

INVESTIGATORY STOP REPORT

CHICAGO POLICE DEPARTMENT CPD-11.910 (REV. 7/17)

ADULT
 JUVENILE

ISR NO.

EVENT NO.

2331006370

DATE OF STOP	TIME OF STOP	SUBMITTING BEAT	BEAT OF OCC.	LOCATION CODE	ADDRESS OF STOP (Number/Direction/Street Name)		
06-NOV-23	1155	0361D	324	303 - SIDEWALK	7326 S DANTE AVE, CHICAGO, IL 60619		
NAME (Last, First, Middle)			NICKNAME(S)		DATE OF BIRTH	AGE / EST. AGE	
CAMPBELL, TRANZA D					-91	32	
ADDRESS OF RESIDENCE (Number/Direction/Street Name/Apt./Floor/City/State/Zipcode)				HOME PHONE NO.	CELL PHONE NO.		
SEX	HEIGHT	WEIGHT	BUILD	EYE COLOR	HAIR COLOR	HAIRSTYLE	COMPLEXION
MALE	509	185	MEDIUM	UNKNOWN	BLACK	UNKNOWN	MEDIUM BROWN
WHICH OF THE FOLLOWING DO YOU BELIEVE IS THE RACE OF THE PERSON STOPPED?					RELATED ISR NO. (To Identify Associates)		
<input checked="" type="checkbox"/> BLACK OR AFRICAN AMERICAN <input type="checkbox"/> HISPANIC OR LATINO <input type="checkbox"/> AMERICAN INDIAN OR ALASKA NATIVE							
<input type="checkbox"/> WHITE <input type="checkbox"/> ASIAN <input type="checkbox"/> NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER							
CLOTHING TYPE/COLOR			SCARS/MARKS/TATTOOS		FACIAL HAIR	RECORDED:	
BLACK PUFFY JACKET			NONE VISIBLE		UNKNOWN	<input type="checkbox"/> IN-CAR VIDEO <input checked="" type="checkbox"/> BODY WORN CAM.	
EMPLOYER'S NAME			EMPLOYER'S ADDRESS				
SCHOOL'S NAME		SCHOOL'S ADDRESS		EVENT ASSIGNED BY			<input type="checkbox"/> DISPATCHED
				<input checked="" type="checkbox"/> ON VIEW			<input type="checkbox"/> OTHER
NAME VERIFIED BY ID	DRIVERS LICENSE NO./STATE ID NO.		OTHER ID TYPE OR MEANS				
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO							
DID THE STOP INVOLVE A VEHICLE		LICENSE PLATE NO.		TYPE/STATE/EXP. (OR TEMP. TAG NO.)			
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				UNKNOWN TYPE / UNKNOWN STATE / UNKNOWN E			
V.I.N. NO.	VEHICLE YEAR	MAKE	MODEL	BODY STYLE	COLOR		
					UNKNOWN TOP / UN		
MISSION NO.	BOC-I NO.	HOT SPOT NO.	RD NO. (If Related)	GANG/NARCOTIC RELATED ENFORCEMENT	DISPERSAL TIME	NO. DISP.	
			JG493613	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (AS IN S10-02-03)			
DISPOSITION OF THE STOP:			IF YES, CHECK APPLICABLE BOX BELOW.			CITED VIOLATIONS/CHARGES	
ENFORCEMENT ACTION TAKEN?			<input type="checkbox"/> ARREST <input type="checkbox"/> PERSONAL SERVICE CITATION (CIT. #)				
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			<input type="checkbox"/> ANOV (CIT. #)				
			<input checked="" type="checkbox"/> OTHER (Specify)			REPORTABLE USE OF FORC	
GANG INFORMATION SECTION (COMPLETE THIS SHADED SECTION ONLY IF INCIDENT/SUBJECT HAS GANG INVOLVEMENT):							
GANG/FACTION		GANG KNOWN HANG-OUTS					
NONE							
TYPES OF GANG CRIMINAL ACTIVITIES (Describe in Investigatory Stop Narrative on Side 2)							
<input type="checkbox"/> GANG LOOKOUT <input type="checkbox"/> GANG SECURITY <input type="checkbox"/> INTIMIDATION <input type="checkbox"/> SUSPECT NARCOTIC ACTIVITY <input type="checkbox"/> OTHER (Describe:)							
