

Organized Crime  
Drug Enforcement  
Task Forces  
Interim Report

OCDETF Investigation No. **DHS**

**ATF, DHS**

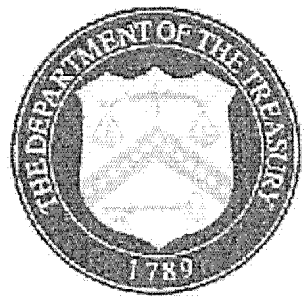
Case Attorney(s)  
Case Agent(s)

**ATF, DHS**

\* Be sure to update attorney/agent information

Date of Submission of this report: **ATF, DHS**  
Prior Interim Report(s) filed on:

Law  
Enforcement  
Sensitive



The attached information must be protected and not released to unauthorized individuals

MIS 02.25.2011 CSA

OCDETF INTERIM REPORT

OCDETF Investigation No. **DHS**

Sponsoring Agency Case Number(s):

**ATF, DHS**

**INSTRUCTIONS**

The Interim Report has been developed to capture the ongoing efforts and results of OCDETF investigations and prosecutions. An "Interim Report" must be filed within SIX (6) MONTHS from the date of approval of the investigation as an OCDETF case and then every six (6) months thereafter for the duration of the OCDETF investigation. If a case is placed in "Judicial Pending" status and no additional investigative action or new indictments are expected, an Interim Report need only be filed once to provide information between the case initiation or last date of filing of an Interim Report and the date on which the case was placed in "Judicial Pending" status; thereafter, an Interim Report need not be filed. A pre-populated Interim Report from the OCDETF MIS should be used to file a current report. If some information already has been reported, provide and/or check boxes for new information only, unless otherwise indicated. Please strike through any incorrect information. If any questions in this Report require additional explanation or discussion, please provide as part of the Narrative Section.

Please complete the following information:

Date investigation was approved as OCDETF: **ATF, DHS**

Current Investigation Status:

**ATF, DHS**

**ATF, DHS**

**ATF, DHS**

Does this investigation currently involve coordinated, simultaneous operational/prosecutorial activity in: (please check all that apply)

**ATF, DHS**

HIDTA Participation: **ATF, DHS**

HIFCA Participation: **ATF, DHS**

**ATF, DHS**

If this case is part of an SOD-coordinated investigation, specify SOD Operation Name:

(Note: Coordination refers to those multi-jurisdictional operations where SOD is actively coordinating with the field to provide guidance and oversight. SOD Funding of electronic surveillance does not, by itself, constitute "SOD Coordination")

SOD Staff Coordinator Name:

**ATF, DHS**

If related to other OCDETF investigations: (Attach additional pages if needed)

Provide related OCDETF case numbers: **ATF, DHS**

Related Case Attorney(s): \_\_\_\_\_

Phone Number: \_\_\_\_\_

Related Case Agent(s): \_\_\_\_\_

Agency: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Law Enforcement Sensitive**

Have the related attorneys and/or agents been contacted to coordinate this investigation?  Yes  No

Provide any new agency information, including the identity of new agencies that have joined the Investigation and/or case numbers that have been assigned since the initiation of the investigation or the last Interim Report:

Agency	# of Full Time Personnel	# of Part Time Personnel	Agency Case Number(s)
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ATF, DHS

Investigative Progress Report

Please list any new prospective defendants. (If more than three, attach "Prospective Defendants Supplement" (OCDETF Form S-3.))

Name (last, first, middle initial)	Non-US Citizen	Alien Registration	DOB	SSN	FBI #	Leadership Role
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ATF, DHS

please identify by name: (Attach additional sheet, if necessary.)

- 1)
- 2)

EE ATTACHED

Narrative Section/Summary of Investigative Progress  
(Narrative must be attached separately to this Interim Report. **DO NOT** write in space below.)

