

Alert Information (Select ALL that apply)

| | | | | | |
|--|--|--|--|--|---|
| <input type="checkbox"/> Alcoholic | <input type="checkbox"/> Deceased | <input type="checkbox"/> Epilepsy | <input type="checkbox"/> Health Risk | <input type="checkbox"/> Hemophilic | <input type="checkbox"/> Escape Risk |
| <input type="checkbox"/> Armed & Dangerous | <input type="checkbox"/> Protect Equip. Needed | <input type="checkbox"/> Martial Arts Expert | <input type="checkbox"/> Explosive Expertise | <input type="checkbox"/> Heart Condition | <input type="checkbox"/> Known to Abuse Drugs |
| <input type="checkbox"/> Medication Req'd | <input type="checkbox"/> Prohibited Possessor | <input type="checkbox"/> Sexual Predator | <input type="checkbox"/> Violent Tendencies | <input type="checkbox"/> Diabetic | <input type="checkbox"/> Suicidal |
| <input type="checkbox"/> Other: | | | | | |

Gang Membership Information Member Affiliate

GANG NAME: ACAB **SECONDARY GANG:**

TYPE: M/C Gang Street Gang Prison Gang Extremist Other (Specify):

GANG LOCATION: **RIVAL GANG(S):**

Gang Member Criteria (Select all that apply)

| | | |
|--|---|--|
| <input checked="" type="checkbox"/> Clothing or Colors | <input type="checkbox"/> Paraphernalia or Photographs | <input type="checkbox"/> Witness Testimony/Statement |
| <input type="checkbox"/> Gang Tattoos | <input checked="" type="checkbox"/> Self Proclamation | <input type="checkbox"/> Written/Electronic Correspondence |
| <input type="checkbox"/> Any Other Indicia, specify*: | | |

**Other criteria could include: extensive knowledge of gang, rivals or specific member*

Field Interview **DATE OF CONTACT:** Oct 17, 2020 **TIME:** 2040 **LOCATION PHOTO:** Yes No

LOCATION/ADDRESS: 1902 S 16th Street **CITY, STATE:** Phoenix, AZ **COUNTY:** Maricopa

CLOTHING & JEWELRY (type/color): Black pants, black hoodie LONG SLEEVE SHIRT

CRIME AND/OR REASON FOR CONTACT: Agg Assault on an Officer, Obst Pub Thoroughfare, Hindering, Unlawful Assembly, Riot, resisting arrest

INTERVIEW NOTES:

Nathan was part of a group that took over the city streets in downtown Phoenix and marched in the streets chanting, "ACAB, all cops are bastards." The members of this group wore primarily all black clothing and possessed black umbrellas.

| WEAPON TYPE: | MAKE: | MODEL: | SERIAL #: | FINISH: |
|--------------|-------|--------|-----------|---------|
| | | | | |

| AFFILIATES/ASSOCIATES | | LAST: | FIRST: | DOB: | RELATIONSHIP: |
|---|--|-------|--------|------|---------------|
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |

REVIEWED BY: **ID:** **AGENCY ORI#:**

GANG MEMBER INFORMATION CARD

Shaded fields are required

Today's Date: 10/30/2020
 OFFICER INFO - NAME: Hunzinger ID: 6029 AGENCY: Phx P.D. PHONE # (602) 995-5005

Subject Information PHOTO: Yes No PHOTOGRAPHER: ID:

LAST NAME: ALCARAZ FIRST NAME: Jacquelyn MIDDLE: Alexis

DOB: 12/29/2000 GENDER: Male Female HEIGHT: 5'-5" WEIGHT: 125lb

GANG NAME: ACAB DATE OF CONTACT: 10/17/2020

ALIAS: MONIKER:

ADDRESS: 1609 W. Alcoh St CITY, STATE, ZIP: Mesa AZ 85201

ADDRESS PHOTO: Yes No PHOTOGRAPHER: ID:

PHONE #: (480) 267-6003 cell PHONE #:

E-MAIL: SCREEN NAME:

RACE: Asian Indian Hispanic White Black
 Other (Specify): COMPLEXION: Acne/Pocked Freckled Medium Sallow
 Dark Light/Fair Pale N/A

DESCENT (lineage): NATIONALITY (citizenship): U.S. POB (city, state, country):

HAIR: HAIR TYPE: (Select all that apply) EYES:

Black Gray Afro Butch Dreadlocks Military Shaved Wavy Black Green Other
 Blonde Other Bald Combed Back Flattop Ponytail Straight Wig Blue Hazel
 Blue Red Braided Corn Rows Greasy Processed Thick Brown Multicolor
 Brown Silver Bushy Curly Jeri curl Receding Thinning Gray Pink

HAIR LENGTH: FACIAL HAIR: (Select all that apply) TEETH: (Select all that apply)

Collar Short Beard Fu Manchu Goatee Mustache Unshaven Braces Chipped Gold Spaces
 Long Shoulder Clean Shave Fuzz Lower Lip Sideburns Not Applicable (N/A) Broken Crooked Missing
 N/A Buck Decayed Silver N/A

BUILD: Heavy Medium Muscular Thin N/A

DRIVER'S LICENSE #: D10047596 STATE: SOCIAL SECURITY #:

FBI # STATE ID # OTHER ID# TYPE:

EMPLOYER: OCCUPATION:

EMPLOYER'S ADDRESS: CITY, STATE, ZIP:

NAME OF SCHOOL: ATTENDANCE: Current Dropout Truant Graduate N/A

SCHOOL ADDRESS: CITY, STATE, ZIP:

Scars, Marks, Tattoos, Oddities PHOTO: Yes No PHOTOGRAPHER: ID:

| LOCATION/SIDE: | DESCRIPTION: |
|----------------|--------------|
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| | |

Vehicle Information PHOTO: Yes No PHOTOGRAPHER: ID:

LICENSE #: STATE: YEAR: VEHICLE YEAR: VIN:

MAKE: MODEL: STYLE: COLOR:

Vehicle Details:

RELATIONSHIP: Driver Passenger Owner Not Applicable R/O (Last, First):

ADDRESS: CITY, STATE, ZIP:

Alert Information (Select ALL that apply)

| | | | | | |
|--|--|--|--|--|---|
| <input type="checkbox"/> Alcoholic | <input type="checkbox"/> Deceased | <input type="checkbox"/> Epilepsy | <input type="checkbox"/> Health Risk | <input type="checkbox"/> Hemophilic | <input type="checkbox"/> Escape Risk |
| <input type="checkbox"/> Armed & Dangerous | <input type="checkbox"/> Protect Equip. Needed | <input type="checkbox"/> Martial Arts Expert | <input type="checkbox"/> Explosive Expertise | <input type="checkbox"/> Heart Condition | <input type="checkbox"/> Known to Abuse Drugs |
| <input type="checkbox"/> Medication Req'd | <input type="checkbox"/> Prohibited Possessor | <input type="checkbox"/> Sexual Predator | <input checked="" type="checkbox"/> Violent Tendencies | <input type="checkbox"/> Diabetic | <input type="checkbox"/> Suicidal |
| <input type="checkbox"/> Other: | | | | | |

Gang Membership Information Member Affiliate

GANG NAME: _____ **SECONDARY GANG:** _____

TYPE: M/C Gang Street Gang Prison Gang Extremist Other (Specify): _____

GANG LOCATION: _____ **RIVAL GANG(S):** _____

Gang Member Criteria (Select all that apply)

| | | | |
|--|---|--|--|
| <input checked="" type="checkbox"/> Clothing or Colors | <input type="checkbox"/> Paraphernalia or Photographs | <input type="checkbox"/> Witness Testimony/Statement | <i>*Other criteria could include: extensive knowledge of gang, rivals or specific member</i> |
| <input type="checkbox"/> Gang Tattoos | <input checked="" type="checkbox"/> Self Proclamation | <input type="checkbox"/> Written/Electronic Correspondence | |
| <input type="checkbox"/> Any Other Indicia, specify*: | | | |

Field Interview **DATE OF CONTACT:** 10/17/2028 **TIME:** 2040 hrs **LOCATION PHOTO:** Yes No

LOCATION/ADDRESS: 1902 S 16th st **CITY, STATE:** Phoenix AZ **COUNTY:** Maricopa

CLOTHING & JEWELRY (type/color): long sleeve blue shirt, black pants

CRIME AND/OR REASON FOR CONTACT: Riot, Unlawful Assembly, Agg Assault Police Officer, Hindering Prosecution, obstructing a Highway / Public thoroughfare.

INTERVIEW NOTES:

Marched in Downtown Phoenix area on streets w/ numerous other ACPB members chanting ACPB (All cops are Bastards) while violating the listed crimes

| WEAPON TYPE: | MAKE: | MODEL: | SERIAL #: | FINISH: |
|--------------|-------|--------|-----------|---------|
| | | | | |

| AFFILIATES/ASSOCIATES | | LAST: | FIRST: | DOB: | RELATIONSHIP: |
|---|--|-------|--------|------|---------------|
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |

REVIEWED BY: _____ **ID:** _____ **AGENCY ORI#:** _____

Alert Information (Select ALL that apply)

Alcoholic Deceased Epilepsy Health Risk Hemophiliac Escape Risk
 Armed & Dangerous Protect Equip. Needed Martial Arts Expert Explosive Expertise Heart Condition Known to Abuse Drugs
 Medication Req'd Prohibited Possessor Sexual Predator Violent Tendencies Diabetic Suicidal
 Other:

Gang Membership Information Member Affiliate

GANG NAME: ACAB SECONDARY GANG:

TYPE: M/C Gang Street Gang Prison Gang Extremist Other (Specify):

GANG LOCATION: RIVAL GANG(S):

Gang Member Criteria (Select all that apply) *Other criteria could include:

Clothing or Colors Paraphernalia or Photographs Witness Testimony/Statement extensive knowledge of gang,
 Gang Tattoos Self Proclamation Written/Electronic Correspondence rivals or specific member
 Any Other Indicia, specify*:

