

<p>Milwaukee County Department of Health and Human Services Delinquency and Court Services Division</p> <p>POLICY & PROCEDURE</p>	<p>Date Issued: 04/21/2014</p>	<p>Reviewed: 04/21/2014</p> <p>Last Revision: 04/21/2014</p>	<p>Section: ADMINISTRATION</p>	<p>Policy No: 036</p>	<p>Pages: 1 of 10 [8 Attachment Pages]</p>
<p><input checked="" type="checkbox"/> Delinquency and Court Services Division Children's Court Services Network Purchase of Service Agencies</p>	<p>Effective Date: 04/21/2014</p>	<p>Subject: DCSD Emergency Plan</p>			

DELINQUENCY AND COURT SERVICES EMERGENCY PLAN

AGENCY: DELINQUENCY AND COURT SERVICES *

LOCATION: 10201 W WATERTOWN PLANK ROAD

SUPERVISOR: B. THOMAS WANTA, DIVISION ADMINISTRATOR

I. PURPOSE

To provide for and ensure the safety of DCSD employees and visitors in an emergency or disaster through the development of an orderly plan for evacuation, shelter, or sheltering-in-place in the event of:

Fire/Explosion
Tornado
Hazardous Materials Spill/Release
Bomb Threat
Or Other Emergency

** Please note: This emergency plans does not include the DCSD – Juvenile Dentention Center. The Detention Center is a 24/7 operation that houses delinquent youth in a confined setting and therefore must follow a separate course of action during emergencies/evacuations.*

II. AUTHORITY

Evacuation, shelter, or sheltering-in-place of the VEL R PHILLIPS JUVENILE JUSTICE CENTER can be ordered by the County Executive, Sheriff or designee, Facilities Management Division, or the Fire Department.

Localized or area specific emergency situations or conditions affecting VEL R PHILLIPS JUVENILE JUSTICE CENTER may deem necessary the evacuation, shelter, or sheltering-in-place of individuals.

III. COMMAND & CONTROL

The DIVISION ADMINISTRATOR or designee (senior staff member present) will execute an order for evacuation, shelter, or sheltering-in-place.

The DIVISION ADMINISTRATOR or designee (senior staff member present) has the responsibility to evacuate personnel from the area.

When the DIVISION ADMINISTRATOR or designee (senior staff member present) receives information of an emergency, the person receiving the information will write it

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down, time record the message, and will disseminate the information to DCSD employees and visitors.

All employees and visitors shall respond immediately and in an orderly fashion. While evacuating or relocating within the building, the DIVISION ADMINISTRATOR or designee (senior staff member present) will be responsible to ensure that employees accompany any visitors, that all employees are accounted for (refer to attached attendance verification sheet) before and after they reach the shelter or evacuation area, and to ensure that all visitors and employees have evacuated their respective areas. Employees will take DCSD equipment (radios, cell phones, etc.) issued to them, whether evacuating or sheltering-in-place.

The DIVISION ADMINISTRATOR or designee (senior staff member present) is designated as the Office Security Officer (OSO) in accordance with the Milwaukee County Security and Crisis Committee planning requirements. The OSO will be responsible for reporting to the DIRECTOR or designee (senior staff member present) that all areas have been evacuated, and will assist in leading the office staff and visitors to the evacuation assembly area or severe weather shelter area.

In the event DCSD is unable to continue operations from the JUVENILE JUSTICE CENTER, operations will be DETERMINED by THE COURTS. The DIVISION ADMINISTRATOR or designee (senior staff member present) will notify the Senior Agency Command Staff personnel that DCSD staff will be relocating AS DETERMINED BY THE COURTS.

IV. SEVERE WEATHER ALERT

A. General

Severe weather information is received directly from the National Weather Service, Sullivan, WI, and from the Emergency Management Alerting System.

B. Thunderstorm Warning or Tornado Watch

The DIVISION ADMINISTRATOR or designee (senior staff member present) will follow normal notification procedures for severe weather.

C. Tornado Warning

The DIVISION ADMINISTRATOR or designee (senior staff member present) will follow normal notification procedures for severe weather.

