

Organized Crime Drug Enforcement Task Forces

Investigation Initiation Form

OCDETF Investigation No.

S	W	A	Z	P	0	4	9	6
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THE FAST AND THE FURIOUS

Operation Name

Name: Agency: Telephone: Email:

Case Attorney:

Case Agents(s):

ATF

**LAW
ENFORCEMENT
SENSITIVE**



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

ATF

LAW ENFORCEMENT SENSITIVE

OCDETF Investigation No.

S W A Z T O 4 9 6

(Assigned by AUSA Coordinator)

Federal Judicial District Initiating this Investigation: ATF

Special Operations Division (SOD) Coordination: ATF (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 coordination.)

If yes: SOD Staff Coordinator ATF SOD Operation Name TO BE DETERMINED

Have you received any product from the OCDETF Fusion Center regarding this case? (other than the initial Rapid Enforcement Review) Yes: ATF

Did the OCDETF Fusion Center assist you with asset seizures for this case? ATF

HIDTA Participation: ATF HIFCA Participation: Yes: ATF

I. Targeted Organization (N/A if name of organization is unknown)

Name: ATF Operation (Code) Name: The Fast and the Furious

II. Prospective Defendants (if more than thirty, attach "Prospective Defendants Supplement" (OCDETF Form S-3))

Name (last, first, middle initial)	Non-U.S. Citizen <small>(indicate with an X)</small>	Alien Registration Number	DOB	SSN	FBI #	Leadership Role <small>(indicate with an X)</small>
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ATF

24)	<input type="checkbox"/>					<input type="checkbox"/>
25)	<input type="checkbox"/>					<input type="checkbox"/>
26)	<input type="checkbox"/>					<input type="checkbox"/>
27)	<input type="checkbox"/>					<input type="checkbox"/>
28)	<input type="checkbox"/>					<input type="checkbox"/>
29)	<input type="checkbox"/>					<input type="checkbox"/>
30)	<input type="checkbox"/>					<input type="checkbox"/>

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OCDETF Investigation No.

SWAZPO496
(Assigned by AUSA Coordinator)

III. Agency Involvement Check all boxes which apply and enter personnel commitment and agency case numbers, if available.

Note: Agency case numbers for Federal agencies must be submitted by the time of the first Interim Report (that is, within six months of the initiation of the OCDETF investigation.

Agency	# of Full Time Personnel	# of Part Time Personnel	Agency Case Number	Associated Agency Case Number(s)
<h1>ATF</h1>				
<input type="checkbox"/>				
<input type="checkbox"/>				

Does this investigation anticipate requesting State and Local Overtime Funding?

ATF

If yes, please indicate funding source

ATF

If yes, please indicate an estimated amount for the current fiscal year. (Note-State and Local Overtime Funding must still be submitted through the separate appropriate process for approval.)

\$20,000.00

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Was this investigation initiated by an OCDETF Co-located Task Force/Strike Force?
If yes, check all that apply:

ATF

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IV. Drugs Under Investigation
(Check all that apply)

V. Organization Description

Connections (Check all that apply and explain in Narrative Summary)

Primary Activity of Organization in Your Area

ATF

ATF

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(Assigned by AUSA Coordinator)

VI. Investigative Techniques Used to Date Supervised by your District: (check all that apply)

General Investigative Techniques

ATF

Financial Investigative Techniques

Note: A financial investigation must have been commenced prior to submission of this form.
Check all that apply:

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

ATF

Conducted followup on financial leads uncovered through:

ATF

Conducted analysis of financial information:

ATF

Methods Used:

ATF

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

ATF

Are you being assisted by the:

ATF

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VII. REQUIRED DATABASE CHECKLIST FOR OCDETF IIE

Name of Agent
 Agency
 Telephone Number
 OCDETF Operation Name
 Judicial District

ATF

REQUIRED DATABASE CHECKS

DATABASE	DATE REQUESTED	DATE COMPLETED
ATF		

OPTIONAL DATABASE CHECKS

While not required for OCDETF approval, please provide information, if checks were completed.

DATABASE	DATE COMPLETED
ATF	

VIII. SPECIAL OPERATIONS DIVISION (SOD) WORKSHEET

Date Submitted to SOD: (MM/DD/YYYY)
ATF

Prepared By: _____ Agency: **ATF** Telephone: _____

Current SOD Coordination: _____
 (If Yes) SOD Operation Name: **ATF**

Communication Devices previously submitted to SOD: Yes _____
 (If Yes, answer the following) **ATF**

Submitted By: _____ Agency: **ATF** Telephone: _____

Date Submitted to SOD: (MM/DD/YYYY)
ATF

COMMUNICATIONS DEVICES

(NOT Previously Submitted to SOD)

Type of Device (Designate by letter)

- (A) Cell Phone (B) Hard-line (C) Pager (D) Calling Card
- (E) Satellite (F) FAX (G) E-mail (H) Other

NAME of TARGET	Type	Number (with area code)	Type	Number (with area code)	Type	Number (with area code)
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(Assigned by AUSA Coordinator)

IX. Narrative Summary (*Number all pages, include investigation number and mark "Law Enforcement Sensitive"*)

Answer all questions below thoroughly, but concisely.

A. BACKGROUND/FACTS ABOUT THE CASE

ATF

B. INVESTIGATIVE TECHNIQUES AND GOALS

ATF

C. PERSONNEL/RESOURCE REQUIREMENTS

ATF

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(Assigned by AUSA Coordinator)

VIII. Approvals

Initiating District

Regional Coordination Group

ATF

If an agency disagrees with this proposal, which has been approved by majority vote, please indicate below and attach a dissenting statement.

Dissenting Agency: _____

To be completed by the Regional Coordination Group:

Was this investigation generated as a result of an approved OCDETF Strategic Initiative?

ATF

If yes, identify the initiative number:

S I | | | | | |

If this case is connected to an RPOT in another region, please identify region:

ATF

OCDETF Executive Office
Reviewed/Computer Entry:
Initials ___ Date ___

LAW ENFORCEMENT SENSITIVE

OPERATION: THE FAST AND THE FURIOUS

A. BACKGROUND / FACTS ABOUT THE INVESTIGATION

1. BASIS FOR INITIATING THIS CASE

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LAW ENFORCEMENT SENSITIVE

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ATF

ATF

ATF

2. CPOT AND RPOT LINK -

ATF

DHS

3. IMPACT OF DISMANTLING/DISRUPTING

ATF

ATF

4. TARGETED ORGANIZATION

ATF

ATF

5. PRINCIPAL TARGETS OF INVESTIGATION AND THEIR ROLES

ATF

6. CONNECTION TO TERRORIST GROUPS, NATIONAL GANGS, AND / OR

ATF

7. EXTENT OF PUBLIC CORRUPTION -

ATF

ATF

B. INVESTIGATIVE TECHNIQUES AND GOALS

1. OVERALL GOALS OF THE INVESTIGATION

ATF

ATF

2. ADDITIONAL INVESTIGATIVE TECHNIQUES

ATF

ATF

3. POTENTIAL ASSET SEIZURES -

ATF

ATF

4. CONNECTIONS WITH OTHER INVESTIGATIONS -

ATF

ATF

5. OCDETF FUSION CENTER -

ATF

ATF

C. MANPOWER/RESOURCE REQUIREMENTS

1. INVESTIGATIVE RESPONSIBILITIES -

ATF

ATF

2. ANTICIPATED FUNDING REQUIREMENTS -

ATF

ATF