b>8069P</b>	Watch <b>3</b>	Area <b>2B</b>	Supervisor <b>LT. K. MULLNIX</b>	Serial No.	Reviewer	Serial No.		

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

RD #

05-020260

CRIME  
Disorderly House 25601 BPINCIDENT #  
165

V1

VICTIM LAST, First, Mid.  
State Of California

<b>SUSPECT</b>		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											
<b>HAIR LENGTH</b> <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		<b>HAIR STYLE</b> <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		<b>FACIAL HAIR</b> <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		<b>COMPLEXION</b> <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		<b>APPEARANCE</b> <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		<b>SPEECH</b> <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		<b>DEMEANOR</b> <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	
<b>OTHER DISTINCTIVE FEATURES</b> <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		<b>WEAPON USED</b> 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			

<b>SUSPECT</b>		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											
<b>HAIR LENGTH</b> <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		<b>HAIR STYLE</b> <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		<b>FACIAL HAIR</b> <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		<b>COMPLEXION</b> <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		<b>APPEARANCE</b> <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		<b>SPEECH</b> <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		<b>DEMEANOR</b> <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	
<b>OTHER DISTINCTIVE FEATURES</b> <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		<b>WEAPON USED</b> 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			

<b>SUSPECT VEHICLE</b>		<b>VEHICLE WAS</b> <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"/> 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. THOMASSERIAL #  
8069PWATCH  
3DISTRICT  
2B

SUPERVISOR

SERIAL #

PAGE 2 OF 4

ORI 00109

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 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 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 17<sup>th</sup> 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 16<sup>th</sup> St and Jefferson, as well as the Chevron Gas Station at 18<sup>th</sup> St and Castro St., 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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# OPD

ADDITIONAL INFORMATION REPORT

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

RD #  
05-020260

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 22 Oct 05	ORIGINAL DATE REPORTED

ITEM	QNTY	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
<p>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.</p> <p>See numerous supplementals for additional details.</p> <p>The following officers were used for the following times;</p> <p>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)</p> <p>Sweet Jimmies directly required and used a total of 23.5 officer hours and 3 Sgt. hrs. for myself.</p>				

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

Oakland Police Department  
455 - 7<sup>th</sup> Street  
Oakland, CA 94607-3985

ASSIGN TO:

RD #

05-020260

## ROUTING

- ☒ CID  
  
☐ YSD  
☐ VICE  
☐ CSD  
☐ TRAFFIC  
☐ D.A.  
VIC/WIT  
☒ ABAT  
  
☐ \_\_\_\_\_

Outside Reporting Agency	Case No.	Police Beat <b>4</b>	CP Beat <b>4X</b>	Incident No. <b>165</b>					
<b>VICTIM 1</b>		Last, First, Mid <b>State Of California</b>		<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					

<b>ADDITIONAL PERSON</b>	<input checked="" type="checkbox"/> R/P <input type="checkbox"/> Parent <input type="checkbox"/> Witness 1	Last, First, Mid <b>Sgt. K. Thomas 8069p</b>	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

<b>LOCATION</b>	<b>POINT OF ENTRY</b>	<b>LOCATION P.O.E.</b>	<b>METHOD OF ENTRY</b>	<input type="checkbox"/> BREAK GLASS	<b>BURGLARY</b>	<b>WEAPON USED</b>
<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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<b>CRIME</b>	Common Name <b>Disorderly House</b>	Section/Subsection <b>25601</b>	Code <b>BP</b>	Pertains To: <b>V: 1</b>
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Location (Address/Block No./Intersection) <input type="checkbox"/> OHA <input checked="" type="checkbox"/> ABC <b>1733 San Pablo Ave.</b>		<b>Occurred</b>	<b>Date</b>	<b>Time</b>	<b>Day</b>	<b>VANDALISM</b>
		<b>On or From</b>	<b>10-Apr-05</b>	<b>1</b>	<b>Sun</b>	<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
		<b>To</b>	<b>10-Apr-05</b>	<b>300</b>	<b>Sun</b>	
		<b>Reported</b>	<b>10 Apr 05</b>	<b>1</b>	<b>Sun</b>	
<b>LOSS</b> (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 U.C.R. CODE _____ (LIST MOST EXPENSIVE ITEM ABOVE)		<b>TYPE OF THEFT</b> <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		<b>SOLVABILITY FACTORS (Check All That Apply)</b> <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.

<b>VICTIM VEHICLE</b>		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 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.			

<b>PROPERTY / NARRATIVE</b>	<input type="checkbox"/> Loss <input checked="" type="checkbox"/> Evidence <input type="checkbox"/> Safekeeping <input type="checkbox"/> Recovered	<b>Location When Stolen</b>
	<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)			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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Evidence Collected <input checked="" type="checkbox"/> Yes <input 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	Loss Value	Page <b>1</b> of <b>4</b>
Vict. 1	Wit. 0	Susp. 0	Arr. 0							
Reported By <b>K. THOMAS</b>		Serial No. <b>8069P</b>	Watch <b>3</b>	Area <b>2B</b>	Supervisor <b>LT. K. MULLNIX</b>		Serial No.	Reviewer	Serial No.	

**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
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<b>SUSPECT</b>		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											
<b>HAIR LENGTH</b> <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		<b>HAIR STYLE</b> <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		<b>FACIAL HAIR</b> <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		<b>COMPLEXION</b> <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		<b>APPEARANCE</b> <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		<b>SPEECH</b> <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		<b>DEMEANOR</b> <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	
<b>OTHER DISTINCTIVE FEATURES</b> <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			<b>WEAPON USED</b> 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"/> BLUED <input type="checkbox"/> ROCK/BRICK <input type="checkbox"/> CUT/STAB <input type="checkbox"/> VEHICLE					

<b>SUSPECT</b>		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											
<b>HAIR LENGTH</b> <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		<b>HAIR STYLE</b> <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		<b>FACIAL HAIR</b> <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		<b>COMPLEXION</b> <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		<b>APPEARANCE</b> <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		<b>SPEECH</b> <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		<b>DEMEANOR</b> <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	
<b>OTHER DISTINCTIVE FEATURES</b> <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			<b>WEAPON USED</b> 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"/> BLUED <input type="checkbox"/> ROCK/BRICK <input type="checkbox"/> CUT/STAB <input type="checkbox"/> VEHICLE					

<b>SUSPECT VEHICLE</b>		<b>VEHICLE WAS</b> <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 #  
05-020260

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 17<sup>th</sup> 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 16<sup>th</sup> St and Jefferson, as well as the Chevron Gas Station at 18<sup>th</sup> St and Castro St., 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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# OPD

## ADDITIONAL INFORMATION REPORT

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

RD #  
05-020260

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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**3<sup>rd</sup> Watch Extension of Shift**  
**JLS Sideshow Detail**  
**9 Apr 05**

JLS / Eastmont  
 Contact 3L72 Sgt. K. Thomas 750-4561

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

# **O P D** **ADDITIONAL INFORMATION REPORT**

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

RD #

05-020260

CRIME 25601	(*) SUPPLEMENTAL BP	INCIDENT # 185	V1	VICTIM LAST, First, Mid. S.C.
SUSPECT LAST, First, Mid. Sweet	INCIDENT LOCATION 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
Supplemental Summary:				
<p>On 10APR05, at about 0001 hrs, I was working as JCS Sideshow Unit 461, I was driving fully marked patrol car 1228 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.</p> <p>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 a vehicle at 16TH St and Jefferson St. 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 17TH St and Jefferson St from 0030 to 0300 hrs.</p>				

REPORTED BY R.M. Weedy	SERIAL # 8568P	WATCH 3	DISTRICT 5	SUPERVISOR Sgt. Guttorson	SERIAL #	PAGE ____ OF ____
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# OPD ADDITIONAL INFORMATION REPORT

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

RD #

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 18 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 WEDNESDAY, AT ABOUT ABOUT 0030, I WAS WORKING AS OPD SIDESHOWN UNIT  
W/ OFC S. SEDER 8532P. I WAS DIRECTED BY SGT K. THOMAS TO TAKE  
UP A TRAFFIC CONTROL POST AT 16TH AND SAN PABLO. AS I WAS AT  
16TH AND S.P. I NOTICED (50-70) 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 581 18TH 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.