Field Interview DATE OF CONTACT: 10-17-2020 TIME: 2040 hr LOCATION PHOTO: Yes No

LOCATION/ADDRESS: 1902 S 16th Street CITY, STATE: Phoenix AZ COUNTY: MARICOPA

CLOTHING & JEWELRY (type/color): All Black Clothing / Blk Goggles & Blk Head Cover

CRIME AND/OR REASON FOR CONTACT: Riot, Unlawful Assembly, Agg Assault on Officer, Hindering prosecution, obstructing a highway/public thoroughfare

INTERVIEW NOTES:

marched in Downtown Phoenix area on streets w/ numerous other ACAB members, chanting ACAB (All Cops Are Bastards) while violating the listed crimes

| WEAPON TYPE: | MAKE: | MODEL: | SERIAL #: | FINISH: |
|--------------|-------|--------|-----------|---------|
| | | | | |

| AFFILIATES/ASSOCIATES | | LAST: | FIRST: | DOB: | RELATIONSHIP: |
|---|--|-------|--------|------|---------------|
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |

REVIEWED BY: ID: AGENCY ORI#:

Alert Information (Select ALL that apply)

| | | | | | |
|--|--|--|--|--|---|
| <input type="checkbox"/> Alcoholic | <input type="checkbox"/> Deceased | <input type="checkbox"/> Epilepsy | <input type="checkbox"/> Health Risk | <input type="checkbox"/> Hemophilia | <input type="checkbox"/> Escape Risk |
| <input type="checkbox"/> Armed & Dangerous | <input type="checkbox"/> Protect Equip. Needed | <input type="checkbox"/> Martial Arts Expert | <input type="checkbox"/> Explosive Expertise | <input type="checkbox"/> Heart Condition | <input type="checkbox"/> Known to Abuse Drugs |
| <input type="checkbox"/> Medication Req'd | <input type="checkbox"/> Prohibited Possessor | <input type="checkbox"/> Sexual Predator | <input type="checkbox"/> Violent Tendencies | <input type="checkbox"/> Diabetic | <input type="checkbox"/> Suicidal |
| <input type="checkbox"/> Other: | | | | | |

Gang Membership Information Member Affiliate

GANG NAME: ACAB (ALL COPS ARE BASTARDS) SECONDARY GANG: /

TYPE: M/C Gang Street Gang Prison Gang Extremist Other (Specify):

GANG LOCATION: RIVAL GANG(S):

Gang Member Criteria (Select all that apply)

| | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Clothing or Colors | <input type="checkbox"/> Paraphernalia or Photographs | <input checked="" type="checkbox"/> Witness Testimony/Statement | <i>*Other criteria could include: extensive knowledge of gang, rivals or specific member</i> |
| <input type="checkbox"/> Gang Tattoos | <input checked="" type="checkbox"/> Self Proclamation | <input type="checkbox"/> Written/Electronic Correspondence | |
| <input type="checkbox"/> Any Other Indicia, specify*: | | | |

Field Interview DATE OF CONTACT: 10-17-2020 TIME: 2040 LOCATION PHOTO: Yes No

LOCATION/ADDRESS: 100 W. VANBAREN ST CITY, STATE: PHX COUNTY: Maricopa

CLOTHING & JEWELRY (type/color): ALL BLACK

CRIME AND/OR REASON FOR CONTACT: RIOT, UNLAWFUL ASSEMBLY

INTERVIEW NOTES:

Liley has interviewed w/ several officers claiming to be a member of ACAB and for a while was working with police because he felt that ACAB was becoming too violent. He has attended several meetings w/ ACAB where they planned to steal the LRAD and be more violent w/ police. On 10-17-2020 he was dressed in all black clothing marching in the street chanting "ACAB" "All Cops Are Bastards"

| WEAPON TYPE: | MAKE: | MODEL: | SERIAL #: | FINISH: |
|--------------|-------|--------|-----------|---------|
| | | | | |

| AFFILIATES/ASSOCIATES | | LAST: | FIRST: | DOB: | RELATIONSHIP: |
|---|--|-------|--------|------|---------------|
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |

REVIEWED BY: ID: AGENCY ORI#:

Alert Information (Select ALL that apply)

- | | | | | | |
|--|--|--|--|--|---|
| <input type="checkbox"/> Alcoholic | <input type="checkbox"/> Deceased | <input type="checkbox"/> Epilepsy | <input type="checkbox"/> Health Risk | <input type="checkbox"/> Hemophilic | <input type="checkbox"/> Escape Risk |
| <input type="checkbox"/> Armed & Dangerous | <input type="checkbox"/> Protect Equip. Needed | <input type="checkbox"/> Martial Arts Expert | <input type="checkbox"/> Explosive Expertise | <input type="checkbox"/> Heart Condition | <input type="checkbox"/> Known to Abuse Drugs |
| <input type="checkbox"/> Medication Req'd | <input type="checkbox"/> Prohibited Possessor | <input type="checkbox"/> Sexual Predator | <input type="checkbox"/> Violent Tendencies | <input type="checkbox"/> Diabetic | <input type="checkbox"/> Suicidal |
| <input type="checkbox"/> Other: | | | | | |

Gang Membership Information Member Affiliate

GANG NAME: ACAB **SECONDARY GANG:**

TYPE: M/C Gang Street Gang Prison Gang Extremist Other (Specify):

GANG LOCATION: **RIVAL GANG(S):**

Gang Member Criteria (Select all that apply)

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> Clothing or Colors | <input type="checkbox"/> Paraphernalia or Photographs | <input type="checkbox"/> Witness Testimony/Statement |
| <input type="checkbox"/> Gang Tattoos | <input checked="" type="checkbox"/> Self Proclamation | <input type="checkbox"/> Written/Electronic Correspondence |
| <input type="checkbox"/> Any Other Indicia, specify*: | | |

**Other criteria could include:
extensive knowledge of gang,
rivals or specific member*

Field Interview **DATE OF CONTACT:** Oct 17, 2020 **TIME:** 2040 **LOCATION PHOTO:** Yes No

LOCATION/ADDRESS: 1902 S 16th Street **CITY, STATE:** Phoenix, AZ **COUNTY:** Maricopa

CLOTHING & JEWELRY (type/color): Black jeans, black T-shirt

CRIME AND/OR REASON FOR CONTACT: Agg Assault on an Officer, Obst Pub Thoroughfare, Hindering, Unlawful Assembly, Riot

INTERVIEW NOTES:

Dominic was part of a group that took over the city streets in downtown Phoenix and marched in the streets chanting, "ACAB, all cops are bastards." The members of this group wore primarily all black clothing and possessed black umbrellas.

| | | | | |
|---|--------------|---------------------|------------------|----------------------|
| WEAPON TYPE: | MAKE: | MODEL: | SERIAL #: | FINISH: |
| | | | | |
| AFFILIATES/ASSOCIATES | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| REVIEWED BY: | ID: | AGENCY ORI#: | | |

Alert Information (Select ALL that apply)

- Alcoholic Deceased Epilepsy Health Risk Hemophiliac Escape Risk
 Armed & Dangerous Protect Equip. Needed Martial Arts Expert Explosive Expertise Heart Condition Known to Abuse Drugs
 Medication Req'd Prohibited Possessor Sexual Predator Violent Tendencies Diabetic Suicidal
 Other:

Gang Membership Information Member Affiliate

GANG NAME: **ACAB** SECONDARY GANG:

TYPE: M/C Gang Street Gang Prison Gang Extremist Other (Specify):

GANG LOCATION: RIVAL GANG(S):

Gang Member Criteria (Select all that apply)

- Clothing or Colors Paraphernalia or Photographs Witness Testimony/Statement
 Gang Tattoos Self Proclamation Written/Electronic Correspondence
 Any Other Indicia, specify*:

**Other criteria could include:
extensive knowledge of gang,
rivals or specific member*

Field Interview DATE OF CONTACT: **10-17-2020** TIME: **2040 Hr** LOCATION PHOTO: Yes No

LOCATION/ADDRESS: **1902 S 16th Street** CITY, STATE: **Phoenix, AZ** COUNTY: **Maricopa**

CLOTHING & JEWELRY (type/color): **Black long sleeve shirt, Black pants, Black neck/Face covering**

CRIME AND/OR REASON FOR CONTACT: **Real, Unlawful Assembly, Agg Assault on Officers, Hindering Prosecution, obstructing a Highway/public thoroughfare.**

INTERVIEW NOTES:

*Marched in Downtown Phoenix area on streets
w/ numerous other ACAB members (All cops are bastards) chanting ACAB
while violating the listed crimes.*

| WEAPON TYPE: | MAKE: | MODEL: | SERIAL #: | FINISH: |
|---|-------|--------------|-----------|---------------|
| | | | | |
| AFFILIATES/ASSOCIATES | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| REVIEWED BY: | ID: | AGENCY ORI#: | | |

Alert Information (Select ALL that apply)

- | | | | | | |
|--|--|--|--|--|---|
| <input type="checkbox"/> Alcoholic | <input type="checkbox"/> Deceased | <input type="checkbox"/> Epilepsy | <input type="checkbox"/> Health Risk | <input type="checkbox"/> Hemophiliac | <input type="checkbox"/> Escape Risk |
| <input type="checkbox"/> Armed & Dangerous | <input type="checkbox"/> Protect Equip. Needed | <input type="checkbox"/> Martial Arts Expert | <input type="checkbox"/> Explosive Expertise | <input type="checkbox"/> Heart Condition | <input type="checkbox"/> Known to Abuse Drugs |
| <input type="checkbox"/> Medication Req'd | <input type="checkbox"/> Prohibited Possessor | <input type="checkbox"/> Sexual Predator | <input checked="" type="checkbox"/> Violent Tendencies | <input type="checkbox"/> Diabetic | <input type="checkbox"/> Suicidal |
| <input type="checkbox"/> Other: | | | | | |

Gang Membership Information

Member Affiliate

GANG NAME: ACAB SECONDARY GANG:

TYPE: M/C Gang Street Gang Prison Gang Extremist Other (Specify):

GANG LOCATION: RIVAL GANG(S):

Gang Member Criteria

(Select all that apply)

**Other criteria could include:*

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> Clothing or Colors | <input type="checkbox"/> Paraphernalia or Photographs | <input type="checkbox"/> Witness Testimony/Statement |
| <input type="checkbox"/> Gang Tattoos | <input checked="" type="checkbox"/> Self Proclamation | <input type="checkbox"/> Written/Electronic Correspondence |

*extensive knowledge of gang,
rivals or specific member*

Any Other Indicia, specify*:

Field Interview

DATE OF CONTACT: 10-17-20 TIME: 2040 HRS LOCATION PHOTO: Yes No

LOCATION/ADDRESS: 1902 S. 16TH ST. CITY, STATE: PHX AZ COUNTY: MARICOPA

CLOTHING & JEWELRY (type/color): ALL BLACK CLOTHING.