V. GENERAL SHELTER PLAN -- SEVERE WEATHER -- TORNADO

In the event of severe weather, the DIVISION ADMINISTRATOR or designee (senior staff member present) will notify DCSD personnel and visitors of the situation and will issue appropriate instructions to take shelter in the JUVENILE JUSTICE CENTER - RM G212 (Refer to attachment #3 diagram). All employees and visitors will remain in the severe weather shelter area until the weather has subsided.

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The DIVISION MANAGER or designee (senior staff member present) will insure orderly compliance.

All supervisors will have their Emergency Plans with them.

VI. SHELTER-IN-PLACE PLAN -- HAZARDOUS MATERIALS INCIDENT

While "on-site" hazardous materials incidents may require facility evacuation, "off-site" incidents may require "sheltering-in-place" by DCSD to prevent or reduce the potential for harmful exposure to building occupants.

When the shelter-in-place directive is issued and/or when it is apparent that there is an external hazard, the following measures will be taken:

- A. Close, lock down, and seal all doors and windows to the outside. Sealing will require taping around doors, windows, air vents, and exhaust fans to prevent gases or vapors from entering the area. *
- B. **DO NOT USE ELEVATORS.**
- C. Shut down all heating, ventilating, and air conditioning (HVAC) intakes. NOTE: HVAC system and units may need to be shut down entirely to prevent transfer of a contaminant throughout the building. *
- D. Close all internal building doors to create additional compartments between the outer building doors and windows and the shelter area. *
- E. Always stay away from building windows, as an exterior building explosion could result in injury.
- F. Extinguish all sources of ignition. No smoking, matches, or open flames are allowed.
- G. If the contaminant is suspected to have entered the building, shelter occupants should cover their mouth and nose to help reduce potential for respiratory exposure. A moist towel helps to filter the air.
- H. Be alert for communication from the local Fire Department or the Milwaukee County Office of the Sheriff to evacuate the building, if the shelter-in-place plan protection is deemed more hazardous than facility evacuation.

All supervisors will have their Emergency Plans with them.

** As Facilities Management is responsible for maintenance of the the Juvenile Justice Center, these responsibilities would be theirs.*

VII. FIRE PROCEDURE

- A. When flames and/or smoke are discovered, employees shall:
1. Call 9-9-1-1 to notify fire department. Explain where the fire is (building, address, floor, and room number) and calmly give the details of the emergency.
 2. Pick up cell phone and take it with you.
 3. Activate closest fire alarm pull box.
 4. Advise Senior Agency Command Staff personnel.
 5. Notify Sheriff's Communications (x5555) and evacuate personnel from the area according to the evacuation procedures designated in this plan. (Refer to attached Evacuation Route diagram)
 6. DO NOT USE ELEVATORS.
 7. Choose to use a fire extinguisher only if you are knowledgeable and trained in proper and safe operation of the unit, and only if you are not at personal risk of injury. Fire extinguishers are meant for use on small incipient stage fires. **WHEN IN DOUBT, GET EVERYONE OUT** and allow the Fire Department to do their job.

All supervisors will have their Emergency Plans with them.

VIII. EVACUATION PLAN

Upon receipt of orders to evacuate the building or where conditions warrant an evacuation, this procedure should be followed:

- A. **DO NOT USE ELEVATORS.**
- B. All employees and visitors are to proceed to WATERTOWN PLANK ROAD, DIRECTLY ACROSS FROM THE MAIN ENTRANCE – LOOK FOR THE RED/ORANGE FLAG/PENNANT. All employees and visitors will proceed to the assembly area.

In the event an individual is disabled and unable to use stairs or navigate the evacuation route, they will be escorted by staff to the nearest area of rescue assistance (stair tower) and will be appropriately assisted by fire personnel to the evacuation assembly area. The DIVISION ADMINISTRATOR or designee (senior staff member present) will notify the emergency personnel that individuals are waiting in the area of rescue assistance (identify location).

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The DIVISION ADMINISTRATOR or designee (senior staff member present) will insure orderly compliance.

- C. At the assembly area, the DIVISION ADMIONISTRATOR or designee (senior staff member present) will:

Report attendance to emergency personnel assigned to the evacuation assembly area.

- D. Staff are to take necessary DCSD equipment with them (radios, cellular phones, batteries, etc.).