AFTER TOWING THE BLK VEHICLE I HAD TO HELP OTHER UNITS  
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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OS-020620

05-020620

REPORTED BY E. BARANGAN	SERIAL # 8544P	WATCH 3	DISTRICT 5	SUPERVISOR SGT M. GUITERSON	SERIAL #	PAGE 1 OF 1
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# **ADDITIONAL INFORMATION REPORT**

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

RD #

05-020620

CRIME <b>25601</b>	<input checked="" type="checkbox"/> SUPPLEMENTAL <b>BP</b>	INCIDENT # <b>165</b>	V1 <b>VI</b>	VICTIM LAST, First, Mid. <b>SJC</b>
SUSPECT LAST, First, Mid. <b>Sinclair Simmons</b>	INCIDENT LOCATION <b>19TH ST. &amp; JEFFERSON</b>		DATE OF THIS REPORT <b>11 APR 05</b>	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 10 APR 05, AT ABOUT 0100, I WAS ASSIGNED TO THE SIDESHOW DETAIL, AND WAS ASSIGNED TO A TCP AT 19TH ST. & JEFFERSON. 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 MUSIC FOR SEVERAL MINUTES, CAUSING TRAFFIC TO COME TO A DEAD STOP BETWEEN MLK WAY & SAN PABLO ON 19TH ST. I ALSO OBSERVED SEVERAL PEDESTRIANS JAY WALKING, CARRYING OPEN CONTAINERS OF ALCOHOLIC BEVERAGES, AND CAUSING A DISTURBANCE IEO THE LIQUOR STORE AT 19TH ST. & SAN PABLO. 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 <b>S. BOWLING</b>	SERIAL # <b>8411P</b>	WATCH <b>3</b>	DISTRICT <b>1</b>	SUPERVISOR <b>SGT. BRANDWOOD</b>	SERIAL #	PAGE <b>1</b> OF <b>1</b>
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# **ADDITIONAL INFORMATION REPORT**

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

RD #

05-020620

CRIME <b>DISORDERLY HOUSE 25601 BEP</b>	<input checked="" type="checkbox"/> SUPPLEMENTAL	INCIDENT # <b>165</b>	V1	VICTIM LAST, First, Mid. <b>STATE OF CALIFORNIA</b>
SUSPECT LAST, First, Mid. <b>CLUB JIMMIES</b>	INCIDENT LOCATION <b>1731 SAN PABLO AVE.</b>		DATE OF THIS REPORT <b>10 APR. 05</b>	ORIGINAL DATE REPORTED

ITEM #	QNTY.	PROPERTY (and/or NARRATIVE) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
<b>SUMMARY:</b>				
ON 10 APR. 05, OFC. D. KENNITT 84257 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 PROHIBITED THE ACCESS OF EMERGENCY VEHICLES AND INVOLVED PASSIBLE CITIZENS.				
AT APPROX. 0130 HRS. I TOWED A BLOCKING VEHICLE, IN THE 500 BLOCK - 18 <sup>TH</sup> ST, (TOW NO. J-2) FOR BLOCKING THE ENTIRE ROADWAY, TOW AUTHORITY 22651 (13) NC.				
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 18 <sup>TH</sup> ST AND CASTRO ST. 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 1901 SAN PABLO AVE.				

REPORTED BY <b>M. TRENKAMP</b>	SERIAL # <b>8463p</b>	WATCH <b>3</b>	DISTRICT <b>2</b>	SUPERVISOR <b>Sgt. K. THOMAS</b>	SERIAL # <b>8064p</b>	PAGE <b>1</b> OF <b>1</b>
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# CRIME REPORT

**Oakland Police Department**  
455 - 7<sup>th</sup> Street  
Oakland, CA 94607-3985

ASSIGN TO:

RD #

VIDEO

**ROUTING**

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

Outside Reporting Agency	Case No.	Police Beat <b>4</b>	CP Beat <b>4X</b>	Incident No. <b>94</b>	<b>05-013166</b>				
<b>VICTIM 1</b>		Last, First, Mid <b>State Of California</b>		<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. <input type="checkbox"/> Victim's Support <input type="checkbox"/> Resource Info Provided			
Working Hours									

<b>ADDITIONAL PERSON</b>	<input checked="" type="checkbox"/> R/P <input type="checkbox"/> Parent <input type="checkbox"/> Witness 1	Last, First, Mid <b>Sgt. K. Thomas 8069p</b>	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	

<b>LOCATION</b>	<b>POINT OF ENTRY</b>	<b>LOCATION P.O.E.</b>	<b>METHOD OF ENTRY</b>	<input type="checkbox"/> BREAK GLASS	<b>BURGLARY</b>	<b>WEAPON USED</b>
<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		

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

<b>CRIME</b>	Common Name <b>Disorderly House</b>	Section/Subsection <b>25601</b>	Code <b>BP</b>	Pertains To: <b>V: 1</b>
Location (Address/Block No./Intersection) <input type="checkbox"/> OHA <input checked="" type="checkbox"/> ABC <b>1733 San Pablo Ave.</b>		Occurred	Date	Time
		On or From	<b>5-Mar-05</b>	<b>130</b>
		To	<b>5-Mar-05</b>	<b>230</b>
		Reported	<b>5 Mar 05</b>	<b>0130</b>
<b>LOSS</b> <input checked="" type="checkbox"/> None (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 U.C.R. CODE (LIST MOST EXPENSIVE ITEM ABOVE)		<b>TYPE OF THEFT</b> <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		
<b>SOLVABILITY FACTORS (Check All That Apply)</b> <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.

<b>VICTIM VEHICLE</b>		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 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.				

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

AOD and Juvenile Reporting Code (Refer to AOD Code Card)			<b>EVIDENCE:</b> 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				<input type="checkbox"/> Phone Report	Photos Taken	Evidence Collected	Tech:	Rec. Value	Loss Value	Page 1 of 4
Vict. 1	Wit. 0	Susp. 0	Arr. 0		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	On Scene Tech Tag Left	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Reported By <b>K. THOMAS</b>		Serial No. <b>8069P</b>	Watch <b>3</b>	Area <b>2B</b>	Supervisor <b>LT. E. POULSON</b>		Serial No.	Reviewer	Serial No.	

CRIME Disorderly House 25601 BP	INCIDENT # 94	V1	VICTIM LAST, First, Mid. State Of California
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<b>SUSPECT</b>		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 BY: (OFFICER/DATE/TIME) _____						<input type="checkbox"/> PROBATION COUNTY _____ Officer _____ <input type="checkbox"/> PAROLE AGENT _____ <input type="checkbox"/> PAL						
DESCRIPTION PROVIDED BY		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED										
<b>HAIR LENGTH</b> <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		<b>HAIR STYLE</b> <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		<b>FACIAL HAIR</b> <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		<b>COMPLEXION</b> <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		<b>APPEARANCE</b> <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		<b>SPEECH</b> <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		<b>DEMEANOR</b> <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
<b>OTHER DISTINCTIVE FEATURES</b> <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		<b>WEAPON USED</b> 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"/> RIFLE <input type="checkbox"/> NICKEL <input type="checkbox"/> BLUED <input type="checkbox"/> CUT/STAB <input type="checkbox"/> VEHICLE				

<b>SUSPECT</b>		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 BY: (OFFICER/DATE/TIME) _____						<input type="checkbox"/> PROBATION COUNTY _____ Officer _____ <input type="checkbox"/> PAROLE AGENT _____ <input type="checkbox"/> PAL						
DESCRIPTION PROVIDED BY		CLOTHING, SCARS, MARKS, TATOOS, WORDS USED										
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<b>OTHER DISTINCTIVE FEATURES</b> <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		<b>WEAPON USED</b> 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"/> RIFLE <input type="checkbox"/> NICKEL <input type="checkbox"/> BLUED <input type="checkbox"/> CUT/STAB <input type="checkbox"/> VEHICLE				

<b>SUSPECT VEHICLE</b>		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"/> 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 #  
05-013166

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: 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 3<sup>rd</sup> 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 18<sup>th</sup> St. and San Pablo Ave., 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 18<sup>th</sup> St. and San Pablo Ave, 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, 18<sup>th</sup> St., next to the front entrance of Sweet Jimmies. Traffic on E/B 17<sup>th</sup> St. had also come to a standstill, due to vehicles stopping IFO @17 Club, which is located at 510 17<sup>th</sup> St.

At approximately 0130 hrs. OPD Radio advised that the windows to the Oakland Homeless Project, 1820 Jefferson 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 18<sup>th</sup> 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 17<sup>th</sup> St.

At approximately 0215 hrs. a large number of the vehicles relocated the Chevron Station at 18<sup>th</sup> St and Castro. 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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# OPD

ADDITIONAL INFORMATION REPORT

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

RD #  
05-013166

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 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 4 of 4
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Oakland Police Department  
455 - 7<sup>th</sup> Street  
Oakland, CA 94607-3985

ASSIGN TO:

RD #

05-019404

ROUTING

☒ CID

☐ YSD

☐ VICE

☐ CSD

☐ TRAFFIC

☐ D.A.

☐ VIC/WIT

☒ ABAT

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		

☐ 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 1733 San Pablo Ave.

LOSS	TYPE OF THEFT	Occurred	Date	Time	Day	VANDALISM
<input checked="" type="checkbox"/> None	<input type="checkbox"/> PICKPOCKET	On or From	4-Apr-05	17	Mon	<input type="checkbox"/> EGGED
(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	<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	4-Apr-05	330	Mon	<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
		Reported	4 Apr 05	17	Mon	

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

SOLVABILITY FACTORS (Check All That Apply)  
☐ SURVEILLANCE PHOTO ☐ NAMED SUSPECT  
☐ SERIOUS INJURY ☒ IDENTIFIABLE SUSPECT  
☒ EVIDENCE ☒ R/O REQUESTS INVEST.  
☐ 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 VEHICLE License No. State ☐ Secured At The Scene ☐ Towed  
☐ Released To The Owner ☐ Fingerprinted  
☐ Hold (Unit) ☐ Stolen Tow Number

☐ Car Year Make Model Body Type Color Vin No.  
☐ Truck  
☐ Other

☐ Stolen Bicycle ☐ Mens ☐ Mtn. Color Brand Model Speed License No. Serial No.  
☐ Womens ☐ Road

PROPERTY / NARRATIVE ☐ Loss ☐ Evidence ☐ Safekeeping ☐ Recovered Location When Stolen  
☐ Interior ☐ Exterior ☐ Garage

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	Evidence Collected	Tech:	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	On Scene <input type="checkbox"/> Yes <input type="checkbox"/> No Tech Tag Left <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.