ATF, DHS

LAW ENFORCEMENT SENSITIVE

DHS

Supplemental Form to Add Prospective Defendant Information  
in an OCDETF Investigation

Prospective Defendants

Provide new prospective defendants that have not been previously reported

Name (last, first, middle initial)	Non-US Citizen	Alien Registration	DOB	SSN	FBI #	Leadership Role
<h1>ATF, DHS</h1>						

If any previously-identified target is no longer considered a prospective defendant, based upon your investigation, please identify by name:

Name (last, first, middle initial)
<h1>ATF, DHS</h1>

LAW ENFORCEMENT SENSITIVE

INVESTIGATIVE TECHNIQUES USED TO DATE SUPERVISED BY YOUR DISTRICT

What investigative techniques have been used to date in this investigation? (If some information already has been provided, check boxes for any and all new techniques only. Please strike through any incorrect information.)

ATF, DHS

Note: A financial investigation must have been commenced prior to the case being submitted for OCDETF designation.

What financial investigative steps have you pursued? (If some information already has been provided, check boxes for new techniques only. Please strike through any incorrect information.)

Corroborated information received from a witness/informant related to the organization's:

ATF, DHS

Conducted follow-up on financial leads uncovered through:

ATF, DHS

Conducted analysis of financial information:

ATF, DHS

ATF, DHS

Which agency is conducting the financial investigation? (check one primary agency only)

ATF, DHS

Are you being assisted by the:

ATF, DHS

What, if any, obstacles have existed which have prevented you from accomplishing your investigative goals during the last six months?

In your office/judicial district: (check all that apply)

**ATF, DHS**

In another office/agency/judicial district: (check all that apply)

**ATF, DHS**

Please Identify the other office(s), agency(ies) or judicial district(s) that have been a problem in this investigation (If multiple offices, agencies or districts posed a problem for your investigation, please specify which obstacles are associated with each office, agency or district):

**ATF, DHS**

Organization Description

The Interim Report is intended to capture the full scope of, and the significant developments in, your investigation. Accordingly, please check all that apply to your targeted organization and strike through any information that has been shown to be incorrect.

Connections  
(Explain in Narrative Summary)

ATF, DHS

Primary Activity of the Organization in Your Area  
(check one primary activity only)

ATF, DHS

Other Drug Activity of the Organization  
(check all that apply)

ATF, DHS

Related Criminal Activities (check all that apply)

ATF, DHS



Money Laundering Methods

**ATF, DHS**

OPERATION OF THE ORGANIZATION

(Check all that apply, including subcategories, and strike through any incorrect information)

Trafficking Methods

**ATF, DHS**

Law Enforcement Sensitive

OCDETF INTERIM REPORT

OCDETF Investigation No. SW-AZ-0496

SUPPLY POTENTIAL OF THE ORGANIZATION

If this is the first Interim Report, please fill out completely, to the extent you are able to do so. If some information already has been provided, please report any corrections or changes to previous capacity estimates or seizure figures.

Drug(s)	Estimated Quantity Moved on Annual Basis (reliable estimate based on corroborated CI information, intel, T.I.I. intercepts, etc.)	Amounts Seized to Date (include related or "walled-off" Federal/State/Local seizures)
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**ATF, DHS**

Law Enforcement Sensitive

OCDETF INTERIM REPORT

OCDETF Investigation No. SW-AZ-0496

Weapons Involved	For Gun Smuggling Operations: Total Number of Weapons Moved on Annual Basis (reliable estimate based on corroborated CI information, intel, T-III intercepts, etc.)	Total Number of Weapons Seized/Forfeited To Date (Include related or "walled-off" federal/state/local seizures)		
		Identified	Seized	Forfeited

**ATF, DHS**

Estimated Amount of Currency Laundered on Annual Basis  
(reliable estimate based on corroborated CI information, intel, T-III intercepts, etc.)

**ATF, DHS**

Domestic Assets: Identified, Seized and/or Forfeited to date from the organization. (Include all related or "walled-off" federal/state/local administrative, civil and criminal) (Net Equity Value is the value of the property/enterprise minus all liens.)