All supervisors will have their Emergency Plans with them.

IX. BOMB THREAT PROCEDURE

The following Bomb Threat Procedure has been established for utilization by employees who receive a Bomb Threat telephone call. Use the Milwaukee County Office of the Sheriff's Bomb Threat Card Questionnaire as a reference tool which should be kept under or near your telephone for easy access and use in the event that a bomb threat call is received. Attempt to complete both sides of the Bomb Threat Card Questionnaire immediately after the call and hold for responding Milwaukee County Office of the Sheriff or Local Law Enforcement Representative.

A. Bomb Threat Telephone Call

1. Receive call and accept comments from caller.
2. If possible, attempt to notify or signal co-worker(s) that you have a bomb threat caller on the line and have them call 9-9-1-1.
3. Attempt to keep caller talking. Write down every word.
4. Tell the caller that a bomb explosion could cause serious injury and/or possible death to persons in the area.
5. Attempt to discern the callers sex, age, ethnic groups, voice characteristics, speech pattern, accent, composure, and any background noise(s).
6. As you are leaving the facility, using a cell phone, call 9-1-1. Give the operator your name, location, (address, room number, telephone number), a description of the bomb threat message, and a time that it was received. Answer all questions the operator may have.

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7. Notify the DIVISION ADMINISTRATOR or designee (senior staff member present) then,
 - o Page a **CODE BLUE** evacuation
 - o If time allows, contact other areas as follows:
 - o Juvenile Detention –7715
 - o Sheriff’s Department – 5901/5555
 - o Facilities Management – 7677
 - o District Attorney’s Office – 7725
 - o Victim/Witness - 7123
 - o Clerk of Circuit Court – 7700
 - o Guardian ad Litem – 7159
 - o Public Defenders – 226-1210
 - o DHHS Director – 2-6817
8. Prepare for implementation of Internal Department Emergency Evacuation for the Bomb Threat Emergency.
9. Cooperate with responding Milwaukee County Office of the Sheriff and/or Local Law Enforcement Representatives.

B. Bomb Threat Voice Mail Message

1. Save the voice mail message.
2. Write down the exact words in the message.
3. Call 9-9-1-1 and report the Bomb Threat Message to Milwaukee County Office of the Sheriff Representatives and/or Local Law Enforcement Representatives.
4. Follow steps 6 - 9 as listed above.

All supervisors will have their Emergency Plans with them.

X. NUCLEAR, BIOLOGICAL, CHEMICAL (NBC) AWARENESS RESPONSE

Employees should report anything unusual or out of the ordinary they may identify with their surroundings. Awareness is the key to minimizing danger to yourself and co-workers.

Upon observation of anything unusual or out of the ordinary, immediately cover your nose and mouth with a cloth for temporary respiratory protection.

A. The 4 Don'ts

1. Don't become a victim
2. Don't rush in
3. Don't TEST (Taste, Eat, Smell, Touch)
4. Don't assume anything

B. Be SAFE

1. Safety comes first
2. Assess the situation before doing anything
3. Focus on avoiding the hazard
4. Evaluate the situation and report to authorities

C. Emergency Self-Decontamination

Chemical -- Blot, Strip, Flush, Cover

Bio-Nuclear -- Wet, Strip, Flush, Cover

1. Wet or Blot
 - For **nuclear and biological** contamination, wetting down exposed surfaces will help in preventing the contamination from re-suspending in the air.
 - For **chemical** contamination, carefully blot the agent off of exposed skin immediately.
2. Strip off all the clothing
3. Flush the affected area with large amounts of water
4. Cover the affected area

D. Notification

Call 9-9-1-1 and identify the following:

1. Location of incident
2. Time of incident
3. Number of victims
4. Symptoms of injured
5. Fire or explosion
6. Type of vehicle or container involved
7. Specify any indicators of an NBC incident

E. Emergency Procedures

If you suspect or witness an NBC incident, protect yourself and move upwind and upgrade. Do not walk through, inhale, or touch any spilled material, vapor cloud, smoke, or leaking containers. Without endangering yourself, keep others away until help arrives. Depending on the nature of an NBC incident, emergency procedures may call for evacuation or sheltering-in-place. If an NBC incident should occur, refer to the shelter-in-place and evacuation procedures identified in this emergency plan.

