



**NOTICE
PUBLIC MEETING OF THE
PIMA COUNTY ANIMAL CARE ADVISORY COMMITTEE**

April 21, 2016 – 5:30 p.m.

**Abrams Building
3950 S. Country Club Road
Tucson, Arizona
(520) 724-7729**

Functions of the Committee

1. Serve in an advisory capacity to the Board, and to the Manager of the Pima Animal Care Center (PACC); and
2. Review and evaluate the operations of the Center to make recommendations in writing to the Board for the formulation of guidelines to assure that:
 - A. The Center's operations are conducted in the best interest of the public health and safety; and
 - B. The Center keeps pace with the most modern practices and procedures of animal care and welfare; and
3. Review complaints from the public concerning policies of the Center and make recommendations for resolution to the proper authority.

AGENDA

1.	Call to Order <ul style="list-style-type: none">• Roll Call• Establishment of Quorum and Pledge of Allegiance
2.	Review and Adoption of Minutes: <ul style="list-style-type: none">• Adoption of March 17, 2016 meeting minutes
3.	Animal Care Center Budget Discussion
4.	Welfare and Dangerous Dog Case from March and Recent Animal Care Center Holds Snapshot
5.	Call to the Audience
6.	Management Report <ul style="list-style-type: none">• Building Update• Budget Update• Events
7.	Old Business <ul style="list-style-type: none">• Pima Animal Care Center Enforcement Officer Numbers
8.	New Business <ul style="list-style-type: none">• Use of Welfare Case Comment Sheets to Streamline Welfare Case Discussion• Volunteer Code of Conduct, Social Media, and Communication Policies/Enforcement• Open-Adoptions Philosophy and Presentation
9.	Donations: A total of \$35,401.59 in donations was received during the month of March.
10.	Complaints and Commendations: There were no complaints and one commendation received by staff during March.
11.	Call to the Audience
12.	Announcements, Schedules and Proposed Agenda Items
13.	Next Meeting – May 19, 2016
14.	Adjournment

Copies of this agenda are available upon request at the Pima County Health Department, 3950 S. Country Club Road, by calling 724-7729 or at www.pima.gov/animalcare. The Committee may discuss and take action on any item on the agenda. At the conclusion of an open call to the public Committee members may only respond to criticism made; ask staff to review the matter raised; or ask to include the matter on a future agenda.

Should you require ADA accommodations, please contact the Pima County Health Department at 724-7729 five (5) days prior to the meeting.

Pima County Animal Care Advisory Committee
Minutes
March 17, 2016
3950 S. Country Club Road
Tucson, Arizona 85714

Draft

1. Call to Order

Mr. Neuman called the meeting to order at 5:35 pm.

- Attendance

Present:

Tamara Barrick, Pima Paws for Life
Nancy Emptage, Chair, Animal Welfare Coalition
Pat Hubbard, Humane Society of Southern Arizona
Jack Neuman, Vice-Chair, PACC Volunteers
Jane Schwerin, People for Animals in the Prevention of Cruelty and Neglect
Gail Smith, MD, Board of Health
Marcy Flanagan, Health Department Deputy Director, Ex-Officio

Absent:

Pat Jacobs, Tucson Kennel Club
Sophia Kaluzniacki, DVM, SPCA of AZ, Inc
Derek Marshall, Public Education
Helen Mendelsohn, Disabled Community
Erin O'Donnell, DVM, Southern AZ Veterinary Medical Association

- Pledge of Allegiance

2. Adoption of the Minutes

- Adoption of the February 18, 2016 Meeting Minutes

Ms. Schwerin said her discussion on page five of the draft minutes was recorded inaccurately in that it states: "However, Ms. Schwerin's point was dogs which should be declared dangerous..." when it should reflect it was former Mayor Miller's point she was bringing up. Ms. Schwerin chose to edit the text verbally in lieu of providing a written edit as requested by Mr. Neuman.

The motion was made and seconded (Smith/Emptage) that the February 18, 2016 meeting minutes be adopted with the aforementioned edit. The motion carried (6-0).

3. Animal Care Center Budget Discussion

Ms. Flanagan introduced Garrett Hancock, Health Department Business Manager, who utilized the attached PowerPoint presentation to explain how budgets are done in Pima County.

In June of 1980 Arizona voters amended the Arizona Constitution prescribing an expenditure limitation for each county, city, town, and community college district. The purpose of the expenditure limitation is to control expenditures and limit future increases in spending to adjustments for inflation; deflation; population growth. There are exceptions for natural or manmade disasters or if approved by two-thirds of the governing board and a majority of the qualified voters. The budget process cycle

begins in October for the fiscal year which begins the following July. Mr. Hancock discussed the budget timeline and in-process adjustments that occur, often due to State cost transfers and insurance cost changes. In May the Board of Supervisors passes a tentative budget, which sets the budget limit, and then the final budget adoption is in June. To come up with the Department's total budget Finance starts with the current adopted budget figure and makes adjustments for any known differences. Anything in excess of the adjusted figure has to be pursued as a supplemental budget request and most of those do not get approved.