# 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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<b>SUSPECT</b>		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											
<b>HAIR LENGTH</b> <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		<b>HAIR STYLE</b> <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		<b>FACIAL HAIR</b> <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		<b>COMPLEXION</b> <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		<b>APPEARANCE</b> <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		<b>SPEECH</b> <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		<b>DEMEANOR</b> <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	
<b>OTHER DISTINCTIVE FEATURES</b> <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		<b>WEAPON USED</b> 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			

<b>SUSPECT</b>		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				
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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											
<b>HAIR LENGTH</b> <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		<b>HAIR STYLE</b> <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		<b>FACIAL HAIR</b> <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		<b>COMPLEXION</b> <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		<b>APPEARANCE</b> <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		<b>SPEECH</b> <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		<b>DEMEANOR</b> <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	
<b>OTHER DISTINCTIVE FEATURES</b> <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		<b>WEAPON USED</b> 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			

<b>SUSPECT VEHICLE</b>		<b>VEHICLE WAS</b> <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"/>		
<b>TIRES</b> <input type="checkbox"/> STOCK <input type="checkbox"/> WIDE <input type="checkbox"/> SMALL		<b>RIMS</b> <input type="checkbox"/> STOCK <input type="checkbox"/> CHROME <input type="checkbox"/> MAGS <input type="checkbox"/> SPOKE		<b>LEVEL</b> <input type="checkbox"/> STOCK <input type="checkbox"/> LOWERED <input type="checkbox"/> RAISED <input type="checkbox"/>		<b>ROOF</b> <input type="checkbox"/> VINYL <input type="checkbox"/> LANDAU <input type="checkbox"/> CONV		<b>WINDOWS</b> <input type="checkbox"/> INTED <input type="checkbox"/> BROKEN		<b>SEATS</b> <input type="checkbox"/> VINYL <input type="checkbox"/> BENCH <input type="checkbox"/> CLOTH <input type="checkbox"/> BUCKET	
								<b>TRANSMISSION</b> <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 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 3<sup>rd</sup> Watch officers, who normally work West end sideshow responded to 17<sup>th</sup> St. and San Pablo Ave. to assist. Additional Late-Tac units also responded to assist with the crowd. I used a total of 9 3<sup>rd</sup> 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 18<sup>th</sup> 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 18<sup>th</sup> St. and San Pablo to keep the peace. One of the fighters (David Brown, AQQ411) was detained and arrested for public intoxication. I was standing at the intersection of 17<sup>th</sup> 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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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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AODAT

05-011437

ROUTING		Outside Reporting Agency		Case No.	Police Beat	CP Beat	Incident No.	05-011437			
<input checked="" type="checkbox"/> CID					4	4X	18				
<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 checked="" type="checkbox"/> ABAT <input type="checkbox"/>		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 1	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 type="checkbox"/> 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"/> 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	
Location (Address/Block No./Intersection)		<input type="checkbox"/> OHA	<input checked="" type="checkbox"/> ABC	Occurred	Date	Time	Day
1733 San Pablo Ave.				On or From	25-Feb-05	2300	Fri
LOSS		<input checked="" type="checkbox"/> None	TYPE OF THEFT	To	26-Feb-05	230	Sat
(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	25 Feb 05	2300	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 Where Stolen	<input type="checkbox"/> Interior <input type="checkbox"/> Exterior <input type="checkbox"/> Garage
Item	City	Item Type, Brand, Model, No., Size, Color, Marks, Etc.	Serial No.

AOD and Juvenile Reporting Code (Refer to AOD Code Card)			EVIDENCE: One video tape (DVC) of incident, taken by Officer D. Chimpky and M. Trenkamp. I collected from them and I turned item into OPD Property Section.		
AOD	Setting (2 Digit #)	Juvenile			

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

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

POLICE REPORT

## 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
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<b>SUSPECT</b>		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									
<b>HAIR LENGTH</b> <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		<b>HAIR STYLE</b> <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		<b>FACIAL HAIR</b> <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		<b>COMPLEXION</b> <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		<b>APPEARANCE</b> <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		<b>SPEECH</b> <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	
<b>DEMEANOR</b> <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											
<b>OTHER DISTINCTIVE FEATURES</b> <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		<b>WEAPON USED</b> 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"/> BLUED <input type="checkbox"/> ROCK/BRICK <input type="checkbox"/> CUT/STAB <input type="checkbox"/> VEHICLE					

<b>SUSPECT</b>		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									
<b>HAIR LENGTH</b> <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		<b>HAIR STYLE</b> <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		<b>FACIAL HAIR</b> <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		<b>COMPLEXION</b> <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		<b>APPEARANCE</b> <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		<b>SPEECH</b> <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	
<b>DEMEANOR</b> <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											
<b>OTHER DISTINCTIVE FEATURES</b> <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		<b>WEAPON USED</b> 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"/> BLUED <input type="checkbox"/> ROCK/BRICK <input type="checkbox"/> CUT/STAB <input type="checkbox"/> VEHICLE					

<b>SUSPECT VEHICLE</b>		<b>VEHICLE WAS</b> <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		

# OPD

## ADDITIONAL INFORMATION REPORT

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

RD #  
05-011437

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
		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 25 Feb 05, I (3L72) was assigned as a patrol supervisor dressed in full police uniform, driving fully marked OPD veh #1243. I was working a 3<sup>rd</sup> 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 18<sup>th</sup> St. and San Pablo Ave., 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 17<sup>th</sup> 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 17<sup>th</sup> 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 DUI, 23152(b) VC. 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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# OPD

## ADDITIONAL INFORMATION REPORT

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

RD#  
05-011437

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	QNTY	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 18<sup>th</sup> St and Castro, 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 Club, located at 1733 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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05-011437

**CRI 00109**

05-011437

# ADDITIONAL INFORMATION REPORT

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

RD #

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 444 with Ofc. C. Keden, 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. SKRDLANT	SERIAL # 8417A	WATCH 3	DISTRICT 6	SUPERVISOR Sgt. Brandwood	SERIAL #	PAGE 1 OF 1
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05-D11437

THE DRIVER WAS ARRESTED FOR DRIVING UNDER THE INFLUENCE  
& HER VEHICLE WAS TOWED INCIDENT TO ARREST.

ORI 00109

# ADDITIONAL INFORMATION REPORT

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

RD #

05-011437

CRIME 25601 BP	<input checked="" type="checkbox"/> 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, ESZIP AND I (445, 1230, 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 CHEVRON STATION AT 18TH ST AND CASTRO. 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 1
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# OPD

POLICE REPORT

## D.U.I. REPORT

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

In Custody: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	RD #
Citation No.	05-011408
Day/Date/Time SA 26 FEB 05 0136	Location 1900 SAN PABLO AVE
CP Beat 4x	Incident No. 00082
Offense 23152(A)VC 23152(B)VC	

### I. SUSPECT

LAST, First, Mid KEYES, JENNIFER		Address [REDACTED]		City <input type="checkbox"/> Oakland Zip Code [REDACTED]	
D.L. No. [REDACTED]	State CA	D.O.B. [REDACTED]	Sex [REDACTED]	Race [REDACTED]	Phone No. [REDACTED]
Vehicle [REDACTED]	State CA	Year 01	Make MISS	Model ACT	Body 4D
Ext. Color WHI		Disp. OR ( ) OPD ( )		TEW A+B	

### II. SUSPECT'S PHYSICAL APPEARANCE

<b>INJURIES/DISABILITIES:</b> <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: _____	<b>SPEECH</b> <input type="checkbox"/> Apparently Normal <input checked="" type="checkbox"/> Thick <input checked="" type="checkbox"/> Mumbles <input checked="" type="checkbox"/> Slow <input type="checkbox"/> Fast <input checked="" type="checkbox"/> Repeats <input checked="" type="checkbox"/> Sarcastic/Insulting <input type="checkbox"/> Other _____	<b>APPEARANCE OF:</b> <b>Eyes</b> <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 _____ <b>Face</b> <input checked="" type="checkbox"/> Normal <input type="checkbox"/> Pale <input type="checkbox"/> Flushed <input type="checkbox"/> Sweaty <input type="checkbox"/> Other _____	<b>UNUSUAL ACTIONS:</b> <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 _____	<b>ODOR OF ALCOHOLIC BEVERAGE (Describe)</b> STRONG FROM VEHICLE AND PERSON
Clothing (Describe) WHI SHIRT BLO JEANS			Shoes (Describe) BROEN 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"/> Pills <input type="checkbox"/> Injection <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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? "TRAI 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		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you taken any other drugs? "JUST VITAMINS"		If yes, what?	How Much? Time of Last Dosage?
Do you feel the effects of the drugs? Describe: N/A		<input type="checkbox"/> Yes <input type="checkbox"/> No	

### 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

# V. FIELD SOBRIETY TESTS

Time of Test <b>0139</b>	Weather <b>MOSTLY CLEAR/DRY</b>	Lighting <b>STREET LIGHTS</b>	Location <b>SIDEWALK</b>	Condition of Test Surface <b>SMOOTH CONCRETE</b>
1 One Leg Stand		2 (SWAYS) <b>2ND TEST</b> Walk and Turn		
Yes No Sways While Balancing <input checked="" type="checkbox"/> <input type="checkbox"/> Uses Arms To Balance <input checked="" type="checkbox"/> <input type="checkbox"/> Hops <input type="checkbox"/> <input type="checkbox"/> Puts Foot Down <input checked="" type="checkbox"/> <input type="checkbox"/> Comments: <b>DID WALK AND TURN TEST AGAIN AFTER TWO DEMOS</b>		<input checked="" type="checkbox"/> Loses Balance During Instructions <input checked="" type="checkbox"/> Steps off line <input type="checkbox"/> Starts Before Instructions <input checked="" type="checkbox"/> Uses Arms to Balance <input checked="" type="checkbox"/> Stops While Walking <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 L R 1 2 3 4 5 6 7 8 9 Start Position <input type="checkbox"/> Unable to Perform (Explain) <b>AD HEEL TOE ON ALK AFTER 2ND DEMO</b>		