All supervisors will have their Emergency Plans with them.

XI. GENERAL INFORMATION

- A. To minimize danger to your life and the lives of your fellow employees, it is imperative that all division employees become familiar with this emergency plan.

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- B. At any time an alarm is sounded, follow the procedures identified in this emergency plan, unless immediately notified of a false alarm or drill.
- C. During an evacuation, employees should confine movements to the assigned routes and WALK to the exit level. ELEVATORS ARE NOT TO BE USED.
- D. DCSD may receive notification of a bomb threat from other county departments.
- E. Control of employees and visitors in shelter areas or passageways is the responsibility of FACILITIES MANAGEMENT or designee (senior staff member present).
- F. A copy of this emergency plan will be distributed annually by DCSD DIVISION ADMINISTRATOR or designee (senior staff member present) to all employees and given to all new employees at their orientation interview.
- E. All supervisor will have their Emergency Plan with them*

XII. EMPLOYEE TRAINING DRILLS

- A. The DIVISION ADMINISTATOR or designee (senior staff member present) is responsible to ensure that employees receive training in all aspects of emergency evacuation, severe weather, shelter, shelter-in-place, Nuclear, Biological, Chemical (NBC) Awareness Response, and fire alarm box pull stations.
- B. All employees will receive annual refresher training/update information regarding this emergency.
- C. The DIVISION ADMINISTRATOR or designee (senior staff member present) will ensure employee participation in all drills and exercises.

XIII. ANNUAL PLAN REVIEW AND REVISION

This plan shall be reviewed and revised annually by DIVISION ADMINISTRATOR or designee (senior staff member present), or more often if necessary.

APPROVED:

B Thomas Wayfa

Division Manager, Delinquency and Court Services
Or Designee (senior staff member present)