PACC's budget is divided into three parts: the PACC special revenue fund (fund 2001), the PACC grants fund (fund 2042), and the PACC bequests fund (fund 2131). Mr. Neuman asked which fund general donations go into. Mr. Hancock said donations go into fund 2001; while a grant from PetSmart goes into fund 2042; and if someone dies and leaves PACC their house it (the money from the house) goes into fund 2131. Spending authority is based on projections. Mr. Neuman asked what happens if the projected revenue amount is exceeded. Money taken in in excess of the expenditure authority goes into an account. Mr. Hancock said it cannot be spent during the current fiscal year because it is not in the budget, but can be budgeted in future years. He gave the example of the bequest money coming in and being included in budgets going forward, but not in the budget year the money was received. Ms. Emptage asked about how general donations are divided out and Mr. Hancock said a portion goes to cover costs attributed to the various municipalities. Once the County puts money into PACC's fund, the County cannot take it back. Dr. Smith asked if surplus funds in PACC's account carried over to another year result in the County reducing the general fund contribution. Mr. Hancock said in theory the County could do so, but has not. He continued that this year is the first year of his three years with the Health Department wherein PACC is not over budget. PACC's overages have been covered by the Health Department's budget in years past. Ms. Barrick said that the Committee has trouble accepting that donations are being rolled into PACC's budget to cover operations instead of for the animals specifically. Ms. Hubbard asked if money given for a specific purpose, such as spay and neuter, actually goes for that purpose. Mr. Hancock said it does. He continued that the County's financial management system tracks all the money and has stops within the system to prevent spending beyond authorized thresholds for specific master agreements (contracts) and commodities. Ms. Schwerin asked why people should give donations for things PACC is already doing. Mr. Hancock said because PACC is traditionally over budget and could not do all the things they want to do without the donations. Mr. Neuman said there is a pie of money which comes into the County; asserted that the community wants PACC to have a larger portion of the pie; and continued that donations should not be considered part of the pie. Mr. Hancock said he, PACC and the Health Department administration all agree PACC needs more money. He went on to relay that prior to PACC's tent going up the Board of Supervisors granted an extremely rare mid-year adjustment to cover the additional costs associated with erecting the tent, but PACC still went over budget due to the additional operating cost associated with housing the additional animals in the tent.

PACC's fiscal year 2015/2016, current, budget is \$8.8 million with projected revenues of just under \$6.5 million. The difference is made up by the general fund subsidy. Next year's budget is over \$9.175 million. Dr. Smith asked if the revenues include donations; Mr. Hancock said they include anticipated donations based on trends, but would not include a bequest. In response to a question Mr. Hancock explained grants have reporting requirements and audits.

4. Welfare and Dangerous Dog Case from January and Recent Animal Care Center Holds Snapshot

Ms. Schwerin referred to welfare case one and said the officer recommended the owner get kennel runs for outside and crates for inside. She asserted that kennel runs are bad enough and crates are even worse. She said crates are cruel and she wished officers would not recommend crates.

Regarding the third case, Ms. Schwerin asked why the case is closed if the dog is not licensed. Supervisor Neil Konst said the situation is now in Justice Court's hands. Ms. Emptage pointed out that at the last meeting the Committee recommended owners be required to license their dogs within 30 days of a no-license citation. Ms. Flanagan said the Committee's recommendation has been forwarded to the County Attorney's Office. Supervisor Konst added the owner may have given the dog away and would therefore no longer needs to license it.

Ms. Schwerin said case four had dogs without water and the owner was allowed to redeem one of the dogs without it being neutered and she asked why the dog wasn't neutered. Supervisor Konst said all five dogs were given up to PACC, four were confiscated and the fifth was brought in.

Ms. Schwerin said case five was very bad. She said a dog was on a tie-out without water or shelter, which indicates a very bad owner. The owner received citations and the dog was eventually returned to the owner and the question was asked why. Supervisor Konst replied the report had nothing about the dog being in distress or bad shape. There has not been a follow-up visit.

Ms. Schwerin said case seven included a badly injured dog and the owner surrendered the dogs, but she added the owner should not be allowed to own animals. Supervisor Konst reported two of the dogs were euthanized and one died; he added the owner is on the do-not-adopt list. Ms. Emptage asked if the list is shared with other agencies and Konst replied it is not. Ms. Emptage requested that topic be an agenda item going forward.