3 Horizontal Gaze Nystagmus	4 Manual Dexterity
Check for: Lack of Smooth Pursuit <input checked="" type="checkbox"/> Left Eye <input checked="" type="checkbox"/> Right Eye 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: <b>ONSET AT APPROX. 30</b>	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): <b>S</b>

5 Alphabet	6 Other
Have Offender Recite Alphabet <b>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</b> <b>SKIP Z</b> 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	_____ _____ _____ _____ _____

## 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 <b>T. BOWEN</b>		Serial No.: <b>8519</b>	Time: <b>0151</b>
PAS Serial No. <b>004733</b>	Temperature <b>99</b>	Zeroed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Results No. 1 <b>VOID</b>
Location of Test <b>At Scene</b>	Breath Sample Strength <b>Strong</b>	Time 1 <b>0151</b>	Results No. 2 <b>VOID</b>
	Officer Administering PAS Test <b>T. BOWEN</b>	Time 2 <b>0156</b>	Results No. 3 <b>VOID</b>
	Arresting Officer <b>T. BOWEN</b>	Time 3 <b>0158</b>	Serial No. <b>8519</b>

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

Blood Test Taken At	Date	Time	Name of Person Drawing Blood	Type of Swab

## 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? ☐ Yes ☒ No **WHATSOEVER IS FINE**

Reporting Officer <b>T. BOWEN</b>	Serial No. <b>8519</b>	Supervisor <b>Sgt. GONZALEZ</b>	Serial No.	Page <b>1</b> of <b>5</b>
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# ADDITIONAL INFORMATION REPORT

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

RD #

05-01408

CRIME 2315Z 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 15TH ST/SAN PABLO. I OBSERVED A WHI TOYOTA (LIC #4R2M179) 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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# ADDITIONAL INFORMATION REPORT

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

RD #

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) ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC.	SERIAL #	VALUE
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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 SAID SHE UNDERSTOOD THE TEST AND AGAIN PERFORMED THE WALK AND TURN TEST, INCORRECTLY (NO HEEL/TOE + 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 ODDOR 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 # 85199	WATCH 1	DISTRICT CA	SUPERVISOR SGT. GONZALEZ	SERIAL #	PAGE 4 OF 5
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# ADDITIONAL INFORMATION REPORT

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

RD #

05-011408

CRIME <b>23152 UC</b>	[ ] SUPPLEMENTAL	INCIDENT # <b>0082</b>	V1	VICTIM LAST, First, Mid. <b>STATE OF CALIFORNIA</b>
SUSPECT LAST, First, Mid. <b>KEYES, HEATHER</b>	INCIDENT LOCATION <b>1900 SAN PABLO AVE</b>	DATE OF THIS REPORT <b>28 FEB 05</b>	ORIGINAL DATE REPORTED	

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

TO SMELL OF AN ALCOHOLIC BEVERAGE. DURING THE INTERVIEW (PORTION) OF THE D.O.I. REPORT KEYES SAID SHE HAD TWO MISSOURI SOURS 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 TESTS INDICATING .17 BAC AND .17 BAC. I ADDED THE CHARGE OF DRIVING WITH A BAC OF .08 OR GREATER (23152(B) UC).

REPORTED BY <b>T. BOWEN</b>	SERIAL # <b>8511P</b>	WATCH <b>1</b>	DISTRICT <b>0</b>	SUPERVISOR <b>SGT. GONZALEZ</b>	SERIAL #	PAGE <b>5</b> OF <b>5</b>
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LAW ENFORCEMENT AGENCY CASE NO. <b>05-011408</b>		ARREST DATE <b>26 FEB 05</b>		FOR DMV USE ONLY	
DRIVER'S NAME (LAST, FIRST, M.I.) <b>KEYES, JENNIFER</b>		DRIVER LICENSE NO. [REDACTED]	CLASS <b>C</b>	STATE <b>GA</b>	THUMB PRINT (Right thumb or specify) 
MAILING ADDRESS [REDACTED]					
DOB: [REDACTED]	Sex: <b>F</b>	Hair: <b>BLK</b>	Eyes: <b>BRN</b>	Ht.: <b>5'</b>	Wt.: <b>115</b>
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 (Complete reverse) <input type="checkbox"/> Forced Blood Test (Complete reverse)					

Vehicle Lic. No. or VIN **4RAM179** ☐ **COMMERCIAL VEHICLE:** Vehicle operation requires a commercial driver license (Section 15210 CVC). On **26 FEB 05** at **0130 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 **0130 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"/> Officer <input type="checkbox"/> Citizen	<input type="checkbox"/> Driving observed	<input type="checkbox"/> Driver arrested	<input type="checkbox"/> Collision witnessed	By <input type="checkbox"/> Officer <input type="checkbox"/> Citizen
NAME (PLEASE PRINT) <b>SGT. K. THOMAS</b>				NAME (PLEASE PRINT)			
ADDRESS <b>OAKLAND PD</b>				ADDRESS			
TELEPHONE NO. <b>(510) 236-3455</b>		OFFICER'S BADGE/ID NO. <b>8069P</b>		OFFICER'S AGENCY <b>AD</b>		TELEPHONE NO. ( )	

**OBJECTIVE SYMPTOMS OF INTOXICATION:** ☒ Bloodshot/watery eyes ☒ Odor of alcoholic beverage ☐ Unsteady gait ☒ Slurred speech  
☐ Other: Observed by: **THOMAS 8519P** at **0130 AM** PM

<b>CHEMICAL TEST 0.08% OR MORE BLOOD ALCOHOL CONCENTRATION (BAC)</b>			
Breath Test Results (Attach copy of the results, if available) <b>26 Feb 05</b>			
TEST 1, <b>17%</b> BAC on <b>26 FEB 05</b> AM/PM	TEST 2, <b>17%</b> BAC on <b>26 FEB 05</b> AM/PM	TEST 3, <b>0.05%</b> BAC on <b>26 FEB 05</b> AM/PM	(WHEN APPLICABLE)
<b>BREATH TEST MACHINE OPERATOR'S CERTIFICATION:</b> 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 <b>26 Feb 05</b> Signature X <b>B. Henry</b>		Badge/ID No. <b>4397J</b> Agcy./Div. <b>OPD</b>	
Blood Test Results <input type="checkbox"/> Blood Test on _____ AM/PM			
Urine Test Results <input type="checkbox"/> Both Breath and Blood tests unavailable: <input type="checkbox"/> Drug use suspected.			
<input type="checkbox"/> Urine Test First Void on _____ AM/PM Test on _____ 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 <b>26 FEB 05</b> AT: City <b>OAKLAND</b>		County <b>ALAMEDA</b> State <b>GA</b>	
OFFICER'S PRINTED NAME <b>THOMAS</b>	BADGE/ID NO. <b>8519P</b>	TELEPHONE NO. <b>(510) 236-3455</b>	
AGENCY <b>OAKLAND PD</b>	AREA <b>1</b>	COURT CODE (IF UNKNOWN, COURT NAME)	
ISSUE DATE OF ORDER <b>26 FEB 05</b>	SIGNATURE OF ARRESTING OFFICER <b>X THOMAS</b>		
<input checked="" type="checkbox"/> did not personally serve a copy of the Order of Suspension/Revocation to the driver.			
<input type="checkbox"/> 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 <b>X</b>	

# CHEMICAL TEST REFUSAL (13353 CVC)

## CHEMICAL TEST ADMONITION (23612 CVC)

I admonished the driver on 26 FEB 05 at 0746 AM/PM in OAKLAND CA.  
DATE TIME LOCATION

- You are required by state law to submit to a chemical test to determine the alcohol and/or drug content of your blood.
- ☒ 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 \_\_\_\_\_.
- 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.
- 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.
- 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.
- 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

- The breath test you have just taken is designed to detect only the alcohol content of your blood.
- 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.
- 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% 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.
- 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.
- 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.
- 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: \_\_\_\_\_

LOC=OAKLAND PD  
INTOXILYZER - ALCOHOL ANALYZER  
CA MODEL 5000 SN-66-002412  
02/26/2005

SUB NAME=KEYES, JENNIFER  
SUB DOB [REDACTED]  
ARREST AGENCY=CHP  
VIOLATION=23152  
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

OPD

TIME FIRST OBSERVED

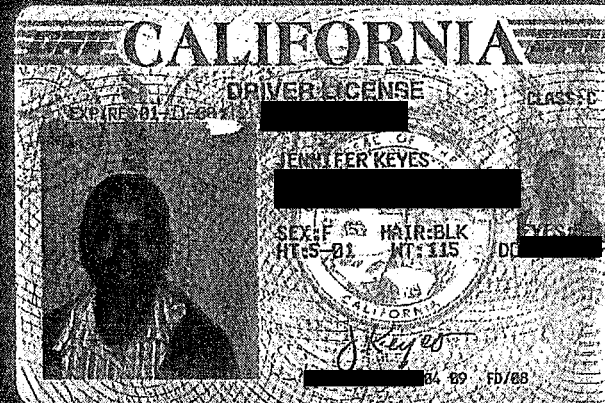
INSTRUMENT LOCATION

B. Henry 1243927

OPERATOR

ADDITIONAL INFORMATION AND/OR REMARKS

Nothing done to Compromiser  
test



## CRIME REPORT

Oakland Police Department  
455 - 7<sup>th</sup> Street  
Oakland, CA 94607-3985

ASSIGN TO:

RD #

## ROUTING

☒ CID

Outside Reporting Agency

Case No.