Date: _____

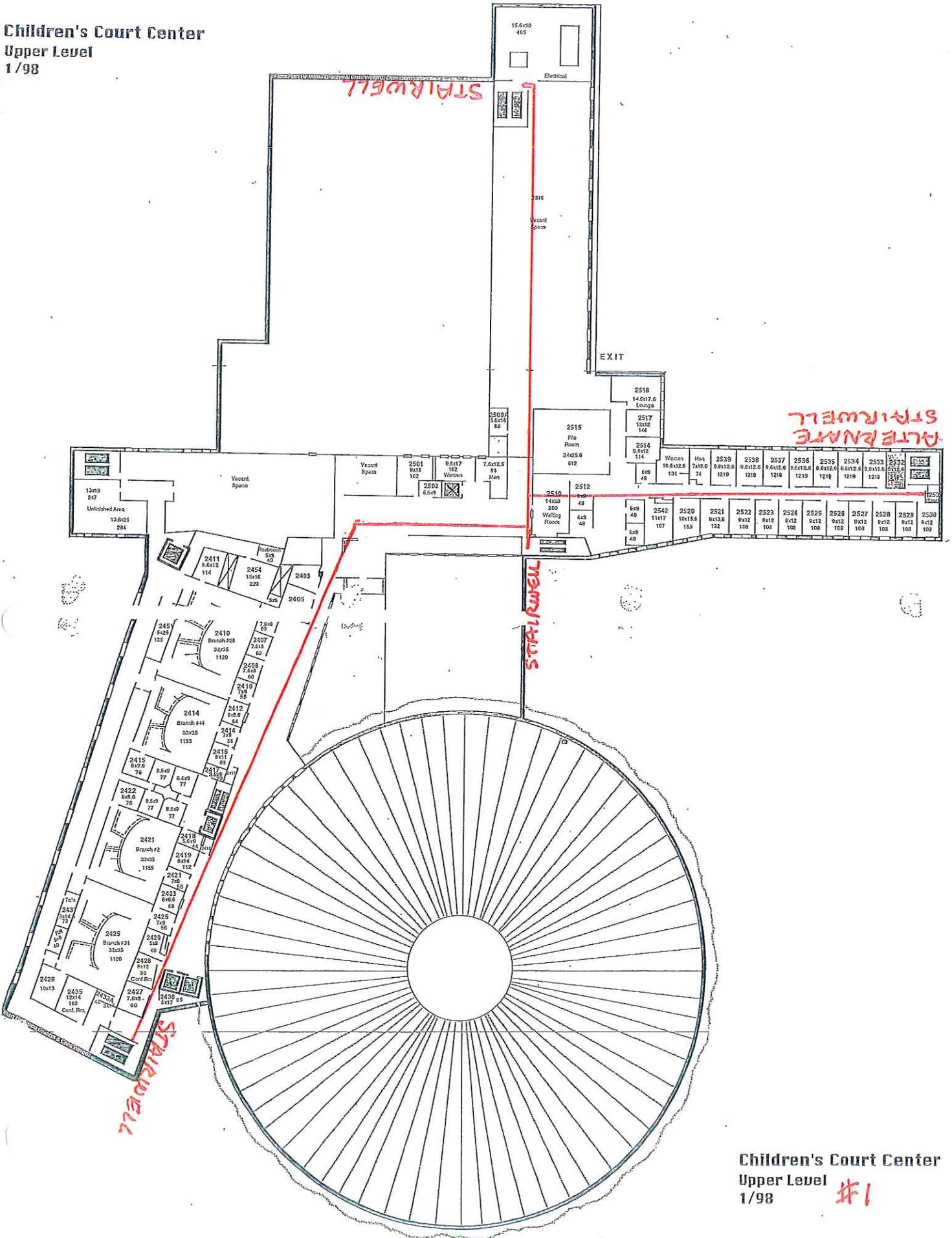
4/21/14

Attachments

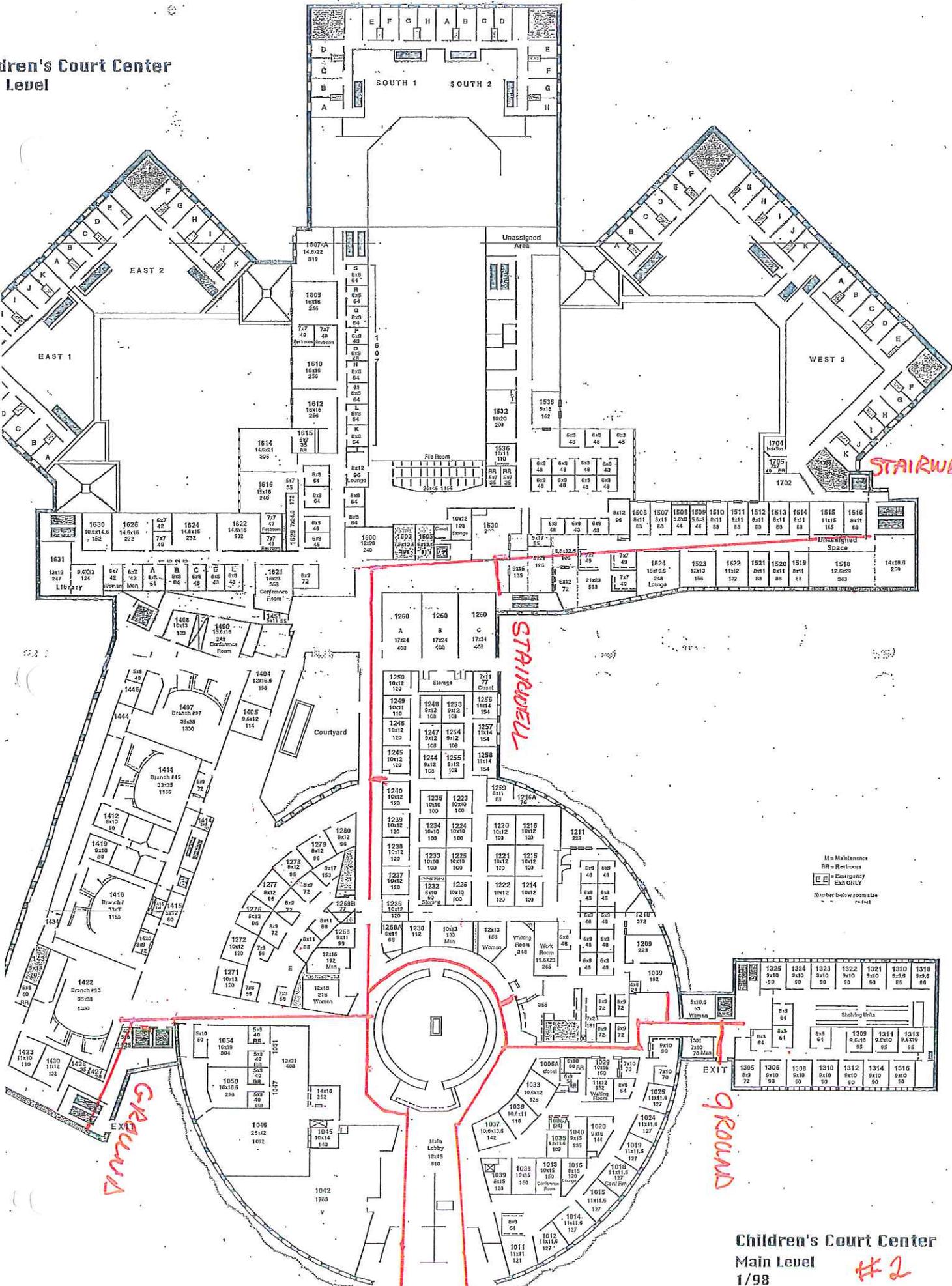
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- (1 - 3) Room/Location Diagram with Emergency Evacuation Routes
- (4) Sheriff's Department Bomb Threat Information Form
- (5) DCSD Attendance Verification Sheet