CRIME AND/OR REASON FOR CONTACT: Abh ASLT, RIOT, OBST HWY, HAND. PROS, UNLAW ASSEMBLY.

INTERVIEW NOTES:

MARCHED AROUND DOWNTOWN PHOENIX WITH OTHER MEMBERS, CHANTING, "A.C.A.B., ALL COPS ARE BASTARDS", AND WEARING ALL BLACK CLOTHING.

| | | | | |
|---|-------|--------------|-----------|---------------|
| WEAPON TYPE: | MAKE: | MODEL: | SERIAL #: | FINISH: |
| | | | | |
| AFFILIATES/ASSOCIATES | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| REVIEWED BY: | ID: | AGENCY ORI#: | | |

GANG MEMBER INFORMATION CARD

Shaded fields are required

Today's Date: Oct 31, 2020

OFFICER INFO - NAME: Scott ID: 6158 AGENCY: Phoenix PD PHONE #: 602-534-6432

| | | | | |
|---|---|---|---|---|
| Subject Information | | PHOTO: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | PHOTOGRAPHER: <u>Williams-Castillo</u> | ID: <u>10079</u> |
| LAST NAME: <u>Kaper</u> | | FIRST NAME: <u>Amy</u> | | MIDDLE: <u>Beth</u> |
| DOB: <u>12/1/1991</u> | GENDER: <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female | HEIGHT: <u>5'06"</u> | WEIGHT: <u>130</u> | |
| GANG NAME: <u>ACAB</u> | | DATE OF CONTACT: <u>10/17/2020</u> | | |
| ALIAS: | | MONIKER: | | |
| ADDRESS: <u>66 E Olive Avenue Apt. #260</u> | | CITY, STATE, ZIP: <u>Gilbert, AZ 85234</u> | | |
| ADDRESS PHOTO: <input type="checkbox"/> Yes <input type="checkbox"/> No | | PHOTOGRAPHER: | | ID: |
| PHONE #: <u>240-925-4347</u> | | PHONE #: | | |
| E-MAIL: | | SCREEN NAME: | | |
| RACE: | <input type="checkbox"/> Asian <input type="checkbox"/> Indian <input type="checkbox"/> Hispanic <input checked="" type="checkbox"/> White <input type="checkbox"/> Black | COMPLEXION: | <input type="checkbox"/> Acne/Pocked <input type="checkbox"/> Freckled <input type="checkbox"/> Medium <input type="checkbox"/> Sallow | |
| | <input type="checkbox"/> Other (Specify): | | <input type="checkbox"/> Dark <input checked="" type="checkbox"/> Light/Fair <input type="checkbox"/> Pale <input type="checkbox"/> N/A | |
| DESCENT (lineage): | | NATIONALITY (citizenship): <u>US</u> | POB (city, state, country): <u>CA</u> | |
| HAIR: | | HAIR TYPE: (Select all that apply) | | EYES: |
| <input type="checkbox"/> Black <input type="checkbox"/> Gray | <input type="checkbox"/> Afro <input type="checkbox"/> Butch <input type="checkbox"/> Dreadlocks <input type="checkbox"/> Military <input type="checkbox"/> Shaved <input type="checkbox"/> Wavy | <input type="checkbox"/> Black <input type="checkbox"/> Green <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Blonde <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Blue <input type="checkbox"/> Hazel |
| <input type="checkbox"/> Blue <input type="checkbox"/> Red | <input type="checkbox"/> Bald <input type="checkbox"/> Combed Back <input type="checkbox"/> Flattop <input type="checkbox"/> Ponytail <input checked="" type="checkbox"/> Straight <input type="checkbox"/> Wig | <input type="checkbox"/> Brown <input type="checkbox"/> Multicolor | <input type="checkbox"/> Braided <input type="checkbox"/> Corn Rows <input type="checkbox"/> Greasy <input type="checkbox"/> Processed <input type="checkbox"/> Thick | <input type="checkbox"/> Brown <input type="checkbox"/> Pink |
| <input type="checkbox"/> Brown <input type="checkbox"/> Silver | <input type="checkbox"/> Bushy <input type="checkbox"/> Curly <input type="checkbox"/> Jeri curl <input type="checkbox"/> Receding <input type="checkbox"/> Thinning | | | |
| HAIR LENGTH: | | FACIAL HAIR: (Select all that apply) | | TEETH: (Select all that apply) |
| <input type="checkbox"/> Collar <input type="checkbox"/> Short | <input type="checkbox"/> Beard <input type="checkbox"/> Fu Manchu <input type="checkbox"/> Goatee <input type="checkbox"/> Mustache <input checked="" type="checkbox"/> Unshaven | <input type="checkbox"/> Braces <input type="checkbox"/> Chipped <input type="checkbox"/> Gold <input type="checkbox"/> Spaces | <input checked="" type="checkbox"/> Long <input type="checkbox"/> Shoulder | <input type="checkbox"/> Broken <input type="checkbox"/> Crooked <input type="checkbox"/> Missing |
| <input type="checkbox"/> N/A | <input type="checkbox"/> Clean Shave <input type="checkbox"/> Fuzz <input type="checkbox"/> Lower Lip <input type="checkbox"/> Sideburns <input checked="" type="checkbox"/> Not Applicable (N/A) | <input type="checkbox"/> Buck <input type="checkbox"/> Decayed <input type="checkbox"/> Silver <input type="checkbox"/> N/A | | |
| | | BUILD: <input type="checkbox"/> Heavy <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Muscular <input type="checkbox"/> Thin <input type="checkbox"/> N/A | | |
| DRIVER'S LICENSE #: <u>L64111700</u> | | STATE: <u>AZ</u> | SOCIAL SECURITY #: | DOC #: |
| FBI #: | STATE ID #: | OTHER ID#: | | TYPE: |
| EMPLOYER: | | OCCUPATION: | | |
| EMPLOYER'S ADDRESS: | | CITY, STATE, ZIP: | | |
| NAME OF SCHOOL: | | ATTENDANCE: | <input type="checkbox"/> Current <input type="checkbox"/> Dropout <input type="checkbox"/> Truant <input type="checkbox"/> Graduate <input type="checkbox"/> N/A | |
| SCHOOL ADDRESS: | | CITY, STATE, ZIP: | | |
| Scars, Marks, Tattoos, Oddities | | PHOTO: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | PHOTOGRAPHER: <u>Williams-Castillo</u> | ID: <u>10079</u> |
| LOCATION/SIDE: | DESCRIPTION: | | | |
| <u>right arm</u> | <u>tattoo of flowers</u> | | | |
| <u>left wrist</u> | <u>tattoo of 1917</u> | | | |
| <u>right wrist</u> | <u>tattoo of 60</u> | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Vehicle Information | | PHOTO: <input type="checkbox"/> Yes <input type="checkbox"/> No | PHOTOGRAPHER: | ID: |
| LICENSE #: | STATE: | YEAR: | VEHICLE YEAR: | VIN: |
| MAKE: | MODEL: | STYLE: | COLOR: | |
| Vehicle Details: | | | | |
| RELATIONSHIP: | <input type="checkbox"/> Driver <input type="checkbox"/> Passenger <input type="checkbox"/> Owner <input type="checkbox"/> Not Applicable | | R/O (Last, First): | |
| ADDRESS: | | | CITY, STATE, ZIP: | |

Alert Information (Select ALL that apply)

- Alcoholic Deceased Epilepsy Health Risk Hemophiliac Escape Risk
 Armed & Dangerous Protect Equip. Needed Martial Arts Expert Explosive Expertise Heart Condition Known to Abuse Drugs
 Medication Req'd Prohibited Possessor Sexual Predator Violent Tendencies Diabetic Suicidal
 Other:

Gang Membership Information Member Affiliate

GANG NAME: ACAB **SECONDARY GANG:**

TYPE: M/C Gang Street Gang Prison Gang Extremist Other (Specify):

GANG LOCATION: **RIVAL GANG(S):**

Gang Member Criteria (Select all that apply)

**Other criteria could include:
extensive knowledge of gang,
rivals or specific member*

- Clothing or Colors Paraphernalia or Photographs Witness Testimony/Statement
 Gang Tattoos Self Proclamation Written/Electronic Correspondence
 Any Other Indicia, specify*:

Field Interview **DATE OF CONTACT:** Oct 17, 2020 **TIME:** 2040 **LOCATION PHOTO:** Yes No

LOCATION/ADDRESS: 1902 S 16th Street **CITY, STATE:** Phoenix, AZ **COUNTY:** Maricopa

CLOTHING & JEWELRY (type/color): Black pants, black hoodie TANK TOP

CRIME AND/OR REASON FOR CONTACT: Agg Assault on an Officer, Obst Pub Thoroughfare, Hindering, Unlawful Assembly, Riot

INTERVIEW NOTES:

Amy was part of a group that took over the city streets in downtown Phoenix and marched in the streets chanting, "ACAB, all cops are bastards." The members of this group wore primarily all black clothing and possessed black umbrellas.

| WEAPON TYPE: | MAKE: | MODEL: | SERIAL #: | FINISH: |
|--------------|-------|--------|-----------|---------|
| | | | | |

AFFILIATES/ASSOCIATES

| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
|---|-------|--------|------|---------------|
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | |

REVIEWED BY: **ID:** **AGENCY ORI #:**

Alert Information (Select ALL that apply)

| | | | | | |
|--|--|--|--|--|---|
| <input type="checkbox"/> Alcoholic | <input type="checkbox"/> Deceased | <input type="checkbox"/> Epilepsy | <input type="checkbox"/> Health Risk | <input type="checkbox"/> Hemophillic | <input type="checkbox"/> Escape Risk |
| <input type="checkbox"/> Armed & Dangerous | <input type="checkbox"/> Protect Equip. Needed | <input type="checkbox"/> Martial Arts Expert | <input type="checkbox"/> Explosive Expertise | <input type="checkbox"/> Heart Condition | <input type="checkbox"/> Known to Abuse Drugs |
| <input type="checkbox"/> Medication Req'd | <input type="checkbox"/> Prohibited Possessor | <input type="checkbox"/> Sexual Predator | <input checked="" type="checkbox"/> Violent Tendencies | <input type="checkbox"/> Diabetic | <input type="checkbox"/> Suicidal |
| <input type="checkbox"/> Other: | | | | | |

Gang Membership Information Member Affiliate

GANG NAME: ACAB SECONDARY GANG:

TYPE: M/C Gang Street Gang Prison Gang Extremist Other (Specify):

GANG LOCATION: RIVAL GANG(S):

Gang Member Criteria (Select all that apply)

| | | | |
|--|---|--|--|
| <input checked="" type="checkbox"/> Clothing or Colors | <input type="checkbox"/> Paraphernalia or Photographs | <input type="checkbox"/> Witness Testimony/Statement | <i>*Other criteria could include: extensive knowledge of gang, rivals or specific member</i> |
| <input type="checkbox"/> Gang Tattoos | <input checked="" type="checkbox"/> Self Proclamation | <input type="checkbox"/> Written/Electronic Correspondence | |
| <input type="checkbox"/> Any Other Indicia, specify*: | | | |

Field Interview DATE OF CONTACT: 10-17-20 TIME: 2040 HRS LOCATION PHOTO: Yes No

LOCATION/ADDRESS: 1902 S. 16TH ST. CITY, STATE: PHX AZ COUNTY: MARICOPA

CLOTHING & JEWELRY (type/color): ALL BLACK CLOTHING

CRIME AND/OR REASON FOR CONTACT: AGG ASLT, RIOT, OBST HWY, HIND. PROB., UNLAW ASSEMBLY.

INTERVIEW NOTES:

MARCHED AROUND DOWNTOWN PHOENIX WITH OTHER MEMBERS, CHANTING, "ACAB., ALL COPS ARE BASTARDS," AND WEARING ALL BLACK CLOTHING.

| | | | | |
|--------------|-------|--------|-----------|---------|
| WEAPON TYPE: | MAKE: | MODEL: | SERIAL #: | FINISH: |
| | | | | |

| AFFILIATES/ASSOCIATES | | LAST: | FIRST: | DOB: | RELATIONSHIP: |
|---|--|-------|--------|------|---------------|
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |

REVIEWED BY: ID: AGENCY ORI #:

| | | | | | |
|---|---|--|--|---|---|
| Alert Information (Select ALL that apply) | | | | | |
| <input type="checkbox"/> Alcoholic | <input type="checkbox"/> Deceased | <input type="checkbox"/> Epilepsy | <input type="checkbox"/> Health Risk | <input type="checkbox"/> Hemophilic | <input type="checkbox"/> Escape Risk |
| <input type="checkbox"/> Armed & Dangerous | <input type="checkbox"/> Protect Equip. Needed | <input type="checkbox"/> Martial Arts Expert | <input type="checkbox"/> Explosive Expertise | <input type="checkbox"/> Heart Condition | <input type="checkbox"/> Known to Abuse Drugs |
| <input type="checkbox"/> Medication Req'd | <input type="checkbox"/> Prohibited Possessor | <input type="checkbox"/> Sexual Predator | <input type="checkbox"/> Violent Tendencies | <input type="checkbox"/> Diabetic | <input type="checkbox"/> Suicidal |
| <input type="checkbox"/> Other: | | | | | |
| Gang Membership Information <input checked="" type="checkbox"/> Member <input type="checkbox"/> Affiliate | | | | | |
| GANG NAME: <u>ACAB</u> | | | SECONDARY GANG: | | |
| TYPE: <input type="radio"/> M/C Gang <input type="radio"/> Street Gang <input type="radio"/> Prison Gang <input checked="" type="radio"/> Extremist <input type="radio"/> Other (Specify): | | | | | |
| GANG LOCATION: | | | RIVAL GANG(S): | | |
| Gang Member Criteria (Select all that apply) | | | | | <i>*Other criteria could include:</i> |
| <input checked="" type="checkbox"/> Clothing or Colors | <input type="checkbox"/> Paraphernalia or Photographs | <input type="checkbox"/> Witness Testimony/Statement | | <i>extensive knowledge of gang,</i> | |
| <input type="checkbox"/> Gang Tattoos | <input checked="" type="checkbox"/> Self Proclamation | <input type="checkbox"/> Written/Electronic Correspondence | | <i>rivals or specific member</i> | |
| <input type="checkbox"/> Any Other Indicia, specify*: | | | | | |
| Field Interview | | DATE OF CONTACT: <u>10/17/20</u> | TIME: <u>2040</u> | LOCATION PHOTO: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| LOCATION/ADDRESS: <u>1902 S 16th ST</u> | | CITY, STATE: <u>PHX, AZ</u> | | COUNTY: <u>MARICOPA</u> | |
| CLOTHING & JEWELRY (type/color): | | <u>BLACK SHIRT, BLACK SHORTS, & BLACK SHOES</u> | | | |
| CRIME AND/OR REASON FOR CONTACT: <u>AGG ASSAULT ON P.O., RIOT, HINDERING, OBSTRUCTION, UNLAWFUL ASS.</u> | | | | | |
| INTERVIEW NOTES: | | | | | |
| <p>MATHANIEL WAS PART OF A GROUP THAT TOOK OVER THE STREETS OF DOWNTOWN PHOENIX, MARCHED AROUND & CHANTED "ACAB," "ALL COPS ARE BASTARDS." THE MEMBERS OF THIS GROUP DRESSED IN PRIMARILY ALL BLACK CLOTHING AND CARRIED BLACK UMBRELLAS.</p> | | | | | |
| WEAPON TYPE: | | MAKE: | MODEL: | SERIAL #: | FINISH: |
| | | | | | |
| AFFILIATES/ASSOCIATES | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: | |
| REVIEWED BY: | | | ID: | AGENCY ORI #: | |

Alert Information (Select ALL that apply)

| | | | | | |
|--|--|--|--|--|---|
| <input type="checkbox"/> Alcoholic | <input type="checkbox"/> Deceased | <input type="checkbox"/> Epilepsy | <input type="checkbox"/> Health Risk | <input type="checkbox"/> Hemophilic | <input type="checkbox"/> Escape Risk |
| <input type="checkbox"/> Armed & Dangerous | <input type="checkbox"/> Protect Equip. Needed | <input type="checkbox"/> Martial Arts Expert | <input type="checkbox"/> Explosive Expertise | <input type="checkbox"/> Heart Condition | <input type="checkbox"/> Known to Abuse Drugs |
| <input type="checkbox"/> Medication Req'd | <input type="checkbox"/> Prohibited Possessor | <input type="checkbox"/> Sexual Predator | <input type="checkbox"/> Violent Tendencies | <input type="checkbox"/> Diabetic | <input type="checkbox"/> Suicidal |
| <input type="checkbox"/> Other: | | | | | |

Gang Membership Information Member Affiliate

GANG NAME: ACAB **SECONDARY GANG:**

TYPE: M/C Gang Street Gang Prison Gang Extremist Other (Specify):

GANG LOCATION: **RIVAL GANG(S):**

Gang Member Criteria (Select all that apply)

| | | | |
|--|---|--|--|
| <input checked="" type="checkbox"/> Clothing or Colors | <input type="checkbox"/> Paraphernalia or Photographs | <input type="checkbox"/> Witness Testimony/Statement | <i>*Other criteria could include: extensive knowledge of gang, rivals or specific member</i> |
| <input checked="" type="checkbox"/> Gang Tattoos | <input checked="" type="checkbox"/> Self Proclamation | <input type="checkbox"/> Written/Electronic Correspondence | |
| <input type="checkbox"/> Any Other Indicia, specify*: | | | |

Field Interview **DATE OF CONTACT:** Oct 17, 2020 **TIME:** 2040 **LOCATION PHOTO:** Yes No

LOCATION/ADDRESS: 1902 S 16th Street **CITY, STATE:** Phoenix, AZ **COUNTY:** Maricopa

CLOTHING & JEWELRY (type/color): Black pants, black hoodie

CRIME AND/OR REASON FOR CONTACT: Agg Assault on an Officer, Obst Pub Thoroughfare, Hindering, Unlawful Assembly, Riot

INTERVIEW NOTES:

Kaleb was part of a group that took over the city streets in downtown Phoenix and marched in the streets chanting, "ACAB, all cops are bastards." The members of this group wore primarily all black clothing and possessed black umbrellas.

