



# LOS ANGELES COUNTY DISTRICT ATTORNEY'S OFFICE BUREAU OF INVESTIGATION



211 West Temple Street, Suite 300 | Los Angeles, CA 90012 | (213) 257-2600

## DOCUMENTS NEEDED ON A RECOVERY

1. Color photo(s) of child or children
2. Certified copy of the child/or children's birth certificate
3. All court orders
4. Police report (if one has been filed)
5. 3130 order from the court

## DOCUMENTS NEEDED ON A SERVICE

1. Full copy of all court orders to be served on the respondent parents
2. 3130 order from the court

INTAKE INVESTIGATOR \_\_\_\_\_

Date \_\_\_\_\_ Time \_\_\_\_\_

- SERVICE
- RECOVERY
- LOCAL
- OUT-OF-STATE

Next Court Date \_\_\_\_\_

File # \_\_\_\_\_

**For Official Use Only**

**LOS ANGELES COUNTY  
DISTRICT ATTORNEY'S OFFICE  
BUREAU OF INVESTIGATION**

**NOTICE:**

The Child Abduction Unit of the Los Angeles County District Attorney's Office exists to:

1. Aid parents or guardians who have had children abducted.
2. Prosecute those who have violated child abduction criminal laws in appropriate cases.
3. Enforce orders on behalf of the Los Angeles Superior Court pursuant to our duties under Family Code sections 3130 - 3133, when the court orders the District Attorney to locate and recover missing children.

At **no time** does the District Attorney represent you as an individual. You are a victim and/or a witness. The District Attorney represents the People of the State of California and the Superior Court.

Since we do not represent you, there is **no attorney – client relationship**. Therefore, any information you provide to the District Attorney's Office is not confidential and may be subject to disclosure pursuant to court rules or at the discretion of the staff of the District Attorney's Office.

As part of its effort to recover abducted children, the District Attorney's Office often publicizes photographs of these children. If you do not want photographs of your child or children made public in this matter, you must inform the District Attorney's Office of such in writing. Your address and telephone number will not be released to the other parent without your authorization. The other parent's address will not be released to you without his or her authorization.

**You must obtain a court order requesting the District Attorney's Office assistance in locating and/or recovery of child/children.** Assistance is available at the RESOURCE CENTER, ROOM 426, 111 NORTH HILL STREET, LOS ANGELES – PHONE (213) 893-9754

If you have an ongoing visitation problem and a valid court order, you must bring the problem before the court (Order to Show Cause re: Contempt) and to show a good faith effort to resolve the problem in court before the District Attorney's Office can consider handling your case. If you have an order which states "reasonable visitation," you must petition the court to specify your visitation rights, otherwise, the court order is unenforceable. If you and the other party have verbally changed the terms of the order, you must go back into court for a new order. To bring an action before the court, you must file the proper documents. The District Attorney's Office is not a private attorney and cannot file the papers for you. There are several ways to file: 1) hire an attorney, 2) contact a typing service, 3) contact Legal Aid (they will advise you whether they will be able to help you), or 4) file documents yourself.

Once the District Attorney's Office initiates a case, the decision on how to proceed and resolve that case is with the sole discretion of the Office of the District Attorney. If prosecution is pursued and the suspect is convicted, you as the victim or witness have a right to address the sentencing judge by giving a statement to the probation officer prior to the sentencing of the suspect.

You also can make a statement at the time of sentencing. The first priority of this office is to locate and return those children who have been abducted and to protect those children.

The questionnaire you file with the District Attorney's Office is an official police report. Every person who reports to a District Attorney Investigator or any other police officer that a crime has been committed (in this case parental child abduction) and knows the report to be false, is guilty of a misdemeanor and can be prosecuted under California Penal Code section 148.5. Further, you are declaring under penalty of perjury that the information contained in the questionnaire is true and correct (California Penal Code section 118).

There are civil penalties, levied by the Superior Court, for providing false information on documents filed with the court, including fines up to \$1000.

**I have read and understand the above notice.**

\_\_\_\_\_                      \_\_\_\_\_  
**Victim/Parent**                      **Date**





ABDUCTED CHILD # \_\_\_\_

Full name of child: \_\_\_\_\_  
Last First Middle

Other names used: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Race: \_\_\_\_\_ Sex: \_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_

Blood Type: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Date your child was discovered missing: \_\_\_\_\_

Does the child have any medical problems? \_\_\_\_\_

Does the minor have any identifiable marks or scars? \_\_\_\_\_

\_\_\_\_\_  
Last school attended, address, child's name if different: \_\_\_\_\_

Name, address, telephone number of babysitter: \_\_\_\_\_

ABDUCTED CHILD # \_\_\_\_

Full name of child: \_\_\_\_\_  
Last First Middle

Nickname: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Race: \_\_\_\_\_ Sex: \_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_

Blood Type: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Date your child was discovered missing: \_\_\_\_\_