5. Call to the Audience

There were no speakers at from the audience.

6. Management Report

Ms. Flanagan reported on two topics.

- Accreditation Site Visit

The Department is going through the accreditation process and had a site visit last week and it went well. There were a number of positives noted by the accreditation body: dedication and passion, high function, good leadership, good work with community partners, and good relationship with governance. Areas for improvement mentioned were: there were a couple ADA accommodations on the second floor they wanted addressed, having a data analysis person who can make reports to help operational efficiencies, and having a data analysis system. The Department should hear back on the accreditation in April or May.

- Pima County Animal Care Advisory Committee Ordinance Change

The ordinance went to the Board of Supervisors on Tuesday. The Board made some changes. They added that the Committee will include a member from the Board of Health. The terms of the current Committee members will end at the end of June this year, as opposed to the phase out originally proposed. And the County Administrator appointed staff position will be a non-voting position.

Ms. Schwerin commented that four individuals, including her, will have their terms expire earlier than originally proposed, originally the end of June 2018. She attributed this change to comments by Mr. Neuman at the Board of Supervisors meeting.

7. Old Business

- Shortening Lengthy Animal Holds

Ms. Flanagan said [Deputy County Attorney] Paula [Perrera] is on her final revision of language aimed at reducing these holds, but it was not done in time for the meeting, so Ms. Flanagan will bring the language to the next meeting for the Committee's review, then to the Board of Health, then to the Board of Supervisors.

8. New Business

- Introduction of New Volunteer Coordinator

Ms. Flanagan introduced the New Volunteer Coordinator Gina Hansen. Ms. Hansen came to PACC from the Humane Society. She briefly listed programs she ran at the Humane Society and expressed her desire to bring new programs to PACC, bring in more volunteers and do anything to help the animals.

- Pima Animal Care Center Enforcement Officer Numbers

Mr. Neuman said he was moving this item to next month's agenda, but requested information from staff regarding how the enforcement officer numbers compare to numbers from the 60s and 70s and how numbers compare to the community population numbers. PACC Operations Manager Jose Ocano said there are two final candidates for the enforcement manager position; and he is presently looking at how enforcement operations are handled and how they can be made more efficient.

9. Donations: A total of \$24,655.02 in donations was received during the month of February.

Ms. Flanagan commented that donations not specified for a particular purpose are used to offset medical costs; and that donations have to be projected as revenue to be budgeted in to be able to be used.

10. Complaints and Commendations: There were no complaints and no commendations received by staff during February.

There was no discussion on this agenda item.

11. Call to the Audience

There were no speakers from the audience.

12. Announcements, Schedules and Proposed Agenda Items

Mr. Neuman said a number of volunteers have complained about adoption criteria and wants this to be an agenda item for the next meeting.

Ms. Emptage said she is still working on compiling applicable animal care statutes and will eventually be able to present it to the Committee.

Dr. Smith suggested paper conservation be considered at some point going forward.

13. Next Meeting – April 21, 2016

The next meeting will be at the Abrams building.

14. Adjournment

The meeting adjourned at 7:06 pm.



**PIMA COUNTY HEALTH DEPARTMENT
PIMA ANIMAL CARE CENTER
4000 N. SILVERBELL RD • TUCSON, AZ 85745
(520) 724-5900 FAX (520) 724-5960
www.pima.gov/animal/care**

MEMORANDUM

TO: Marcy Flanagan, Deputy Director
FROM: Neil Konst, Enforcement Supervisor
DATE: 4/1/16
SUBJECT: Welfare report for March 2016

-
1. A16-189939 The dog was impounded, treated and is currently with a foster.
 2. A15-183616 The owner was cited for neglect no Vet care, neglect no water on the chicken. The dog Peluche was surrendered and has since been adopted. This complaint is closed.
 3. A16-189068 One dog was impounded. Staff reviewed animal welfare requirements and laws with the owner and issued citations. The owner redeemed the dog.
 4. A16-188156 The owner was cited for neglect no Vet care. The dog was already deceased when the officer investigated. This complaint is closed.
 5. A16-190035 No animal was impounded. Staff reviewed animal welfare requirements and laws with the owner and issued citations for neglect no water. Owner licensed both dogs.
 6. A16-190250 The owner was cited for neglect no Vet care. The dog was being euthanized when the officer investigated.
 7. A16-188629 No animal was impounded. Staff reviewed animal welfare requirements and laws with the owner and issued citations for neglect tie-out and neglect no-water. A recheck is scheduled to be done after 4/4/16.
 8. A16-190392 The owner was cited for neglect no Vet care. The dog was being euthanized when the officer investigated.