Children's Court Center
Upper Level
1/98



**Children's Court Center
Level**



STAIRWELL

STAIRWELL

Ground

Ground

Main Entrance
Ground

M = Maintenance
RR = Restroom
E = Emergency Exit ONLY
Number below room size

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EMERGENCY EVACUATION, SHELTER IN PLACE PLAN: ATTENDANCE VERIFICATION SHEET

<u>SUPERVISOR</u>	<u>NAME</u>	<u>COUNTY CELL PHONE</u>	<u>PERSONAL CELL PHONE</u>	<u>NEEDS ASSISTANCE</u>	<u>TYPE OF ASSISTANCE</u>	<u>PRESENT</u>	<u>ABSENT BUT ACCOUNTED FOR</u>	<u>ABSENT NOT ACCOUNTED FOR</u>
A GILLIAM	BADE, LYNN	414-391-5116		No				
A GILLIAM	BRUYETTE, ROXANE	414-391-7936		No				
A GILLIAM	COLEMAN, GLENN	414-331-1327	414-301-1160	No				
A GILLIAM	GARRETT, MATTHEW	414-374-6860		No				
A GILLIAM	LEONHARDT, CHRISTOPHER		414-915-8039	No				
A GILLIAM	RAINER, AMANDA	414-331-5553		No				
A GILLIAM	ROGERS, PATRICIA	414-331-5563		No				
A GILLIAM	TAYLOR, KENNETH	414-374-6241		No				
G LARSON	GILBOY, KEVIN	414-391-8205		No				
G LARSON	GILLIAM, ANDRE	414391-8361		No				
G LARSON	HAND, MARY ANN	414-331-6297		No				
H COLON	WANTA, B. THOMAS	414-614-5702		Yes	MOTION IMPAIRED			
J ERNST	EDMONDS, BILLIE	414-374-2306		No				
J ERNST	FULLER, JAYNE	414-391-8120		No				
J ERNST	MATEN, PAUL		414-406-6533	No				
J ERNST	MONSOOR, MELISSA	414-305-0839		No				
J ERNST	PARR, DANETTE	414-319-9650		No				
J ERNST	RAMCZYK, WILLIAM	414-331-5506		No				
J ERNST	SABREE, MUSTAFA	414-391-5080	414-465-0589	No				
J ERNST	SMITH, MARY	414-374-2465		No				
J ERNST	WALKER-LLOYD, CHERYL	414-331-0684		No				

Immediately report "Absent - Not Accounted For" individuals to Security Officers in the Assembly Areas and to Agency Senior Command Staff personnel.

