

**SAN MATEO COUNTY
DISTRICT ATTORNEY'S OFFICE
BUREAU OF INVESTIGATION
400 County Center, Third Floor
Redwood City, California 94063
Ph: (650) 363-4536 FAX: (650) 363-4873**

CHILD ABDUCTION_____

DENIAL OF VISITATION_____

ABDUCTING/DENIAL PARENT OR GUARDIAN

The following information is regarding the person who abducted the child(ren) or is denying visitation:

NAME: _____ AKA: _____
Last First Middle (Or maiden name)

(Circle one)

Male or Female Race _____ Hair _____ Eyes _____ Height _____ Weight _____

Last known address: _____

Phone No.: () _____ His/Her whereabouts known? Y or N

If yes, where? _____ Since what date? _____

His/Her occupation _____ Employer's address _____

His/Her Birthdate: _____ Birthplace (if known) _____

His/Her Driver's License or I.D. # _____ State _____

His/Her Social Security Number _____

Any other identifiers? (Ex: scars, tattoos, etc.) _____

His/Her relationship to child(ren) (Ex: father, mother, guardian) _____

Has he/she ever been arrested? (Circle one) Yes – No – Unknown

If yes, when? _____ Which County/State? _____ Charge(s) _____

His/Her Vehicle license plate no(s). _____ Yr. of vehicle _____

Type and Make of vehicle: _____ Registered owner: _____

Please answer the following questions:

1. Does the abductor have any habits or hobbies that would help us to locate him/her?

2. Does the abductor have a history of any physical or mental deficiencies that would be a danger to the child(ren)'s health or welfare?

3. Referring to Question #2, is there a police or medical record on file? _____
If so, with which agency? _____ Date of Report _____
4. Can anyone testify to this behavior? _____ If so, who? _____

5. How did the person abducting the child(ren) travel? (Airplane, car, etc.) _____

List the family and friends of the person who abducted the child(ren):

NAME	ADDRESS	PHONE #	RELATIONSHIP
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Which of the family and/or friends do you think would assist him/her in the case and why?

If the abductor fled the area, where do you think he/she would go and why?

Can you provide a photograph of the abductor? _____

REPORTING PERSON: (YOURSELF)

The following information is regarding the person making this report.

NAME: _____ AKA: _____
Last First Middle (Or maiden name)

(Circle one)

Male or Female Race _____ Hair _____ Eyes _____ Height _____ Weight _____

Address: _____

Home Phone: () _____ Work Phone: () _____

Relationship to abductor: _____

Your occupation _____ Employer's address _____

Birthdate: _____ Birthplace (County/State) _____

Driver's License or I.D. # _____ State _____

Social Security Number _____

The following questions are not asked to pry into your personal life. This information is needed to anticipate a possible defense by the abductor.

1. Have you ever been arrested? _____ If so, by which agency? _____
_____ Date _____ Charge(s) _____

2. Have you ever been charged with any crimes against children? (i.e.: child abuse, abandonment, etc.) _____ If so, please describe _____

3. Have you ever had any physical or mental defect that could affect your ability to care for the child? _____ If so, please describe _____

4. What reason do you think the abductor will give for his/her actions in this case? _____

The following questions are regarding any previous court action:

If you were married to the abductor:

State date and place (County/State) of marriage: _____

Is there a divorce decree? _____ If so, which county/state? _____

What is the current custody/visitation ruling on this matter? (Ex.: joint custody, visitation, etc.) _____

Are there any court actions pending? _____ If so, with which court and next hearing date? _____

Can you provide this office with copies of all court actions? _____

CHILDREN

The following questions are regarding the child(ren) in question:

NAME: _____ M or F Birthdate: _____

Birthplace: _____ Height _____ Weight _____

Identifiers (Ex: Marks, scars, etc.) _____

Child's Social Security number: _____

NAME: _____ M or F Birthdate: _____

Birthplace: _____ Height _____ Weight _____

Identifiers (Ex: Marks, scars, etc.) _____

Child's Social Security number: _____

CHILDREN - CONTINUED

NAME: _____ M or F Birthdate: _____

Birthplace: _____ Height _____ Weight _____

Identifiers (Ex: Marks, scars, etc.) _____

Child's Social Security number: _____

(If there are more children, please continue on back)

Can you provide photographs of the child(ren)? _____

Last known school attended (School name and address for each child):

Has child(ren) ever received child support or AFDC (welfare) benefits? _____

If so, which county/state is handling? _____

Where was the children taken from? _____

Did the abductor have assistance from anyone else in taking the child(ren)? ___ If so, who?

Date and time last seen child(ren) _____

What were the circumstances of the incident (i.e.; how the abductor was able to take the Child(ren), or how the abductor denied visitation in violation of the court order)?

I hereby certify that the information contained in this form is true and correct to the best of knowledge. (False reporting could be punishable under state law).

Signature of Reporting Person: _____

Date and Place (City): _____

NOTE: Please provide a copy of the latest court filed custody or visitation court order. If there is no order, please provide a certified copy of the child(ren)'s birth certificate(s), paternity order, or other proof to establish your parental/guardian relationship with the child(ren) in question.