Does the child have any medical problems? \_\_\_\_\_

Does the minor have any identifiable marks or scars? \_\_\_\_\_

\_\_\_\_\_  
Last school attended, address, child's name if different: \_\_\_\_\_

Name, address, telephone number of babysitter: \_\_\_\_\_

ABDUCTED CHILD # \_\_\_\_\_

Full name of child: \_\_\_\_\_  
Last First Middle

Other names used: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Race: \_\_\_\_\_ Sex: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_

Blood Type: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Date your child was discovered missing: \_\_\_\_\_

Does the child have any medical problems? \_\_\_\_\_

Does the minor have any identifiable marks or scars? \_\_\_\_\_

Last school attended, address, child's name if different: \_\_\_\_\_

Name, address, telephone number of babysitter: \_\_\_\_\_

ABDUCTED CHILD # \_\_\_\_\_

Full name of child: \_\_\_\_\_  
Last First Middle

Nickname: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Race: \_\_\_\_\_ Sex: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_

Blood Type: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Date your child was discovered missing: \_\_\_\_\_

Does the child have any medical problems? \_\_\_\_\_

Does the minor have any identifiable marks or scars? \_\_\_\_\_

Last school attended, address, child's name if different: \_\_\_\_\_

Name, address, telephone number of babysitter: \_\_\_\_\_

INFORMATION REGARDING THE SUSPECT'S FAMILY:

Full Name	DOB/Age	Address	Phone #	Relationship
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Are you receiving SSI, AFDC, welfare or general relief benefits? \_\_\_\_\_ If YES, please describe type of benefit, how long have you been receiving the benefits: \_\_\_\_\_

Have you ever been charged with any crimes against children such as Child Abuse, Child Abandonment, Child Neglect, Failure to Pay Child Support? \_\_\_\_\_ If YES, please describe each charge and the law enforcement or government agency involved: \_\_\_\_\_

How long have you lived at your current address? \_\_\_\_\_ If less than one year, please list prior addresses for the past year: \_\_\_\_\_

Are you paying, or have you been served with child support orders? \_\_\_\_\_ If YES, please describe type of benefit and how long the suspect has been the receiving benefit(s): \_\_\_\_\_

Is the suspect receiving SSI, AFDC, welfare or general relief benefits? \_\_\_\_\_ If YES, please describe type of benefit and how for long: \_\_\_\_\_



Has the suspect ever been arrested? \_\_\_\_\_ If YES, please describe briefly (charge, police agency, date): Does the suspect have any habits, hobbies or special skills that would help us locate him/her? \_\_\_\_\_ If YES, please describe:

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Do you believe someone assisted the suspect into taking the child(ren) or to flee? \_\_\_\_\_ If YES, please list the name, address, phone number and any other information you may know about this person(s):

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Is the suspect associated with anyone who may know their whereabouts? \_\_\_\_\_ If YES, please list the name, address, phone number and possible relationship (if known) of the person(s):

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If the suspect fled from the Los Angeles County area, where do you think he or she might go and why?

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Does the suspect pay child support? \_\_\_\_\_ If YES, please list who the support is paid to and what county the payments go to: \_\_\_\_\_

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**COURT ORDER INFORMATION:**

Are there any current custody-related court orders? \_\_\_\_\_ If YES, what type of court order (divorce, temporary restraining order, etc.)?

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Date of court order: \_\_\_\_\_ County and/or State where filed: \_\_\_\_\_

Court case number: \_\_\_\_\_

Physical custody awarded to: \_\_\_\_\_

Visitation awarded to: \_\_\_\_\_

Terms of custody and/or visitation: \_\_\_\_\_

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Any court action pending? \_\_\_\_\_ If YES, what type of action? \_\_\_\_\_

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When (date and time): \_\_\_\_\_ Where (county and state): \_\_\_\_\_

Have you ever been counseled by family court mediation services? \_\_\_\_\_ If YES, please provide name of any attorneys retained, phone number and date of last mediation:

Attorney representing you: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Date: \_\_\_\_\_

Attorney representing the suspect: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Were you and the suspect previously living together? \_\_\_\_\_ If YES, please provide the following:

Married: \_\_\_\_\_ If YES, date married: \_\_\_\_\_ County / State: \_\_\_\_\_

If not married, did the suspect ever live with the children? \_\_\_\_\_ IF YES, Dates:

\_\_\_\_\_ City / State: \_\_\_\_\_

Date of separation: \_\_\_\_\_

Reason for separation: \_\_\_\_\_

Family Support case no: \_\_\_\_\_ County / Office address: \_\_\_\_\_

Are your child support payments current? \_\_\_\_\_

Have you ever refused to allow visitation? \_\_\_\_\_ If YES, why? \_\_\_\_\_

Have you ever imposed conditions for visits not covered in the custody order? \_\_\_\_\_ If YES, describe the conditions and the circumstances:

Have you had custody problems with the abductor? \_\_\_\_\_ If YES, please describe:

When was the last time you were allowed visitation? \_\_\_\_\_

Where did this visitation take place? \_\_\_\_\_