	Identified (Total Estimated Value)	Seized (Total Net Equity Value)	Forfeited (Total Net Equity Value)
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**ATF, DHS**

Foreign Assets: Identified and/or Seized to date from the organization. (Net Equity Value is the value of the property/enterprise minus all liens.)

	Identified (Total Estimated Value)	Seized (Total Net Equity Value)
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**ATF, DHS**

If assets have been identified or seized in a foreign country, please list country (ies):

COORDINATION WITH OTHER DISTRICTS OR COUNTRIES

**ATF, DHS**

Case Summary: The following chart summarizes information on defendants charged, convicted and sentenced to date in this investigation. To correct MIS data provided in this chart, you must submit an Indictment/Information Form (s) and/or updated D&S Form(s).

Organization Leaders	Defendants w/ Financial Charges	Non-Leadership Role	Defendants w/ Financial Charges
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ATF, DHS

State and Local Funding from FY 2009 to present: (Populated from State and Local Database)

Regular Hours	Overtime Hours	Total Payments (\$)
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ATF, DHS

Interim Report Preparation and Review

This report is to be completed by the Lead AUSA prosecuting the case together with the Lead Agent(s) for this OCDETF investigation. The Lead Task Force Attorney, Case AUSA and the Case Agent(s) should review this Report and sign below. The Report also should be submitted to, and reviewed by, the AUSA Regional Coordinator and the sponsoring

ATF, DHS

All agency case numbers have been forwarded for entry into CATs: Initials (LTFA) \_\_\_\_\_ Date \_\_\_\_\_

The District Coordination Committee members from agencies other than those signing above as sponsors of the OCDETF investigation should review this Report and sign below. However, please submit this form immediately upon completion; do not wait for District Coordination Committee review and signatures. AGENCY CASE NUMBERS FOR FEDERAL AGENCIES MUST BE SUBMITTED BY THE TIME OF THE FIRST INTERIM REPORT

ATF, DHS

To be completed by Regional Coordination Group:  
Was this investigation generated as a result of a strategic initiative identified in the region's Strategic Plan or otherwise developed by the region?

ATF, DHS

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**ATF, DHS**

State and Local Funding from FY 2009 to present: (Populated from State and Local Database)

**ATF, DHS**

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**ATF, DHS**

The District Coordination Committee members from agencies other than those signing above as sponsors of the OCDETF Investigation should review this Report and sign below. However, please submit this form immediately upon completion; do not wait for District Coordination Committee review and signatures. AGENCY CASE NUMBERS FOR FEDERAL AGENCIES MUST BE SUBMITTED BY THE TIME OF THE FIRST INTERIM REPORT

**ATF, DHS**

To be completed by Regional Coordination Group:  
Was this investigation generated as a result of a strategic initiative identified in the region's Strategic Plan or otherwise developed

**ATF, DHS**

**LAW ENFORCEMENT SENSITIVE**

**OPERATION: THE FAST AND THE FURIOUS  
OCDETF INVESTIGATION NO. #SW-AZ-0496  
INTERIM REPORT NARRATIVE**

**PART A**

**1. SUMMARY OF SIGNIFICANT INVESTIGATIVE ACTIVITIES TO DATE**

**ATF, DHS**

**LAW ENFORCEMENT SENSITIVE**

Page 1 of 4

DOJ-FF-19203

**ATF, DHS**

**ATF, DHS**



**ATF, DHS**

4. LITTLE OR NO INVESTIGATIVE ACTIVITY - NOT APPLICABLE
5. LINK TO A CPOT OR RPOT FOR THE FIRST TIME - NOT APPLICABLE
6. LINKS TO TERRORIST ORGANIZATION, A NATIONAL GANG OR ORGANIZED CRIMINAL GROUP FOR THE FIRST TIME - NOT APPLICABLE
7. ADDITIONAL FUSION CENTER ASSISTANCE - NOT APPLICABLE

**PART B**

**FINANCIAL COMPONENT OF THE INVESTIGATION**

**ATF, DHS**