MILWAUKEE COUNTY DEPARTMENT OF HEALTH AND HUMAN SERVICES

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EMERGENCY EVACUATION, SHELTER IN PLACE PLAN: ATTENDANCE VERIFICATION SHEET

SUPERVISOR	NAME	COUNTY CELL PHONE	PERSONAL CELL PHONE	NEEDS ASSISTANCE	TYPE OF ASSISTANCE	PRESENT	ABSENT BUT ACCOUNTED FOR	ABSENT NOT ACCOUNTED FOR
J ERNST	WASECHEK, MICHAEL	414-374-6353		No				
K GILBOY	BATES, DIANE	414-374-6062		No				
K GILBOY	BURKS, VERONICA	414-374-2276		No				
K GILBOY	CHUNG-DROPP, JENNIFER	414-374-2951		No				
K GILBOY	CLOYD-BROOKS, TINA	414-374-3790		No				
K GILBOY	ERICKSON, MARK	414-374-2865		No				
K GILBOY	FORKES, JENNIFER	414-374-2889		No				
K GILBOY	GRAYSON, LAURIE	414-374-6509		No				
K GILBOY	TRIPLETT, ANGELA	414-336-0131		No				
K KUNZLER	DOBROSIELSKI, RENATA			No				
K KUNZLER	FILAPEK, JUSTINE			No				
K KUNZLER	FRAZIER, LASHAE			No				
K KUNZLER	LAWRENCE, SHAWANNA			No				
K KUNZLER	MARTINEZ, JANICE	414-659-3431		No				
K KUNZLER	NATHAN, BRIDGETTE		414-552-8880	No				
K KUNZLER	WOLF, CYNTHIA			No				
K PETHIKE	MADAUS, PETER	414-391-8544		No				
K PETHIKE	MARCUS, LYNN	414-331-5906		No				
K PETHIKE	PARKER, DESHELL	414-331-5290		No				
M GRAHAM	ERNST, JEROME	414-374-2214		No				
M GRAHAM	JETER, TANA	414-331-6602		No				

Immediately report "Absent - Not Accounted For" individuals to Security Officers in the Assembly Areas and to Agency Senior Command Staff personnel.

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EMERGENCY EVACUATION, SHELTER IN PLACE PLAN: ATTENDANCE VERIFICATION SHEET

SUPERVISOR	NAME	COUNTY CELL PHONE	PERSONAL CELL PHONE	NEEDS ASSISTANCE	TYPE OF ASSISTANCE	PRESENT	ABSENT BUT ACCOUNTED FOR	ABSENT NOT ACCOUNTED FOR
M GRAHAM	ROSADO, MONSERRATE	414-331-5270		No				
M HAND	BLOCK, RODNEY	414-391-7249		No				
M HAND	GILLIAM, KAREN	414-374-6433		No				
M HAND	ISABELL, ROBERT	414-319-9651		No				
M HAND	LLANAS, ROSIE	414-331-6133		No				
M HAND	MCCLINTOCK, GENEVIEVE	414-305-0982		No				
M HAND	MEUREN, DAVID	414-305-9914		No				
M HAND	PHINISEE, MARK	414-331-6118		No				
M HAND	ZINGALE, ANTHONY	414-374-6748		No				
M ROSADO	BILTY, JOSEPH	414-391-8076		No				
M ROSADO	BROCK, DANYELLE	414-389-7048		No				
M ROSADO	GODFREY, GLORIA	414-374-3420		No				
M ROSADO	MILLER, JACOB	414-305-0837		No				
M ROSADO	MORGAN, VANESSA	414-305-8994		No				
M ROSADO	NOLDE, JANINE	414-374-6715		No				
M ROSADO	SMITH, KATHLEEN	414-331-0257		No				
M ROSADO	WEATHERS, BERTHA	414-331-2626		No				
T JETER	BARILLAS, MIGUEL	414-391-8089		No				
T JETER	CORNIER, JOSE	414-374-6511		No				
T JETER	LEFLORE, MC ARTHUR	414-305-9845		No				
T JETER	LEWIS, ANDREA	414-305-0613		No				

Immediately report "Absent - Not Accounted For" individuals in the Assembly Areas and to Agency Senior Command Staff personnel.