Police Beat

CP Beat

Incident No.

05-011437

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

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 ProvidedADDITIONAL  
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

☐ 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 HouseSection/Subsection  
25601Code  
BPPertains To:  
V: 1

Location (Address/Block No./Intersection)

☐ OHA☒ ABC

1733 San Pablo Ave.

Occurred

Date

Time

Day

VANDALISM

On or  
From

25-Feb-05

2300

Fri

To

26-Feb-05

230

Sat

Reported

25 Feb 05

2300

Sat

## (CHECK ALL THAT APPLY)

☐ CURRENCY / NOTES  
☐ CLOTHING / FURS  
☐ JEWELRY / PRECIOUS METAL  
☐ FIREARMS  
☐ OFFICE EQUIPMENT  
☐ TVS, RADIO, STEREO☐ HOUSEHOLD GOODS  
☐ CONSUMABLE GOODS  
☐ LIVESTOCK  
☐ MOTOR VEHICLES  
☐ MISCELLANEOUS

## TYPE OF THEFT

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

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)

AOD

Setting  
(2 Digit #)

Juvenile

EVIDENCE: One video tape (DVC) of incident, taken by Officer D. Chimpky and M. Trenkamp. I collected from them and I turned item into OPD Property Section.

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 ☐ NoTech Tag Left ☐ Yes ☐ No

Rec. Value

Loss Value

Page 1  
of 4Reported By  
K. THOMASSerial No.  
8069PWatch  
3Area  
2BSupervisor  
LT. K. MULLNIX

Serial No.

Reviewer

Serial No.

# OPD

POLICE REPORT

## 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
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<b>SUSPECT</b>		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											
<b>HAIR LENGTH</b> <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		<b>HAIR STYLE</b> <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		<b>FACIAL HAIR</b> <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		<b>COMPLEXION</b> <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		<b>APPEARANCE</b> <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		<b>SPEECH</b> <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		<b>DEMEANOR</b> <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	
<b>OTHER DISTINCTIVE FEATURES</b> <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		<b>WEAPON USED</b> 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			

<b>SUSPECT</b>		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											
<b>HAIR LENGTH</b> <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		<b>HAIR STYLE</b> <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		<b>FACIAL HAIR</b> <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		<b>COMPLEXION</b> <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		<b>APPEARANCE</b> <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		<b>SPEECH</b> <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		<b>DEMEANOR</b> <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	
<b>OTHER DISTINCTIVE FEATURES</b> <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		<b>WEAPON USED</b> 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			

<b>SUSPECT VEHICLE</b>		<b>VEHICLE WAS</b> <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"/> 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 #  
05-011437

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 22 Oct 05	ORIGINAL DATE REPORTED	

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

NARRATIVE: On 25 Feb 05, I (3L72) was assigned as a patrol supervisor dressed in full police uniform, driving fully marked OPD veh #1243. I was working a 3<sup>rd</sup> 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 18<sup>th</sup> St. and San Pablo Ave., 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 17<sup>th</sup> 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 17<sup>th</sup> 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 4RRM179, drive around me, almost hitting me 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 DUI, 23152(b) VC. 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 3
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# OPD

ADDITIONAL INFORMATION REPORT

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

RD #  
05-011437

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 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: As Officers were attempting to control the crowd IFO Sweet Jimmies; a large number of the vehicles relocated the Chevron Station at 18<sup>th</sup> St and Castro, 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 Club, located at 1733 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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**Killey, Barbara**

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**From:** Nadel, Nancy  
**Sent:** Wednesday, December 07, 2005 10:13 AM  
**To:** Killey, Barbara  
**Subject:** Jimmie's

Got a call about untrue complaints about Jimmie's. Jimmie's rep claims that they received a letter about an Oct. 22 incident but there was no Oct. 22 incident. Rep claims police came and saw no problems but a report showed up in Trib the next day saying there was an incident and now they've gotten a letter from Robert Crawford about an alleged incident on that date. Have you gotten a police report for that date claiming incident at 11 PM? They think the incident number is 05066051. Can you request a copy of any report there might be for that date? I'd like to get to the bottom of this. Thanks.

Nancy



Nancy J. Nadel  
Oakland City Council District 3  
Phone: (510) 238-7303  
FAX: (510) 238-6129  
[www.nancynadel.org](http://www.nancynadel.org)

**Please sign up to the District Three List Serves:**

*For West Oakland, send a blank email to*

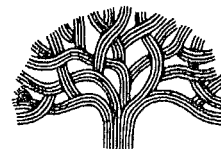
[d3westoakland-subscribe@yahoogroups.com](mailto:d3westoakland-subscribe@yahoogroups.com)

*For the Downtown/Lake, send a blank email to*

[d3oaklanddtownlake-subscribe@yahoogroups.com](mailto:d3oaklanddtownlake-subscribe@yahoogroups.com)



# CITY OF OAKLAND



POLICE ADMINISTRATION BUILDING • 455 - 7TH STREET • OAKLAND, CALIFORNIA 94607-3985

Police Department

Telephone Device for the Deaf (510) 777-3333

Patrol Desk (510) 238-3455

Fax (510) 238-2251

Jan. 5

November 17, 2005

Mr. Jimmie Ward  
579 18<sup>th</sup> Street  
Oakland, CA 94612

RE: Sweet Jimmie's  
577 18<sup>th</sup> Street  
Oakland CA 94612  
ABC License #: 47-251303

Dear Mr. Ward,

Public records indicate that you are the owner of the referenced property that is used for the business of selling alcoholic beverages and that you are also the ABC licensee and operator of the business.

This correspondence is intended to serve as notice to you as the property owner that illegal and/or nuisance activities are occurring on your property. This notice may be used as a legal document to demonstrate your knowledge of the conditions. On October 23, 2005, the Alcoholic Beverage Action Team received a crime report indicating that the following nuisance conditions exist at the above referenced premises:

Disorderly House (25601 B&P)

If the above condition(s) is/are not corrected **immediately**, a \$200.00 re-inspection fee will be assessed on you as the business owner.

As the owner of the property, you are responsible to take action to prevent or stop the nuisance activities and conditions. The action of your business affects your property rights if you fail to correct the nuisance activities. Enclosed for your information, is a copy of the "Nuisance Abatement Notice" which was issued to you as the business operator. If nuisance conditions are not corrected promptly, a hearing may be conducted to impose conditions on the "Deemed Approved" land

use status of the property as set forth in Oakland Planning Code 17.156. Be advised, your property's "deemed approved" status may be revoked and the ability to operate a liquor-selling establishment at that location may forever be restricted. The legal fees incurred by the City may be assessed against you, the property owner. Furthermore, the ongoing illegal activity at the premises can lead to the City obtaining a court injunction, closing this property, under Penal Code Section 11200 et. seq.

In addition, you may be liable under the following laws.

### **1. DRUG NUISANCE ABATEMENT ACT**

Action may be brought against you in California Superior Court pursuant to California Health and Safety Code Section 11570 ("The Drug Nuisance Abatement Act"). The Act states in relevant part:

Every building or place used for the purposes of unlawfully selling, serving, storing, keeping, manufacturing, or giving away any controlled substance, precursor, or analog specified in this division, and every building or place wherein or upon which those acts take place, is a nuisance which shall be enjoined, abated, and prevented, and for which damages may be recovered, whether it is a public or private nuisance.

If the court finds that a nuisance exists, it may order:

- 1) Elimination of the nuisance;
- 2) Removal and sale of the fixtures and other removable property used in the maintenance of the nuisance;
- 3) Up to \$25,000 per defendant in civil penalties;
- 4) Closure of the building for a period of up to one year or damages in the amount of the fair rental value of the property for a period of one year;
- 5) Sale of the entire property to reimburse the City of its costs.

According to state law, the owner, as well as the tenants, may be held responsible for the maintenance of these nuisances.

## 2. PUBLIC NUISANCE ORDINANCE

Additionally, pursuant to Oakland Municipal Code (OMC) Chapter One Section 1.08, the City may declare your property a public nuisance. OMC Chapter one provides that a public nuisance shall exist whenever a condition on a property is maintained in violation of codes and ordinances identified in this chapter or in violation of California Civil Code sections 3479 and 3480. A public nuisance shall also exist whenever a condition so identified is corrected but recurs, and continues as a recurrent problem. The City may impose a fee of \$3000 and penalties of \$1000 a day up to \$365,000 a year unless the nuisance conditions are abated, pursuant to OMC Section 1.08.