WHAT WERE THE FACTORS THAT LED TO THE STOP?							
<input checked="" type="checkbox"/> REASONABLE ARTICULABLE SUSPICION (Check all that apply. All checked items must be described in the Investigatory Stop Narrative on Side 2)					<input type="checkbox"/> PROBABLE CAUSE		
<input type="checkbox"/> ACTIONS INDICATIVE OF ENGAGING IN DRUG TRANSACTION					<input type="checkbox"/> GANG/NARCOTIC RELATED ENFORCEMENT		
<input type="checkbox"/> FITS DESCRIPTION FROM FLASH MESSAGE							
<input type="checkbox"/> ACTIONS INDICATIVE OF "CASING" VICTIM OR LOCATION							
<input type="checkbox"/> FITS DESCRIPTION OF AN OFFENDER AS DESCRIBED BY VICTIM OR WITNESS							
<input type="checkbox"/> PROXIMITY TO THE REPORTED CRIME LOCATION					<input checked="" type="checkbox"/> OTHER		
WHAT WERE THE REASONABLE ARTICULABLE SUSPICION FACTORS THAT LED TO THE PROTECTIVE PAT DOWN?							
(Check all that apply. All checked items must be described in the Investigatory Stop Narrative on Side 2):							
WHAT WERE THE REASONABLE ARTICULABLE SUSPICION FACTORS THAT LED TO THE PROTECTIVE PAT DOWN CONDUCTED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			<input type="checkbox"/> VERBAL THREATS OF VIOLENCE BY SUSPECT				<input type="checkbox"/> VIOLENT CRIME SUSPECTED
WHAT WERE THE REASONABLE ARTICULABLE SUSPICION FACTORS THAT LED TO THE PROTECTIVE PAT DOWN BASED ON CONSENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			<input type="checkbox"/> KNOWLEDGE OF SUSPECT'S PRIOR CRIMINAL VIOLENT BEHAVIOR/USE OF FORCE/USE OF WEAPON				<input type="checkbox"/> SUSPICIOUS BULGE/OBJECT
RECEIPT GIVEN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			<input type="checkbox"/> ACTIONS INDICATIVE OF ENGAGING IN VIOLENT BEHAVIOR				<input type="checkbox"/> OTHER REASONABLE SUSPICION OF WEAPONS
WHAT WERE THE REASONABLE ARTICULABLE SUSPICION FACTORS THAT LED TO THE PROTECTIVE PAT DOWN CONDUCTED BY CONSENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO							
IF YES, EXPLAIN THE BASIS FOR AND ALL THE REASONS THAT LED TO THE SEARCH BEYOND A PROTECTIVE PAT DOWN IN THE NARRATIVE							
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IF YES, EXPLAIN THE BASIS FOR AND ALL THE REASONS THAT LED TO THE SEARCH BEYOND A PROTECTIVE PAT DOWN IN THE NARRATIVE							

INVESTIGATORY STOP NARRATIVE (Must include all factors that support Reasonable Articulate Suspicion or Probable Cause to justify the stop, all factors that support Reasonable Articulate Suspicion to justify the Protective Pat Down, and the basis and all reasons that led to the search beyond a Protective Pat Down)

OFFICER INVOLVED SHOOTING. SEE IRT SUPP.

DISTRIBUTION: Forward original report to the Records Division.

ISR NO.

[REDACTED]

FIRST OFFICER'S NAME AND STAR NO.

GUTIERREZ, CARLOS E / 4528

SECOND OFFICER'S NAME AND STAR NO.

REVIEWING SUPERVISOR NAME AND STAR NO.

KENNEDY, BRIAN T / 208

APPROVED REJECTED

FOR A REJECTED ISR, COMPLETE AN INVESTIGATORY STOP REPORT DEFICIENCY NOTIFICATION (CPD-11.914).