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<u>SUPERVISOR</u>	<u>NAME</u>	<u>COUNTY CELL PHONE</u>	<u>PERSONAL CELL PHONE</u>	<u>NEEDS ASSISTANCE</u>	<u>TYPE OF ASSISTANCE</u>	<u>PRESENT</u>	<u>ABSENT BUT ACCOUNTED FOR</u>	<u>ABSENT NOT ACCOUNTED FOR</u>
T JETER	WILLIAMS, LORETTA	414-331-9665		No		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
T JETER	WOLLNER, ROBERT	414-403-1164		No		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
T JETER	ZIMA, ROBERT	414-331-9351		No		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
T WANTA	GRAHAM, MELISSA	414-374-3301		No		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
T WANTA	KUNZLER, KAREN	414-322-7766		No		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
T WANTA	LARSON, GLENN	414-403-1140		No		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
T WANTA	MORAZA, WENDY	414-374-6161		No		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
T WANTA	PETHKE, KELLY	414-331-5604		No		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
W MORAZA	ALBERT, ANGELA			No		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
W MORAZA	CEASAR, ROCHELLE		414-639-4187	No		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
W MORAZA	RAYMOND, TANYA			No		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
W MORAZA	SOLOMON, BINETTE		414-758-6683	No		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
W MORAZA	TAYLOR, JUDITH			No		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
W MORAZA	WILKINS, WILLIAM			No		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Immediately report "Absent - Not Accounted For" individuals to Security Officers in the Assembly Areas and to Agency Senior Command Staff personnel.



Sheriff

David A. Clarke, Jr.

1079-1 R4

PLACE THIS CARD UNDER YOUR TELEPHONE

QUESTIONS TO ASK:

1. When is bomb going to explode?
2. Where is it right now?
3. What does it look like?
4. What kind of bomb is it?
5. What will cause it to explode?
6. Did you place the bomb?
7. Why?
8. What is your address?
9. What is your name?

EXACT WORDING OF THE THREAT:

Sex of caller: _____ Race: _____

Age: _____ Length of call: _____

Number at which call is received: _____

Time: _____ Date: _____ / _____ / _____

BOMB THREAT

CALLER'S VOICE

- | | |
|-----------------------------------|--|
| <input type="checkbox"/> Calm | <input type="checkbox"/> Nasal |
| <input type="checkbox"/> Angry | <input type="checkbox"/> Stutter |
| <input type="checkbox"/> Excited | <input type="checkbox"/> Lisp |
| <input type="checkbox"/> Slow | <input type="checkbox"/> Raspy |
| <input type="checkbox"/> Soft | <input type="checkbox"/> Ragged |
| <input type="checkbox"/> Loud | <input type="checkbox"/> Clearing throat |
| <input type="checkbox"/> Laughter | <input type="checkbox"/> Deep breathing |
| <input type="checkbox"/> Crying | <input type="checkbox"/> Cracking voice |
| <input type="checkbox"/> Normal | <input type="checkbox"/> Disguised |
| <input type="checkbox"/> Distinct | <input type="checkbox"/> Accent |
| <input type="checkbox"/> Slurred | <input type="checkbox"/> Familiar |

If voice is familiar, who did it sound like?

BACKGROUND SOUNDS:

- | | |
|---|--|
| <input type="checkbox"/> Street noises | <input type="checkbox"/> Factory machinery |
| <input type="checkbox"/> Crockery | <input type="checkbox"/> Animal noises |
| <input type="checkbox"/> voices | <input type="checkbox"/> Clear |
| <input type="checkbox"/> PA System | <input type="checkbox"/> Static |
| <input type="checkbox"/> Music | <input type="checkbox"/> Local |
| <input type="checkbox"/> House noises | <input type="checkbox"/> Long distance |
| <input type="checkbox"/> Motor | <input type="checkbox"/> Booth |
| <input type="checkbox"/> Office machinery | <input type="checkbox"/> Other _____ |

THREAT LANGUAGE:

- | | |
|---|---|
| <input type="checkbox"/> Well spoken (educated) | <input type="checkbox"/> Incoherent |
| <input type="checkbox"/> Foul | <input type="checkbox"/> Taped |
| <input type="checkbox"/> Irrational | <input type="checkbox"/> Message read by threat maker |

REMARKS: _____

Report call immediately to:

Phone number _____

.....
Date _____ / _____ / _____

Name _____

Position _____

Phone number _____