**In addition to these administrative fines, if you should receive a second notification of illegal drug activity on your property the City will assess a \$2,000.00 repeat offender fine, plus processing costs, pursuant to Ordinance 12588.**

Furthermore, criminal action may be brought against you pursuant to California Health and Safety Code, Section 11366.5 (a) ("Uniform Controlled Substances Act"). The Act states in relevant part:

*Any person who has under his or her management or control any building, room, space, or enclosure, either as an owner, lessee, agent, employee, or mortgagee, who knowingly rents, leases or makes available for use, with or without compensation, the building, room space, or enclosure for the purpose of unlawfully manufacturing, storing, or distributing any controlled substance for sale or distribution shall be punished by imprisonment in the county jail for not more than one year, or in the state prison.*

## 3. EVICTION

If the person(s) arrested for the drug activity is (are) tenants, California law further provides that:

*Any tenant . . . using the premises for an unlawful purpose, thereby terminates the lease, and the landlord . . . shall, upon three days notice to quit upon the person or persons in possession, be entitled to restitution of possession of the demised premises under this chapter. (California Code of Civil Procedure, Section 1161(4).)*

Oakland's "Just Cause For Eviction Ordinance" (Measure EE) provides grounds for eviction if:

*"The tenant has used the rental unit or the common areas of the premises for an illegal purpose including the manufacture, sale, or use of illegal drugs."*

If you have any questions regarding your rights in regard to your tenants, please contact an attorney.

#### **4. CABARET HEARING**

In light of the nuisance, activities the City of Oakland's Administrative Hearing Officer has been notified. The Oakland Police Department may request a hearing to request revocation of your cabaret permit or request that additional conditions be imposed upon your cabaret permit.

#### **5. EXTRAORDINARY EXPENDITURE OF POLICE RESOURCES**

Under Oakland Municipal Code sections 9.52.040(D) and 9.52.120, if the Oakland Police Department is required to expend extraordinary resources as a result of your improper planning, failure to exercise due caution, and failure to establish precautions, your establishment may responsible for all costs incurred by the Oakland Police Department.

#### **CONCLUSION**

**This correspondence is intended to serve as official notice to you that nuisance activity is occurring on your property. It will be entered as evidence in any legal proceeding that may follow. This letter will be the only notification you receive.**

You can still avoid these drastic remedies including the associated court and legal fees by cooperating with us to eliminate the nuisance. If you wish to discuss a course of action, please contact Officer C. Garrett at (510) 777-8673.

Sincerely,



Robert P. Crawford  
Sergeant of Police  
Alcohol Beverage Action Team

ATTACHMENTS

Letter to Sweet Jimmie's from OPD Special Events

ABC License Query

October 23, 2005 Oakland Tribune article

List of crime reports

cc:

Ms. Hilda Locklear, Director/General Manager Jimmie's Limousine Service Inc.

Alcoholic Beverage Control Mr. Andrew Gomez

OPD Special Events Sgt. Tom Hogenmiller

City Of Oakland Nuisance Enforcement Unit Mr. Arturo Sanchez

✓ City of Oakland City Attorney's Office Attention: Mr. Jim Hodgkins

✓ City of Oakland Administrative Hearing Officer Ms. Barb Killey

OPD Police Services Area 1 Commander Lt. Paul Berlin



# OAKLAND POLICE DEPARTMENT

Police Administration Building • 455 7<sup>th</sup> Street • Oakland, CA 94607

A.B.A.T Unit (510) 238-7103

## DEEMED APPROVED ALCOHOLIC BEVERAGE SALE REGULATIONS

### NUISANCE ABATEMENT NOTICE

Licensee Name <b>JIMMIE'S LIMOUSINE SERVICE</b>	ABC License No. <b>47-251303</b>
Location <b>577 18th St. (1733 San Pablo) DBA: Sweet Jimmies</b>	
REPORTS <input type="checkbox"/> On-View <input checked="" type="checkbox"/>	Inspection Date <b>22 OCT 05</b>
	Time <b>2300</b>

An inspection of your business was made on the above date. Below is a list of violations which must be corrected in accordance with the Municipal, State, and City codes by the **COMPLIANCE DATE**.

<input type="checkbox"/> Sale to Minor Alcohol (25658 (a) B&P)	<input type="checkbox"/> Premise Lighting (25612.5 (c) 4 B&P)
<input type="checkbox"/> Sale to Minor Cigarettes (308 PC)	<input type="checkbox"/> Litter (25612.5 (c) 5 B&P)
<input type="checkbox"/> Drug Dealing/Possession (11500 H&S)	<input type="checkbox"/> Graffiti (25612.5 (c) 6 B&P)
<input type="checkbox"/> Sale to Intoxicated Person (25602 (a) B&P)	<input type="checkbox"/> Excessive Signage (25612.5 (c) 7 B&P)
<input type="checkbox"/> Urinating in Public (374 PC)	<input type="checkbox"/> Loitering/Blocking Pedestrian Movements (9.08.170 OMC)
<input type="checkbox"/> Signs Required (9.08.190 (B) OMC)	<input type="checkbox"/> Open Containers of Alcohol (9.08.190 (A) OMC)
<input type="checkbox"/> Loud Music (415 PC)	<input type="checkbox"/> Drinking in Public (9.08.180 A (1) OMC)
<input type="checkbox"/> No Violations. Congratulations. RD No. <b>05-066051</b>	
<input checked="" type="checkbox"/> Other Violation(s) _____ Citation No. _____	
<b>Narrative:</b> Disorderly HOUSE on 22OCT05 Ater a weekend event several reports were made for fighting, possible shooting and out of controll event that took place inside Jimmies club. No special event permt was obtained. Security was unable to handle or control the event or the crowd. This is one of six reports this year with problems at the above licensed restaurant. 47 ON SALE GENERAL EATING PLACE 05-066061, 05-066065, 05-020260, 05-011437 Violation added : OMC 9.52.030 special event permit required.	

**COMPLIANCE DATE:** Immediately 26OCT05

Your business will be reinspected on or after the Compliance Date listed above. If by that date you have failed to correct all violations noted above, a Reinspection Fee Charge of \$200 will be imposed against you. (OMC §§ 17.156.190, 17.156.220)

Additional Reinspections for the above violations will be fee-charged at \$200 per reinspection until compliance is achieved. Moreover, if the violations continue, the City may institute its Administrative Hearing Process to impose Conditions of Approval to reduce/eliminate the violations/nuisances. (OMC §17.156.140) If you have already been through the hearing process, the next hearing may result in revocation of your Deemed Approved Status to operate. (OMC § 17.156.150)

Officer <b>C. Garrett</b>	Serial No. <b>7876P</b>
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COPY

4 May 05

Sweet Jimmie's Club  
1733 San Pablo Ave.  
Oakland, Ca. 94612

Sweet Jimmie's Club,

This letter is written to demand payment for the extraordinary police services that were used to respond to problems at your place of business on April 10, 2005. The incident is documented in Oakland Police Department Crime Report #05-020260 (attached) listing you as the responsible suspect for a violation of 25601 (Disorderly House) of the Business and Professions Code. The matter, investigated by Sergeant K. Thomas, documents the aftermath of an event hosted by your business on the evening of April 9, 2005. Sergeant Thomas reported that the rapper/R&B singer Bobby Valentino was performing at your club. Sergeant Thomas reported he observed a crowd of about 100-150 persons in front of your club as well as smaller pockets of people hanging out on the corners around the area of your club. Thomas also observed numerous vehicles participating in "sideshow activity" on San Pablo Ave. around your club. Thomas called for additional officers to assist with traffic control. The Officers were called to also assure the safety of the patrons leaving your club.

As a result your and the promoter's improper planning, failure to exercise due caution, and failure to establish precautions, extraordinary police resources were expended by the Oakland Police Department in an effort to abate the unlawful activities and community disruptions caused by the event at your venue. Due to this extraordinary expenditure of police resources, the event at your establishment is governed by the Oakland Municipal Code's (OMC) guidelines, which define a "Special Event". The (OMC) holds you responsible for all costs incurred by the police department.

**The following is Oakland Municipal Code 9.52.040, subsection "D" which encompasses the above-mentioned event and defines it as a "Special Event"**

**"For-profit entertainment activities of persons, entities and businesses who or which are currently licensed to regularly provide specified entertainment activities at fixed locations in the city but which holds an event that will foreseeable result in impacts on public safety, health, welfare, and police resources".**

The event at your club disrupted the normalcy of the surrounding community prompting the response of the Oakland Police Department. Officer's not only had to deal with the crowd you and your staff could not keep from congregating in front of your club, but also with the patrons of your club that spilled out into the street after the event at your club.

After review of the aforesaid preliminary investigation, it has been determined the incident at your club on April 10, 2005 required extraordinary police services. The Oakland Municipal Code authorizes the Police Department to collect the extraordinary costs incurred because of the event at your club. Attached is a copy of Oakland Municipal Code sections 9.52.040 and 9.52.120. Also attached is a copy of the crime report written by Sergeant Thomas.

In the future, when planning an event at your club that could possibly cause the need for extraordinary police services, you should consider the need for more security services and/or Oakland Police Officers outside the club. You or the sponsor of the event should also apply for a permit authorizing the special event. The Special Events Unit of the Oakland Police Department is at your disposal to assist you in the planning of future events such as this. Please call Sgt. Tom Hogenmiller or myself at 238-3154 with any questions.

Please respond in a timely manner to the enclosed invoice for the amount of \$1,719.82.