Kaleb admitted to Officer Williams-Castillo #11079 that the dots on his wrist represented ACAB.

| WEAPON TYPE: | MAKE: | MODEL: | SERIAL #: | FINISH: |
|--------------|-------|--------|-----------|---------|
| | | | | |

| AFFILIATES/ASSOCIATES | | LAST: | FIRST: | DOB: | RELATIONSHIP: |
|---|--|-------|--------|------|---------------|
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |

REVIEWED BY: **ID:** **AGENCY ORI#:**

GANG MEMBER INFORMATION CARD

Shaded fields are required

OFFICER INFO - NAME: C. Hunzinger ID: 6029 AGENCY: PHX P.D. Today's Date: 10/30/2020 PHONE #: (602) 495-5055

Subject Information PHOTO: Yes No PHOTOGRAPHER: ID:

LAST NAME: Mills FIRST NAME: Rebekah MIDDLE: DeLma

DOB: 06/23/2003 GENDER: Male Female HEIGHT: 6'-4" WEIGHT: 163lbs

GANG NAME: ACAB DATE OF CONTACT: 10/17/2020

ALIAS: MONIKER:

ADDRESS: 788 N. Pleasant Dr. CITY, STATE, ZIP: Chandler, AZ. 85225

ADDRESS PHOTO: Yes No PHOTOGRAPHER: ID:

PHONE #: 480-204-2003 cell PHONE #:

E-MAIL: SCREEN NAME:

RACE: Asian Indian Hispanic White Black COMPLEXION: Acne/Pocked Freckled Medium Sallow

DESCENT(lineage): unk NATIONALITY(citizenship): U.S. POB (city, state, country):

HAIR: HAIR TYPE: (Select all that apply) EYES:

Black Gray Afro Butch Dreadlocks Military Shaved Wavy Black Green Other
 Blonde Other Bald Combed Back Flattop Ponytail Straight Wig Blue Hazel
 Blue Red Braided Corn Rows Greasy Processed Thick Brown Multicolor
 Brown Silver Bushy Curly Jeri curl Receding Thinning Gray Pink

HAIR LENGTH: FACIAL HAIR: (Select all that apply) TEETH: (Select all that apply)

Collar Short Beard Fu Manchu Goatee Mustache Unshaven Braces Chipped Gold Spaces
 Long Shoulder Clean Shave Fuzz Lower Lip Sideburns Not Applicable (N/A) Broken Crooked Missing
 N/A Buck Decayed Silver N/A
 BUILD: Heavy Medium Muscular Thin N/A

DRIVER'S LICENSE #: D11096043 STATE: SOCIAL SECURITY #: [REDACTED] DOC #:

FBI #: STATE ID #: OTHER ID #: TYPE:

EMPLOYER: OCCUPATION: Student

EMPLOYER'S ADDRESS: CITY, STATE, ZIP:

NAME OF SCHOOL: PRIMAVERA ONLINE ATTENDANCE: Current Dropout Truant Graduate N/A

SCHOOL ADDRESS: CITY, STATE, ZIP:

Scars, Marks, Tattoos, Oddities PHOTO: Yes No PHOTOGRAPHER: ID:

| LOCATION/SIDE: | DESCRIPTION: |
|----------------|--------------|
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| | |
| | |

Vehicle Information PHOTO: Yes No PHOTOGRAPHER: ID:

LICENSE #: STATE: YEAR: VEHICLE YEAR: VIN:

MAKE: MODEL: STYLE: COLOR:

Vehicle Details:

RELATIONSHIP: Driver Passenger Owner Not Applicable R/O (Last, First):

ADDRESS: CITY, STATE, ZIP:

Alert Information (Select ALL that apply)

Alcoholic Deceased Epilepsy Health Risk Hemophiliac Escape Risk
 Armed & Dangerous Protect Equip. Needed Martial Arts Expert Explosive Expertise Heart Condition Known to Abuse Drugs
 Medication Req'd Prohibited Possessor Sexual Predator Violent Tendencies Diabetic Suicidal
 Other:

Gang Membership Information Member Affiliate

GANG NAME: ACAB SECONDARY GANG:

TYPE: M/C Gang Street Gang Prison Gang Extremist Other (Specify):

GANG LOCATION: RIVAL GANG(S):

Gang Member Criteria (Select all that apply)

Clothing or Colors Paraphernalia or Photographs Witness Testimony/Statement
 Gang Tattoos Self Proclamation Written/Electronic Correspondence
 Any Other Indicia, specify*:

*Other criteria could include:
extensive knowledge of gang,
rivals or specific member

Field Interview DATE OF CONTACT: 10/17/2020 TIME: 2:40 hrs LOCATION PHOTO: Yes No

LOCATION/ADDRESS: 1902 S 16th St CITY, STATE: PHX. AZ COUNTY: Maricopa

CLOTHING & JEWELRY (type/color): All Black clothing Black shirt & Black Pants

CRIME AND/OR REASON FOR CONTACT: Riot, Unlawful Assembly, Agg Assault on Officer, Hindering Prosecution, Obstruction of Highway/Public Thoroughfare.

INTERVIEW NOTES:

Marched in Downtown Phoenix area on streets of numerous other ACAB members chanting ACAB (All Cops are Bastards) while violating the listed crimes.

| WEAPON TYPE: | MAKE: | MODEL: | SERIAL #: | FINISH: |
|---|-------|--------------|-----------|---------------|
| | | | | |
| AFFILIATES/ASSOCIATES | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| REVIEWED BY: | ID: | AGENCY ORI#: | | |

Alert Information (Select ALL that apply)

Alcoholic Deceased Epilepsy Health Risk Hemophilic Escape Risk
 Armed & Dangerous Protect Equip. Needed Martial Arts Expert Explosive Expertise Heart Condition Known to Abuse Drugs
 Medication Req'd Prohibited Possessor Sexual Predator Violent Tendencies Diabetic Suicidal
 Other:

Gang Membership Information Member Affiliate

GANG NAME: ACAB SECONDARY GANG:

TYPE: M/C Gang Street Gang Prison Gang Extremist Other (Specify):

GANG LOCATION: RIVAL GANG(S):

Gang Member Criteria (Select all that apply)

Clothing or Colors Paraphernalia or Photographs Witness Testimony/Statement
 Gang Tattoos Self Proclamation Written/Electronic Correspondence
 Any Other Indicia, specify*:

**Other criteria could include: extensive knowledge of gang, rivals or specific member*

Field Interview DATE OF CONTACT: 10-17-20 TIME: 2040 HRS. LOCATION PHOTO: Yes No

LOCATION/ADDRESS: 1902 S. 16TH ST. CITY, STATE: PHX AZ COUNTY: MARICOPA

CLOTHING & JEWELRY (type/color): ALL BLACK CLOTHING.

CRIME AND/OR REASON FOR CONTACT: AGG ASLT on PD, RIOT, HND PRS, OBST HWY, UNLAW ASSEMBLY.

INTERVIEW NOTES:

MARCHED AROUND DOWNTOWN PHOENIX WITH OTHER MEMBERS CHANTING, "ACAB, ALL COPS ARE BASTARDS," AND WEARING BLACK CLOTHING.

| WEAPON TYPE: | MAKE: | MODEL: | SERIAL #: | FINISH: |
|--------------|-------|--------|-----------|---------|
| | | | | |

| AFFILIATES/ASSOCIATES | | LAST: | FIRST: | DOB: | RELATIONSHIP: |
|---|--|-------|--------|------|---------------|
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |

REVIEWED BY: ID: AGENCY ORI #:

GANG MEMBER INFORMATION CARD

Shaded fields are required

OFFICER INFO - NAME: Doug McBride ID: 6187 AGENCY: Pt. P.D. Today's Date: 10-30-2020 PHONE #: 802 448 2927

Subject Information PHOTO: Yes No PHOTOGRAPHER: Off. CASTILLO ID: 10079

LAST NAME: RATNAM FIRST NAME: SUVARNA MIDDLE: SHEILA

DOB: 0303 95 GENDER: Male Female HEIGHT: 508 WEIGHT: 152

GANG NAME: ACAB (ALICOPS ARE BASTARDS) DATE OF CONTACT: 10-17-2020

ALIAS: Su MONIKER:

ADDRESS: UNKNOWN CLAIMS TO BE TRANSIENT CITY, STATE, ZIP:

ADDRESS PHOTO: Yes No PHOTOGRAPHER: ID:

PHONE #: 301 956 4728 PHONE #:

E-MAIL: SCREEN NAME:

RACE: Asian Indian Hispanic White Black COMPLEXION: Acne/Pocked Freckled Medium Sallow Other (Specify): Dark Light/Fair Pale N/A

DESCENT (lineage): NATIONALITY (citizenship): POB (city, state, country):

HAIR: HAIR TYPE: (Select all that apply) EYES:

Black Gray Afro Butch Dreadlocks Military Shaved Wavy Black Green Other
 Blonde Other Bald Combed Back Flattop Ponytail Straight Wig Blue Hazel
 Blue Red Braided Corn Rows Greasy Processed Thick Brown Multicolor
 Brown Silver Bushy Curly Jeri curl Receding Thinning Gray Pink

HAIR LENGTH: FACIAL HAIR: (Select all that apply) TEETH: (Select all that apply)

Collar Short Beard Fu Manchu Goatee Mustache Unshaven Braces Chipped Gold Spaces
 Long Shoulder Clean Shave Fuzz Lower Lip Sideburns Not Applicable (N/A) Broken Crooked Missing
 N/A Buck Decayed Silver N/A
 BUILD: Heavy Medium Muscular Thin N/A

DRIVER'S LICENSE #: STATE: SOCIAL SECURITY #: [REDACTED] DOC #:

FBI #: STATE ID #: OTHER ID #: TYPE:

EMPLOYER: OCCUPATION:

EMPLOYER'S ADDRESS: CITY, STATE, ZIP:

NAME OF SCHOOL: ATTENDANCE: Current Dropout Truant Graduate N/A

SCHOOL ADDRESS: CITY, STATE, ZIP:

Scars, Marks, Tattoos, Oddities PHOTO: Yes No PHOTOGRAPHER: Off. CASTILLO ID: 10079

| LOCATION/SIDE: | DESCRIPTION: |
|-------------------|------------------------------|
| <u>LEFT WRIST</u> | <u>"ACAB"</u> |
| <u>RT FOREARM</u> | <u>Flower possibly LOTUS</u> |
| | |
| | |
| | |
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| | |
| | |

Vehicle Information PHOTO: Yes No PHOTOGRAPHER: ID:

LICENSE #: STATE: YEAR: VEHICLE YEAR: VIN:

MAKE: MODEL: STYLE: COLOR:

Vehicle Details: RELATIONSHIP: Driver Passenger Owner Not Applicable R/O (Last, First):

ADDRESS: CITY, STATE, ZIP:

Alert Information (Select ALL that apply)

| | | | | | |
|--|--|--|--|--|---|
| <input type="checkbox"/> Alcoholic | <input type="checkbox"/> Deceased | <input type="checkbox"/> Epilepsy | <input type="checkbox"/> Health Risk | <input type="checkbox"/> Hemophilia | <input type="checkbox"/> Escape Risk |
| <input type="checkbox"/> Armed & Dangerous | <input type="checkbox"/> Protect Equip. Needed | <input type="checkbox"/> Martial Arts Expert | <input type="checkbox"/> Explosive Expertise | <input type="checkbox"/> Heart Condition | <input type="checkbox"/> Known to Abuse Drugs |
| <input type="checkbox"/> Medication Req'd | <input type="checkbox"/> Prohibited Possessor | <input type="checkbox"/> Sexual Predator | <input checked="" type="checkbox"/> Violent Tendencies | <input type="checkbox"/> Diabetic | <input type="checkbox"/> Suicidal |
| <input type="checkbox"/> Other: | | | | | |

Gang Membership Information Member Affiliate

GANG NAME: ACAB (ALL COPS ARE BASTARDS) SECONDARY GANG: N/A

TYPE: M/C Gang Street Gang Prison Gang Extremist Other (Specify):

GANG LOCATION: RIVAL GANG(S):

Gang Member Criteria (Select all that apply)

| | | |
|--|---|---|
| <input checked="" type="checkbox"/> Clothing or Colors | <input type="checkbox"/> Paraphernalia or Photographs | <input type="checkbox"/> Witness Testimony/Statement |
| <input checked="" type="checkbox"/> Gang Tattoos | <input checked="" type="checkbox"/> Self Proclamation | <input checked="" type="checkbox"/> Written/Electronic Correspondence |
| <input type="checkbox"/> Any Other Indicia, specify*: | | |

**Other criteria could include: extensive knowledge of gang, rivals or specific member*

Field Interview DATE OF CONTACT: 10/7/2020 TIME: 2050 LOCATION PHOTO: Yes No

LOCATION/ADDRESS: 100 W. VANBUREN ST CITY, STATE: PTX COUNTY: Madison

CLOTHING & JEWELRY (type/color): ALL BLACK CLOTHING

CRIME AND/OR REASON FOR CONTACT: RIOT, UNLAWFUL ASSEMBLY

INTERVIEW NOTES: Extremely ANTI POLICE

MARCHED AROUND THE DOWNTOWN AREA W/ 18 OTHERS ALL DRESSED IN BLACK CLOTHING CHANTING "A.C.A.B" - "ALL COPS ARE BASTARDS" OVER & OVER FOR APPROXIMATELY 30 MINUTES. TAKEN INTO CUSTODY WHEN THE GROUP THREATENED TO TAKE OVER THE LIGHT RAIL.

Messaging through the Signal App identifying RAYWANN'S CELL # 301 9564786 IN WHICH SHE IS HAVING A CONVERSATION W/ JONAH JAY INDICATING WHERE PEOPLE SHOULD MEET UP, POLICE TACTICS WHICH INDICATED A CLEAR ROSE OF LEADERSHIP WITHIN THE ACAB GROUP.

| | | | | |
|---|-------|--------------|-----------|---------------|
| WEAPON TYPE: | MAKE: | MODEL: | SERIAL #: | FINISH: |
| | | | | |
| AFFILIATES/ASSOCIATES | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| REVIEWED BY: | ID: | AGENCY ORI#: | | |

GANG MEMBER INFORMATION CARD

Shaded fields are required

Today's Date: Oct 31, 2020

OFFICER INFO - NAME: Scott ID: 6158 AGENCY: Phoenix PD PHONE #: 602-534-6432

| | | | | |
|---|--|--|---|------------------|
| Subject Information | | PHOTO: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | PHOTOGRAPHER: <u>Williams-Castillo</u> | ID: <u>10079</u> |
| LAST NAME: <u>Roberson</u> | FIRST NAME: <u>Christopher</u> | MIDDLE: <u>Charles</u> | | |
| DOB: <u>01/04/1988</u> | GENDER: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female | HEIGHT: <u>5'05"</u> | WEIGHT: <u>145</u> | |
| GANG NAME: <u>ACAB</u> | | DATE OF CONTACT: <u>10/17/2020</u> | | |
| ALIAS: | | MONIKER: | | |
| ADDRESS: <u>909 S Farmer Avenue Apt #3</u> | | CITY, STATE, ZIP: <u>Tempe, AZ 85281</u> | | |
| ADDRESS PHOTO: <input type="checkbox"/> Yes <input type="checkbox"/> No | | PHOTOGRAPHER: ID: | | |
| PHONE #: <u>(520) 604-3781</u> | | PHONE #: | | |
| E-MAIL: | | SCREEN NAME: | | |
| RACE: | <input type="checkbox"/> Asian <input type="checkbox"/> Indian <input type="checkbox"/> Hispanic <input checked="" type="checkbox"/> White <input type="checkbox"/> Black | COMPLEXION: | <input type="checkbox"/> Acne/Pocked <input type="checkbox"/> Freckled <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Sallow | |
| | <input type="checkbox"/> Other (Specify): | | <input type="checkbox"/> Dark <input type="checkbox"/> Light/Fair <input type="checkbox"/> Pale <input type="checkbox"/> N/A | |
| DESCENT(lineage): | | NATIONALITY(citizenship): <u>US</u> | POB (city, state, country): <u>CA</u> | |
| HAIR: | HAIR TYPE: (Select all that apply) | | EYES: | |
| <input checked="" type="checkbox"/> Black <input type="checkbox"/> Gray | <input type="checkbox"/> Afro <input type="checkbox"/> Butch <input type="checkbox"/> Dreadlocks <input type="checkbox"/> Military <input type="checkbox"/> Shaved <input type="checkbox"/> Wavy | <input type="checkbox"/> Black <input type="checkbox"/> Green <input type="checkbox"/> Other | | |
| <input type="checkbox"/> Blonde <input type="checkbox"/> Other | <input type="checkbox"/> Bald <input type="checkbox"/> Combed Back <input type="checkbox"/> Flattop <input type="checkbox"/> Ponytail <input type="checkbox"/> Straight <input type="checkbox"/> Wig | <input type="checkbox"/> Blue <input checked="" type="checkbox"/> Hazel | | |
| <input type="checkbox"/> Blue <input type="checkbox"/> Red | <input type="checkbox"/> Braided <input type="checkbox"/> Corn Rows <input type="checkbox"/> Greasy <input type="checkbox"/> Processed <input type="checkbox"/> Thick | <input type="checkbox"/> Brown <input type="checkbox"/> Multicolor | | |
| <input type="checkbox"/> Brown <input type="checkbox"/> Silver | <input type="checkbox"/> Bushy <input type="checkbox"/> Curly <input type="checkbox"/> Jerl curl <input checked="" type="checkbox"/> Receding <input type="checkbox"/> Thinning | <input type="checkbox"/> Gray <input type="checkbox"/> Pink | | |
| HAIR LENGTH: | FACIAL HAIR: (Select all that apply) | TEETH: (Select all that apply) | | |
| <input type="checkbox"/> Collar <input checked="" type="checkbox"/> Short | <input checked="" type="checkbox"/> Beard <input type="checkbox"/> Fu Manchu <input type="checkbox"/> Goatee <input checked="" type="checkbox"/> Mustache <input checked="" type="checkbox"/> Unshaven | <input type="checkbox"/> Braces <input type="checkbox"/> Chipped <input type="checkbox"/> Gold <input type="checkbox"/> Spaces | | |
| <input type="checkbox"/> Long <input type="checkbox"/> Shoulder | <input type="checkbox"/> Clean Shave <input type="checkbox"/> Fuzz <input type="checkbox"/> Lower Lip <input type="checkbox"/> Sideburns <input type="checkbox"/> Not Applicable (N/A) | <input type="checkbox"/> Broken <input type="checkbox"/> Crooked <input type="checkbox"/> Missing | | |
| <input type="checkbox"/> N/A | BUILD: <input type="checkbox"/> Heavy <input type="checkbox"/> Medium <input type="checkbox"/> Muscular <input checked="" type="checkbox"/> Thin <input type="checkbox"/> N/A | <input type="checkbox"/> Buck <input type="checkbox"/> Decayed <input type="checkbox"/> Silver <input type="checkbox"/> N/A | | |
| DRIVER'S LICENSE #: <u>D05134183</u> | STATE: <u>AZ</u> | SOCIAL SECURITY #: [REDACTED] | DOC #: | |
| FBI #: [REDACTED] | STATE ID #: [REDACTED] | OTHER ID#: | TYPE: | |
| EMPLOYER: | OCCUPATION: | | | |
| EMPLOYER'S ADDRESS: | CITY, STATE, ZIP: | | | |
| NAME OF SCHOOL: | ATTENDANCE: | <input type="checkbox"/> Current <input type="checkbox"/> Dropout <input type="checkbox"/> Truant <input type="checkbox"/> Graduate <input type="checkbox"/> N/A | | |
| SCHOOL ADDRESS: | CITY, STATE, ZIP: | | | |
| Sears, Marks, Tattoos, Oddities | | PHOTO: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | PHOTOGRAPHER: <u>Williams-Castillo</u> | ID: <u>10079</u> |
| LOCATION/SIDE: | DESCRIPTION: | | | |
| <u>left hand pointer finger</u> | <u>tattoo of triangle with unk other designs around it</u> | | | |
| <u>left hand middle finger</u> | <u>tattoo of skull with 3 "x"'s or astericks under skull</u> | | | |
| <u>left hand ring finger</u> | <u>tattoo of triangle with round design inside of triangle</u> | | | |
| <u>left hand pinky finger</u> | <u>tattoo of dollar sign "\$"</u> | | | |
| <u>left hand, back side</u> | <u>tattoo of photo of Guy Fawks</u> | | | |
| <u>left hand, back side</u> | <u>tattoo of red "v" inside of red circle</u> | | | |
| <u>right forearm</u> | <u>tattoo of leaf, appearing to be a marijuana leaf</u> | | | |
| <u>right forearm</u> | <u>tattoo of binary computer code, multiple lines of 1's and 0's.</u> | | | |
| Vehicle Information | | PHOTO: <input type="checkbox"/> Yes <input type="checkbox"/> No | PHOTOGRAPHER: | ID: |
| LICENSE #: | STATE: | YEAR: | VEHICLE YEAR: | VIN: |
| MAKE: | MODEL: | STYLE: | COLOR: | |
| Vehicle Details: | | | | |
| RELATIONSHIP: | <input type="checkbox"/> Driver <input type="checkbox"/> Passenger <input type="checkbox"/> Owner <input type="checkbox"/> Not Applicable | R/O (Last, First): | | |
| ADDRESS: | | | CITY, STATE, ZIP: | |