Michael R. Morse  
Police Officer  
Special Events Unit





**California Department of Alcoholic  
Beverage Control**  
*License Query System Summary  
as of 11/1/2005*

<b>License Information</b>	
<b>License Number:</b> 251303	<b>Status:</b> ACTIVE
<b>Primary Owner:</b> JIMMIES LIMOUSINE SERVICE INC	
<b>ABC Office of Application:</b> OAKLAND	
<b>Business Name</b>	
... No Active DBA found ...	
<b>Business Address</b>	
<b>Address:</b> 577 18TH ST <b>Census Tract:</b> 4028.	
<b>City:</b> OAKLAND <b>County:</b> ALAMEDA	
<b>State:</b> CA <b>Zip Code:</b> 94612	
<b>Licensee Information</b>	
<b>Licensee:</b> JIMMIES LIMOUSINE SERVICE INC	
<b>Company Officer Information</b>	
<b>Officer:</b> LOCKLEAR HILDA, DIRECTOR/GENERAL MANAGER	
<b>Officer:</b> WARD JIMMIE, PRESIDENT	
<b>License Types</b>	
1) <b>License Type:</b> 48 - ON-SALE GENERAL PUBLIC PREMISES	
<b>License Type Status:</b> CANCEL	
<b>Status Date:</b> 06-APR-2004	<b>Term:</b> 12 Month(s)
<b>Original Issue Date:</b> 27-SEP-1990	<b>Expiration Date:</b> 31-MAR-1997
<b>Master:</b> Y <b>Duplicate:</b> 0 <b>Fee Code:</b> P40	
<b>License Type was Transferred On:</b> 15-NOV-1995 <b>To:</b> 251303	
2) <b>License Type:</b> 47 - ON-SALE GENERAL EATING PLACE	
<b>License Type Status:</b> ACTIVE	
<b>Status Date:</b> 31-MAY-1996	<b>Term:</b> 12 Month(s)
<b>Original Issue Date:</b> 31-MAY-1996	<b>Expiration Date:</b> 31-MAR-2006
<b>Master:</b> Y <b>Duplicate:</b> 1 <b>Fee Code:</b> P40	
<b>Condition:</b> OPERATING RESTRICTIONS	
<b>License Type was Transferred On:</b> <b>From:</b> 251303	
3) <b>License Type:</b> 68 - PORTABLE BAR	
<b>License Type Status:</b> ACTIVE	
<b>Status Date:</b> 31-MAY-1996	<b>Term:</b> 12 Month(s)
<b>Original Issue Date:</b> 31-MAY-1996	<b>Expiration Date:</b> 31-MAR-2006
<b>Master:</b> N <b>Duplicate:</b> 1 <b>Fee Code:</b> P40	

<b>Condition: OPERATING RESTRICTIONS</b>	
<b>Current Disciplinary Action</b>	
... <i>No Active Disciplinary Action found</i> ...	
<b>Disciplinary History</b>	
... <i>No Disciplinary History found</i> ...	
<b>Hold Information</b>	
<b>Hold Date:</b> 23-JUL-1998	<b>Type:</b> CITY OR COUNTY HOLD

--- End of Report ---

For a definition of codes, view our [glossary](#).

SUNDAY, October 23, 2005

# Nightclub violence causes police to push for citation

■ Rowdy crowd at Oakland's Sweet Jimmie's forces closure of multiple streets, leaves two men hospitalized

By William Brand

STAFF WRITER

OAKLAND — Oakland police have recommended the owner of a downtown nightclub be cited for keeping a disorderly establishment after one man was hospitalized early Saturday with a gunshot wound in the stomach and another taken to the hospital unconscious after a beating.

Both the gunshot victim, 34, of Oakland, who was taken to Highland Hospital, and the man who was beaten in a fight, who was taken to Alta Bates Summit Medical Center, were expected to recover, police said.

Oakland Police Sgt. Kyle Thomas said the combination of an overflow crowd that came to hear rap artist "Kreat the Sneak" perform at Sweet Jimmie's, 577 18th St., and sideshow action that began a block away at 19th and San Pablo, forced early closure of the club.

At its peak, the disturbance forced closure

of San Pablo Avenue, and 17th, 18th and Jefferson streets, Thomas said.

At least 25 officers were required to control the situation. "It was gridlock," he said.

As officers moved to control the sideshow activity, police received a call that shots had been fired inside Sweet Jimmie's, and people were fighting and trampling each other in an effort to leave the club.

Officers responded and began clearing the club, when there was a report of a shot fired outside. People began running back inside, Thomas said.

The shooting victim told police he was shot at 19th and San Pablo. The beating to the other man apparently occurred inside the club, Thomas said.

Thomas said he believed Sweet Jimmie's security could not control the crowd.

"This crowd 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 traveling safely on San Pablo Avenue," he said.

## Crime Report Listing

05-066065
05-066061
05-066051
05-020260
05-011437

5365

## CITY OF OAKLAND

Interoffice Memorandum


TO: City Administrator  
ATTN: Ms. Barbara Killey  
FROM: Oakland Police Department ABAT Unit  
DATE: November 15, 2005  
RE: Request For A Continuance Of The November 17, 2005 Cabaret Permit Application  
Hearing For Sweet Jimmie's located at 577 18<sup>th</sup> Street

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The purpose of this memorandum is to request a continuance of the hearing for the cabaret permit application for the business located at 577 18<sup>th</sup> Street, currently known as Sweet Jimmies. The reasons for the request are:

1. There was a misunderstanding regarding this permit application. You advised me that this application was going to be withdrawn, based upon a conversation you had with one of the applicants.
2. The Oakland Police Department Alcohol Beverage Action Team (OPD ABAT) requires additional time to complete its investigation. There is extensive nuisance and criminal history associated with this location.
3. ABAT requires additional information regarding the corporate officers, all investors and any anticipated management staff members:
  - a. Name
  - b. Address
  - c. Phone number
  - d. Birth date
  - e. Social Security Number
  - f. Association with other past or existing bars, restaurants and cabarets.
4. ABAT has concerns about any cabaret permit at this location. Since a cabaret permit is to be considered, we need time to deliberate about conditions that would reduce the likelihood of nuisance activities.
5. If the business is being sold or transferred, there may be issues and conditions associated with the Alcoholic Beverage Control licensing.

Thank you for your consideration of this matter.



Robert P. Crawford  
Sergeant of Police  
Alcohol Beverage Action Team  
Oakland Police Department

CC: Lt Paul Berlin and Sgt. Kyle Thomas

# OPD

POLICE REPORT

D.U.I.  
REPORT

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

In Custody: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	RD #
Citation No.	05-011408
CP Beat	Incident No.
4x	00082
Offense 23152(A)VC 23152(B)VC	

Day/Date/Time	SA 26 FEB 05 0136	Location	1900 SAN PABLO AVE
---------------	-------------------	----------	--------------------

## I. SUSPECT

LAST, First, Mid		Address		City		<input type="checkbox"/> Oakland		Zip Code	
KEYES JENNIFER		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]	
D.L. No.	State	DOB	Sex	Race	Hair	Eyes	Weight	Height	Phone No.
[REDACTED]	CA	[REDACTED]	F	B	BLK	BRO	5'11.5	115	UNK.
Vehicle License No.	State	Year	Make	Model	Body	Ext. Color	Disp. O/R ( ) OPD (+)		
[REDACTED]	CA	01	MISS	ATT	4D	WHI	TEW A+B		

## II. SUSPECT'S PHYSICAL APPEARANCE

INJURIES/DISABILITIES: <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: _____	SPEECH <input type="checkbox"/> Apparently Normal <input checked="" type="checkbox"/> Thick <input type="checkbox"/> Mumbles <input checked="" type="checkbox"/> Slow <input type="checkbox"/> Fast <input checked="" type="checkbox"/> Repeats <input checked="" type="checkbox"/> Sarcastic/Insulting <input type="checkbox"/> Other	APPEARANCE OF:		UNUSUAL ACTIONS: <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	ODOR OF ALCOHOLIC BEVERAGE (Describe)  STRONG FROM VEHICLE AND PERSON
		Eyes <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	Face <input checked="" type="checkbox"/> Normal <input type="checkbox"/> Pale <input type="checkbox"/> Flushed <input type="checkbox"/> Sweaty <input type="checkbox"/> Other		
Clothing (Describe) WHY SHIRT BLO JEANS			Shoes (Describe) BROKEN WOMAN'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		Are you Diabetic or Epileptic? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Describe:		Do you Take Insulin? <input type="checkbox"/> Pills <input type="checkbox"/> Injection	
Do you have any physical defects? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		When did you last sleep?	
Describe:		LAST NIGHT	
How long?		6 HRS	
When did you last eat?		Where were you driving the vehicle?	
COUPLE HOURS AGO		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
What did you eat?		If not, who?	
ITAL FOOD		SAN PABLO	
Where did you start?		What have you been drinking?	
A MOVIE		MIDORI SODA	
Where were you going?		Do you feel the effects of the drinks?	
TO LUMMIES		Describe: PROBABLY	
How Much?		Are you under the care of a doctor?	
PROBABLY TWO		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Time Started?		Are you under the care of a dentist?	
11		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Time Stopped?		Name & Address:	
I DON'T KNOW		Name & Address:	
Are you under the care of a doctor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If yes, what?	
Name & Address:		How Much?	
Have you taken any medicine?		Time of Last Dosage?	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Do you feel the effects of the medicine?		Have you taken any other drugs?	
Describe: N/A		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If yes, what?		How Much?	
JUST VITAMINS		Time of Last Dosage?	
Do you feel the effects of the drugs?		If yes, what?	
Describe: N/A		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

INC#82

V. FIELD SOBRIETY TESTS

Time of Test 0139	Weather MOSTLY CLEAR/DRY	Lighting STREET LIGHTS	Location SIDEWALK	Condition of Test Surface SMOOTH CONCRETE
<b>1 One Leg Stand</b>		<b>2 (SLAYS) 2ND TEST Walk and Turn</b>		
<div>Yes No</div> <div><input checked="" type="checkbox"/> Sways While Balancing <input type="checkbox"/></div> <div><input checked="" type="checkbox"/> Uses Arms To Balance <input type="checkbox"/></div> <div><input type="checkbox"/> Hops <input checked="" type="checkbox"/></div> <div><input checked="" type="checkbox"/> Puts Foot Down <input type="checkbox"/></div> <div>Comments: DID WALK AND TURN TEST AGAIN AFTER TWO DEMOS</div>		<div><input checked="" type="checkbox"/> Loses Balance During Instructions <input type="checkbox"/> Starts Before Instructions</div> <div><input checked="" type="checkbox"/> Steps off line <input checked="" type="checkbox"/> Uses Arms to Balance</div> <div><input checked="" type="checkbox"/> Stops While Walking <input type="checkbox"/> Improper Turn</div> <div><input checked="" type="checkbox"/> Does Not Touch Heel-to-Toe <input type="checkbox"/> Incorrect Number of Steps</div> <div>9 8 7 6 5 4 3 2 1 L</div> <div>L R 1 2 3 4 5 6 7 8 9</div> <div>Start Position</div> <div><input type="checkbox"/> Unable to Perform (Explain) AFTER 2ND DEMO</div>		

<b>3 Horizontal Gaze Nystagmus</b>	<b>4 Manual Dexterity</b>
Check for: Lack of Smooth Pursuit <input checked="" type="checkbox"/> Left Eye <input checked="" type="checkbox"/> Right Eye 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°	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): S Skipped Fingers <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Wrong Fingers <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<b>5 Alphabet</b>	<b>6 Other</b>
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 ZF 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	

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: T. BROWN Serial No.: 8519P Time: 0151

☐ N/A ☒ Arresting Officer ☐ Or T. BROWN

PAS Serial No. 004733	Temperature 19°	Zeroed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Results No. 1 <input type="checkbox"/> Refused <input checked="" type="checkbox"/> VOID	Time 1 0154	Results No. 2 <input type="checkbox"/> Refused <input checked="" type="checkbox"/> VOID	Time 2 0156	Results No. 3 <input type="checkbox"/> Refused <input checked="" type="checkbox"/> VOID	Time 3 0158
Location of Test <input checked="" type="checkbox"/> At Scene		Breath Sample Strength <input checked="" type="checkbox"/> Strong <input type="checkbox"/> Moderate <input type="checkbox"/> Weak		Officer Administering PAS Test <input checked="" type="checkbox"/> Arresting Officer		Serial No.		

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

Blood Test Taken At	Date	Time	Name of Person Drawing Blood	Type of Swab

VIII. TROMBETTA ADVISEMENT

A. The breath testing equipment does NOT retain any breath sample for later analysis by you or anyone else. ORZAS

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? ☐ Yes ☒ No WHATEVER IS FINE

Reporting Officer <u>T. BROWN</u>	Serial No. <u>8519P</u>	Supervisor <u>Sgt. GONZALEZ</u>	Serial No.	Page <u>1</u> of <u>5</u>
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# OPD ADDITIONAL INFORMATION REPORT

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

RD #

05-01408

CRIME 2315Z 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 (LIC #4RPM179) TRAVELING N/E 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. GROSSED 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 # 85911	WATCH 0	DISTRICT 0	SUPERVISOR SGT. GONZALEZ	SERIAL #	PAGE 3 OF 5
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# ADDITIONAL INFORMATION REPORT

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

RD #

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)	ITEM TYPE, BRAND, MODEL #, SIZE, COLOR, MARKS, ETC	SERIAL #	VALUE
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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 SAID SHE UNDERSTOOD THE TEST AND AGAIN PERFORMED THE WALK AND TURN TEST, INCORRECTLY (NO HEEL/TOE + 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 # 85199	WATCH 1	DISTRICT 0	SUPERVISOR SGT. GONZALEZ	SERIAL #	PAGE 4 OF 5
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# **O P D** **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, 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	

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

SUMMARY CONT:


TO SMELL OF AN ALCOHOLIC BEVERAGE. DURING THE INTERVIEW PORTION OF THE D.O.I. REPORT KEYES SAID SHE HAD TWO MISSOURI SOURS 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 TESTS INDICATING .17 BAC AND .17 BAC. I ADDED THE CHARGE OF DRIVING WITH A BAC OF .08 OR GREATER (23152(B) UC).

AGE 21 AND OLDER OFFICER'S STATEMENT  
SECTIONS 13353 & 13353.2 CALIFORNIA VEHICLE CODE (CVC)

APS

FORWARD THIS FORM WITHIN 5 BUSINESS DAYS  
TO YOUR LOCAL DRIVER SAFETY DISTRICT  
OFFICE, LISTED ON THE BACK OF PAGE 2

LAW ENFORCEMENT AGENCY CASE NO. <b>05-011408</b>	ARREST DATE <b>26 FEB 05</b>	FOR DMV USE ONLY			
DRIVER'S NAME (LAST, FIRST, M.I.) <b>KEYES, JENNIFER</b>		DRIVER LICENSE NO. [REDACTED]	CLASS <b>C</b>	STATE <b>CA</b>	THUMB PRINT (Right thumb or specify) 
MAILING ADDRESS [REDACTED]		ZIP CODE [REDACTED]			
DOB: [REDACTED]	Sex: <b>F</b>	Hair: <b>BLK</b>	Eyes: <b>BRN</b>	Ht.: <b>5'</b>	Wt.: <b>115</b>
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 **4R2M179** ☐ COMMERCIAL VEHICLE: Vehicle operation requires a commercial driver license (Section 15210 CVC). On **26 FEB 05** at **2:35** 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 **2:40** 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) <b>SGT. K. THOMAS</b>				NAME (PLEASE PRINT)			
ADDRESS <b>OAKLAND PD</b>				ADDRESS			
TELEPHONE NO. <b>(510) 236-3455</b>		OFFICER'S BADGE/ID NO. <b>8069P</b>		OFFICER'S AGENCY <b>AD</b>		TELEPHONE NO.	
						OFFICER'S BADGE/ID NO.	
						OFFICER'S AGENCY	

**OBJECTIVE SYMPTOMS OF INTOXICATION:** ☒ Bloodshot/watery eyes ☒ Odor of alcoholic beverage ☒ Unsteady gait ☒ Slurred speech  
☐ Other: Observed by: **SGT. THOMAS** at **01:37** AM/PM

<b>CHEMICAL TEST 0.08% OR MORE BLOOD ALCOHOL CONCENTRATION (BAC)</b>			
Breath Test Results (Attach copy of the results, if available) <b>26 Feb 05</b>			
TEST 1 <b>1.17%</b> BAC on <b>26 Feb 05</b> AM/PM		TEST 2 <b>1.17%</b> BAC on <b>02:45</b> AM/PM TEST 3 <b>1.17%</b> BAC on <b>02:45</b> 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 <b>26 Feb 05</b> Signature X <b>B. Henry</b>		Badge/ID No. <b>43975</b> Agcy./Div. <b>OPD</b>	
Blood Test Results <input type="checkbox"/> Blood Test on <b>26 Feb 05</b> AM/PM			
Urine Test Results <input type="checkbox"/> Both Breath and Blood tests unavailable: <input type="checkbox"/> Drug use suspected.			
<input type="checkbox"/> Urine Test First Void on <b>26 Feb 05</b> AM/PM Test on <b>26 Feb 05</b> 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 <b>SGT. THOMAS</b>	BADGE/ID NO. <b>8519P</b>	TELEPHONE NO. <b>(510) 236-3455</b>
AGENCY <b>OAKLAND PD</b>	AREA <b>1</b>	COURT CODE (IF UNKNOWN, COURT NAME)
ISSUE DATE OF ORDER <b>26 FEB 05</b>	SIGNATURE OF ARRESTING OFFICER <b>X [Signature]</b>	

☐ 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
		<b>X [Signature]</b>

# CHEMICAL TEST REFUSAL (13353 CVC)

## CHEMICAL TEST ADMONITION (23612 CVC)

I admonished the driver on 26 FEB 05 at 0245 AM/PM in OAKLAND CA.  
DATE TIME LOCATION

- You are required by state law to submit to a chemical test to determine the alcohol and/or drug content of your blood.
- ☒ 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 \_\_\_\_\_.
- 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.
- 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.
- 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.
- 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? WILL TAKE IT

☐ 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

- The breath test you have just taken is designed to detect only the alcohol content of your blood.
- 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.
- 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% 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.
- 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.
- 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.
- 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: \_\_\_\_\_

LOC=OAKLAND PD  
INTOXILYZER - ALCOHOL ANALYZER  
CA MODEL 5000 SH-66-002412  
02/26/2005

SUB NAME=KEYES, JENNIFER,  
SUB DOB [REDACTED]  
ARREST AGENCY=CHP  
VIOLATION=23152  
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 OPD  
TIME FIRST OBSERVED INSTRUMENT LOCATION  
B. Henry 124397  
OPERATOR  
ADDITIONAL INFORMATION AND/OR REMARKS  
Nothing done to Compromiser  
test