Alert Information (Select ALL that apply)

| | | | | | |
|--|--|--|--|--|---|
| <input type="checkbox"/> Alcoholic | <input type="checkbox"/> Deceased | <input type="checkbox"/> Epilepsy | <input type="checkbox"/> Health Risk | <input type="checkbox"/> Hemophiliac | <input type="checkbox"/> Escape Risk |
| <input type="checkbox"/> Armed & Dangerous | <input type="checkbox"/> Protect Equip. Needed | <input type="checkbox"/> Martial Arts Expert | <input type="checkbox"/> Explosive Expertise | <input type="checkbox"/> Heart Condition | <input type="checkbox"/> Known to Abuse Drugs |
| <input type="checkbox"/> Medication Req'd | <input type="checkbox"/> Prohibited Possessor | <input type="checkbox"/> Sexual Predator | <input type="checkbox"/> Violent Tendencies | <input type="checkbox"/> Diabetic | <input type="checkbox"/> Suicidal |
| <input type="checkbox"/> Other: | | | | | |

Gang Membership Information Member Affiliate

GANG NAME: ACAB **SECONDARY GANG:**

TYPE: M/C Gang Street Gang Prison Gang Extremist Other (Specify):

GANG LOCATION: **RIVAL GANG(S):**

Gang Member Criteria (Select all that apply)

| | | | |
|--|---|--|--|
| <input checked="" type="checkbox"/> Clothing or Colors | <input type="checkbox"/> Paraphernalia or Photographs | <input type="checkbox"/> Witness Testimony/Statement | <i>*Other criteria could include: extensive knowledge of gang, rivals or specific member</i> |
| <input type="checkbox"/> Gang Tattoos | <input checked="" type="checkbox"/> Self Proclamation | <input type="checkbox"/> Written/Electronic Correspondence | |
| <input type="checkbox"/> Any Other Indicia, specify*: | | | |

Field Interview **DATE OF CONTACT:** Oct 17, 2020 **TIME:** 2040 **LOCATION PHOTO:** Yes No

LOCATION/ADDRESS: 1902 S 16th Street **CITY, STATE:** Phoenix, AZ **COUNTY:** Maricopa

CLOTHING & JEWELRY (type/color): Black jeans, black long sleeve T-shirt, and black shoes

CRIME AND/OR REASON FOR CONTACT: Agg Assault on an Officer, Obst Pub Thoroughfare, Hindering, Unlawful Assembly, Riot

INTERVIEW NOTES:

Christopher was part of a group that took over the city streets in downtown Phoenix and marched in the streets chanting, "ACAB, all cops are bastards." The members of this group wore primarily all black clothing and possessed black umbrellas.

| | | | | |
|---------------------|--------------|---------------|------------------|----------------|
| WEAPON TYPE: | MAKE: | MODEL: | SERIAL #: | FINISH: |
| | | | | |

| | | | | | |
|---|--|--------------|---------------|-------------|----------------------|
| AFFILIATES/ASSOCIATES | | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |

REVIEWED BY: **ID:** **AGENCY ORI#:**

GANG MEMBER INFORMATION CARD

Shaded fields are required

Today's Date: 10/30/2020
 PHONE #: (602) 495-5055

OFFICER INFO - NAME: Hunzinger ID: 6029 AGENCY: PHX P.D

Subject Information PHOTO: Yes No PHOTOGRAPHER: ID:

LAST NAME: VILLASAEZ FIRST NAME: KALIXTA MIDDLE: Noemi

DOB: 06/30/1998 GENDER: Male Female HEIGHT: 5'-5" WEIGHT: 120lbs

GANG NAME: ACAB DATE OF CONTACT: 10/17/2020

ALIAS: MONIKER:

ADDRESS: 1312 S Hardy DR #20 CITY, STATE, ZIP: Tempe AZ 85281

ADDRESS PHOTO: Yes No PHOTOGRAPHER: ID:

PHONE #: PHONE #:

E-MAIL: SCREEN NAME:

RACE: Asian Indian Hispanic White Black
 Other (Specify): COMPLEXION: Acne/Pocked Freckled Medium Sallow
 Dark Light/Fair Pale N/A

DESCENT(lineage): NATIONALITY(citizenship): USA POB (city, state, country):

HAIR: HAIR TYPE: (Select all that apply) EYES:

Black Gray Afro Butch Dreadlocks Military Shaved Wavy Black Green Other
 Blonde Other Bald Combed Back Flattop Ponytail Straight Wig Blue Hazel
 Blue Red Braided Corn Rows Greasy Processed Thick Brown Multicolor
 Brown Silver Bushy Curly Jerl curl Receding Thinning Gray Pink

HAIR LENGTH: FACIAL HAIR: (Select all that apply) TEETH: (Select all that apply)

Collar Short Beard Fu Manchu Goatee Mustache Unshaven Braces Chipped Gold Spaces
 Long Shoulder Clean Shave Fuzz Lower Lip Sideburns Not Applicable (N/A) Broken Crooked Missing
 N/A BUILD: Heavy Medium Muscular Thin N/A Buck Decayed Silver N/A

DRIVER'S LICENSE #: D09515926 STATE: SOCIAL SECURITY #: [REDACTED]

FBI #: [REDACTED] STATE ID #: OTHER ID#: TYPE:

EMPLOYER: OCCUPATION:

EMPLOYER'S ADDRESS: CITY, STATE, ZIP:

NAME OF SCHOOL: ATTENDANCE: Current Dropout Truant Graduate N/A

SCHOOL ADDRESS: CITY, STATE, ZIP:

Scars, Marks, Tattoos, Oddities PHOTO: Yes No PHOTOGRAPHER: ID:

| LOCATION/SIDE: | DESCRIPTION: |
|-----------------------------|---|
| Left middle Finger top side | 3 chevrons w/ single dot between 2 of the chevrons oblong shape w/ lines protruding, possibly shaped like a bus or |
| " " " " | |
| Left Lower arm top side | Snake tattoo w/ ppl near arm wrist w/ snake head all seeing eye on top side of wrist - also a cross shaped anchor on inner wrist. |
| Rt forearm | 2. Ghost warped shape w/ pointillism shading w/ arms stretched Tattoo of "The Screaming" Face w/ blue shading behind in shape of guts also 777 numbers on thigh a circle Flare design w/ Bee flying and Dog skull type face. |
| Left thigh Top side | |
| Right thigh top side | |

Vehicle Information PHOTO: Yes No PHOTOGRAPHER: ID:

LICENSE #: STATE: YEAR: VEHICLE YEAR: VIN:

MAKE: MODEL: STYLE: COLOR:

Vehicle Details: RELATIONSHIP: Driver Passenger Owner Not Applicable R/O (Last, First):

ADDRESS: CITY, STATE, ZIP:

Alert Information (Select ALL that apply)

- | | | | | | |
|--|--|--|--|--|---|
| <input type="checkbox"/> Alcoholic | <input type="checkbox"/> Deceased | <input type="checkbox"/> Epilepsy | <input type="checkbox"/> Health Risk | <input type="checkbox"/> Hemophilic | <input type="checkbox"/> Escape Risk |
| <input type="checkbox"/> Armed & Dangerous | <input type="checkbox"/> Protect Equip. Needed | <input type="checkbox"/> Martial Arts Expert | <input type="checkbox"/> Explosive Expertise | <input type="checkbox"/> Heart Condition | <input type="checkbox"/> Known to Abuse Drugs |
| <input type="checkbox"/> Medication Req'd | <input type="checkbox"/> Prohibited Possessor | <input type="checkbox"/> Sexual Predator | <input checked="" type="checkbox"/> Violent Tendencies | <input type="checkbox"/> Diabetic | <input type="checkbox"/> Suicidal |
| <input type="checkbox"/> Other: | | | | | |

Gang Membership Information

Member Affiliate

GANG NAME: ACAB SECONDARY GANG:

TYPE: M/C Gang Street Gang Prison Gang Extremist Other (Specify):

GANG LOCATION: RIVAL GANG(S):

Gang Member Criteria (Select all that apply)

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> Clothing or Colors | <input type="checkbox"/> Paraphernalia or Photographs | <input type="checkbox"/> Witness Testimony/Statement |
| <input type="checkbox"/> Gang Tattoos | <input checked="" type="checkbox"/> Self Proclamation | <input type="checkbox"/> Written/Electronic Correspondence |
| <input type="checkbox"/> Any Other Indicia, specify*: | | |

*Other criteria could include:
extensive knowledge of gang,
rivals or specific member

Field Interview

DATE OF CONTACT: 10/17/2020 TIME: 2040hrs LOCATION PHOTO: Yes No

LOCATION/ADDRESS: 1902 S 16th St CITY, STATE: Phx, AZ COUNTY: Maricopa

CLOTHING & JEWELRY (type/color): long sleeve black shirt, black cargo pants black shoes alb blk etc

CRIME AND/OR REASON FOR CONTACT: Riot, unlawful Assembly, Agg Assault on Officer, Hindering Prosecution, obstructing highway/public thoroughfare.

INTERVIEW NOTES:

Marched in Downtown Phoenix Area on streets w/ numerous other ACAB members chanting ACAB (all cops are bastards) while committing the listed crimes.

| | | | | |
|---|-------|--------------|-----------|---------------|
| WEAPON TYPE: | MAKE: | MODEL: | SERIAL #: | FINISH: |
| | | | | |
| AFFILIATES/ASSOCIATES | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | LAST: | FIRST: | DOB: | RELATIONSHIP: |
| REVIEWED BY: | ID: | AGENCY ORI#: | | |

GANG MEMBER INFORMATION CARD

Shaded fields are required

Today's Date: 10-29-20

OFFICER INFO - NAME: CODA ID: 7942 AGENCY: PHX PD. PHONE #: 602-495-5005

| | | | | | |
|---|--|---|---|---|------------------|
| Subject Information | | PHOTO: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | PHOTOGRAPHER: <u>WILLIAMS-CASIELLO</u> | | ID: <u>10079</u> |
| LAST NAME: <u>WISE</u> | | FIRST NAME: <u>JACOB</u> | | MIDDLE: <u>HOWARD</u> | |
| DOB: <u>2-4-2003</u> | | GENDER: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female | HEIGHT: | WEIGHT: | |
| GANG NAME: <u>ACAB</u> | | | DATE OF CONTACT: <u>10-17-20</u> | | |
| ALIAS: | | | MONIKER: | | |
| ADDRESS: <u>8949 W. SWEETWATER AVE #423</u> CITY, STATE, ZIP: <u>PEORIA AZ 85381</u> | | | | | |
| ADDRESS PHOTO: <input type="checkbox"/> Yes <input type="checkbox"/> No | | PHOTOGRAPHER: | | ID: | |
| PHONE #: <u>616-368-8301</u> | | | PHONE #: | | |
| E-MAIL: <u>JHOWARDWISE@GMAIL.COM</u> | | | SCREEN NAME: | | |
| RACE: | <input type="checkbox"/> Asian <input type="checkbox"/> Indian <input type="checkbox"/> Hispanic <input checked="" type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other (Specify): | | COMPLEXION: | <input type="checkbox"/> Acne/Pocked <input type="checkbox"/> Freckled <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Sallow <input type="checkbox"/> Dark <input type="checkbox"/> Light/Fair <input type="checkbox"/> Pale <input type="checkbox"/> N/A | |
| DESCENT(lineage): <u>unk.</u> | | NATIONALITY(citizenship): <u>U.S.</u> | | POB (city, state, country): <u>MIICHIGAN</u> | |
| HAIR: | | | | | |
| HAIR TYPE: (Select all that apply) | | | | | |
| EYES: | | | | | |
| <input type="checkbox"/> Black <input type="checkbox"/> Gray <input type="checkbox"/> Blonde <input type="checkbox"/> Other <input type="checkbox"/> Blue <input type="checkbox"/> Red <input checked="" type="checkbox"/> Brown <input type="checkbox"/> Silver | | <input type="checkbox"/> Afro <input type="checkbox"/> Butch <input type="checkbox"/> Dreadlocks <input type="checkbox"/> Military <input type="checkbox"/> Shaved <input checked="" type="checkbox"/> Wavy <input type="checkbox"/> Bald <input type="checkbox"/> Combed Back <input type="checkbox"/> Flattop <input type="checkbox"/> Ponytail <input type="checkbox"/> Straight <input type="checkbox"/> Wig <input type="checkbox"/> Braided <input type="checkbox"/> Corn Rows <input type="checkbox"/> Greasy <input type="checkbox"/> Processed <input checked="" type="checkbox"/> Thick <input type="checkbox"/> Bushy <input type="checkbox"/> Curly <input type="checkbox"/> Jeri curl <input type="checkbox"/> Receding <input type="checkbox"/> Thinning | | <input type="checkbox"/> Black <input type="checkbox"/> Green <input type="checkbox"/> Other <input type="checkbox"/> Blue <input type="checkbox"/> Hazel <input checked="" type="checkbox"/> Brown <input type="checkbox"/> Multicolor <input type="checkbox"/> Gray <input type="checkbox"/> Pink | |
| HAIR LENGTH: | | | | | |
| FACIAL HAIR: (Select all that apply) | | | | | |
| TEETH: (Select all that apply) | | | | | |
| <input checked="" type="checkbox"/> Collar <input type="checkbox"/> Short <input type="checkbox"/> Long <input type="checkbox"/> Shoulder <input type="checkbox"/> N/A | | <input type="checkbox"/> Beard <input type="checkbox"/> Fu Manchu <input type="checkbox"/> Goatee <input type="checkbox"/> Mustache <input type="checkbox"/> Unshaven <input type="checkbox"/> Clean Shave <input checked="" type="checkbox"/> Fuzz <input type="checkbox"/> Lower Lip <input type="checkbox"/> Sideburns <input type="checkbox"/> Not Applicable (N/A) | | <input type="checkbox"/> Braces <input type="checkbox"/> Chipped <input type="checkbox"/> Gold <input type="checkbox"/> Spaces <input type="checkbox"/> Broken <input type="checkbox"/> Crooked <input type="checkbox"/> Missing <input type="checkbox"/> Buck <input type="checkbox"/> Decayed <input type="checkbox"/> Silver <input checked="" type="checkbox"/> N/A | |
| BUILD: <input type="checkbox"/> Heavy <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Muscular <input type="checkbox"/> Thin <input type="checkbox"/> N/A | | | | | |
| DRIVER'S LICENSE #: <u>NONE</u> | | STATE: | SOCIAL SECURITY #: | | DOC #: |
| FBI #: | | STATE ID #: | OTHER ID #: | | TYPE: |
| EMPLOYER: | | | OCCUPATION: | | |
| EMPLOYER'S ADDRESS: | | | CITY, STATE, ZIP: | | |
| NAME OF SCHOOL: <u>PEORIA HIGH SCHOOL</u> | | | ATTENDANCE: <input checked="" type="checkbox"/> Current <input type="checkbox"/> Dropout <input type="checkbox"/> Truant <input type="checkbox"/> Graduate <input type="checkbox"/> N/A | | |
| SCHOOL ADDRESS: <u>11200 N. 83RD AVE</u> | | | CITY, STATE, ZIP: <u>PEORIA AZ 85345</u> | | |
| Sears, Marks, Tattoos, Oddities | | | | | |
| PHOTO: <input type="checkbox"/> Yes <input type="checkbox"/> No | | PHOTOGRAPHER: | | ID: | |
| LOCATION/SIDE: | | | DESCRIPTION: | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Vehicle Information | | | | | |
| PHOTO: <input type="checkbox"/> Yes <input type="checkbox"/> No | | PHOTOGRAPHER: | | ID: | |
| LICENSE #: | STATE: | YEAR: | VEHICLE YEAR: | VIN: | |
| MAKE: | MODEL: | STYLE: | COLOR: | | |
| Vehicle Details: | | | | | |
| RELATIONSHIP: | <input type="checkbox"/> Driver <input type="checkbox"/> Passenger <input type="checkbox"/> Owner <input type="checkbox"/> Not Applicable | | R/O (Last, First): | | |
| ADDRESS: | | | CITY, STATE, ZIP: | | |

Alert Information (Select ALL that apply)

| | | | | | |
|--|--|--|--|--|---|
| <input type="checkbox"/> Alcoholic | <input type="checkbox"/> Deceased | <input type="checkbox"/> Epilepsy | <input type="checkbox"/> Health Risk | <input type="checkbox"/> Hemophilic | <input type="checkbox"/> Escape Risk |
| <input type="checkbox"/> Armed & Dangerous | <input type="checkbox"/> Protect Equip. Needed | <input type="checkbox"/> Martial Arts Expert | <input type="checkbox"/> Explosive Expertise | <input type="checkbox"/> Heart Condition | <input type="checkbox"/> Known to Abuse Drugs |
| <input type="checkbox"/> Medication Req'd | <input type="checkbox"/> Prohibited Possessor | <input type="checkbox"/> Sexual Predator | <input checked="" type="checkbox"/> Violent Tendencies | <input type="checkbox"/> Diabetic | <input type="checkbox"/> Suicidal |
| <input type="checkbox"/> Other: | | | | | |

Gang Membership Information Member Affiliate

GANG NAME: ACAB **SECONDARY GANG:**

TYPE: M/C Gang Street Gang Prison Gang Extremist Other (Specify):

GANG LOCATION: **RIVAL GANG(S):**

Gang Member Criteria (Select all that apply)

| | | | |
|--|---|--|--|
| <input checked="" type="checkbox"/> Clothing or Colors | <input type="checkbox"/> Paraphernalia or Photographs | <input type="checkbox"/> Witness Testimony/Statement | <i>*Other criteria could include: extensive knowledge of gang, rivals or specific member</i> |
| <input type="checkbox"/> Gang Tattoos | <input checked="" type="checkbox"/> Self Proclamation | <input type="checkbox"/> Written/Electronic Correspondence | |
| <input type="checkbox"/> Any Other Indicia, specify*: | | | |

Field Interview **DATE OF CONTACT:** 10-17-20 **TIME:** 2040 HRS **LOCATION PHOTO:** Yes No

LOCATION/ADDRESS: 1902 S. 16TH ST. **CITY, STATE:** PHX AZ **COUNTY:** MARICOPA

CLOTHING & JEWELRY (type/color): ALL BLACK CLOTHING.

CRIME AND/OR REASON FOR CONTACT: AGG ASLT ON PD., RIOT, UNL ASSEMBLY, HONOR PROS, OBST

INTERVIEW NOTES:

MARCHED AROUND DOWNTOWN PHOENIX WITH OTHER MEMBERS
 CHANTING, "A. C. A. B., ALL COPS ARE BASTARDS",
 AND WEARING ALL BLACK CLOTHING.

| WEAPON TYPE: | MAKE: | MODEL: | SERIAL #: | FINISH: |
|--------------|-------|--------|-----------|---------|
| | | | | |

| AFFILIATES/ASSOCIATES | | LAST: | FIRST: | DOB: | RELATIONSHIP: |
|---|--|-------|--------|------|---------------|
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |
| <input type="checkbox"/> Criminal <input type="checkbox"/> Non-criminal | | | | | |

REVIEWED BY: **ID:** **AGENCY ORI#:**