INVESTIGATION REPORT Pima County Health Department Pima Animal Care Center 4000 N Silverbell Rd Tucson, AZ 85745 Phone: (520) 724-5900 Fax: (520) 724-5960		SUSPECT [REDACTED]			ACD NAME / BADGE # K. Baugus 1918		ACTIVITY/BITE NUMBER A16-189939	
SUSPECT'S ADDRESS [REDACTED]		CITY STATE ZIP RESIDENCE PHONE NUMBER		BITE <input type="checkbox"/> WELFARE <input checked="" type="checkbox"/> DANGEROUS <input type="checkbox"/>		OTHER <input type="checkbox"/>		
SUSPECT'S BUSINESS ADDRESS		CITY STATE ZIP BUSINESS PHONE NUMBER		CI <input checked="" type="checkbox"/> CO <input type="checkbox"/> OTHER <input type="checkbox"/>		DRIVERS LICENSE		
SEX WEIGHT HEIGHT EYES HAIR ORIGIN		DOB SOCIAL SECURITY NUMBER						
DOES THIS INCIDENT REQUIRE VICTIM REQUEST FOR WAIVER OF RIGHTS? YES <input type="checkbox"/> NO <input type="checkbox"/>		LOCATION OF INCIDENT		DATE AND TIME OF INCIDENT 03.17.16 1750		Date and time reported 03.04.16 1400		
<input type="checkbox"/> I CHOOSE "upon request" rights in this case		VICTIM/COMPLAINANT NAME Dr. Jennifer Wilcox DVM		DATE OF BIRTH		RESIDENCE PHONE 724.5900		
<input type="checkbox"/> I WAIVE "upon request" rights in this case.		VICTIM'S ADDRESS		CITY		STATE ZIP		
<input type="checkbox"/> REQUEST/WAIVER exception per A.R.S. § 13-4405 (B) and § 8-286 (B)		VICTIM'S BUSINESS ADDRESS 4000 N Silverbell Rd		CITY Tucson		STATE ZIP Az 85745		
NAME OF LAWFUL REPRESENTATIVE (IF APPLICABLE)		DANGEROUS ASSESSMENT REQUESTED YES <input type="checkbox"/> NO <input type="checkbox"/>		RESTITUTION REQUESTED YES <input type="checkbox"/> NO <input type="checkbox"/>		DANGEROUS CASE NUMBER		
<input type="checkbox"/> ADDRESS AND PHONE NUMBER SAME AS VICTIM		<input type="checkbox"/> VIOLATION <input type="checkbox"/> NON-VIOLATION		BITE SEVERITY: PART OF BODY BITTEN:		TREATED BY PHONE NUMBER		
RELATIONSHIP TO VICTIM PHONE NUMBER		VET CLINIC		PHONE NUMBER		OWNER KNOWS OF BITE YES <input type="checkbox"/> NO <input type="checkbox"/>		
LAWFUL REPRESENTATIVE ADDRESS		CLINIC'S ADDRESS		QUARANTINE (DAYS) 10 <input type="checkbox"/> 15 <input type="checkbox"/> 45 <input type="checkbox"/> 180 <input type="checkbox"/>		<input type="checkbox"/> FRA HEAD#		
VICTIM OR LAWFUL REPRESENTATIVE SIGNATURE		3 rd PARTY CITATIONS YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		CITING ACD K. Baugus 1918		PREVIOUS VIOLATIONS YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		
CODE/ORD VIOLATED 4-3 (2)(D)		CITATIONS/NUMBERS 75554		PREVIOUS CASE NUMBER		OTHER ADDITIONAL REPORTS		
BREED/DESCRIPTION		ANIMAL'S NAME		COLOR		SEX AGE		
Pit Bull		Maya		Blue/White		SF 6yrs		
VICTIM OWNER <input checked="" type="checkbox"/>								
VICTIM OWNER <input type="checkbox"/>								
VICTIM OWNER <input type="checkbox"/>								
VICTIM OWNER <input type="checkbox"/>								
VICTIM OWNER <input type="checkbox"/>								
VICTIM OWNER <input type="checkbox"/>								
VICTIM OWNER <input type="checkbox"/>								
VICTIM OWNER <input type="checkbox"/>								
WITNESS 1		M <input type="checkbox"/> F <input type="checkbox"/>		DOB ADDRESS		RESIDENCE PHONE # BUSINESS PHONE #		
WITNESS 2		M <input type="checkbox"/> F <input type="checkbox"/>		DOB ADDRESS		RESIDENCE PHONE # BUSINESS PHONE #		
WITNESS 3		M <input type="checkbox"/> F <input type="checkbox"/>		DOB ADDRESS		RESIDENCE PHONE # BUSINESS PHONE #		
WITNESS 4		M <input type="checkbox"/> F <input type="checkbox"/>		DOB ADDRESS		RESIDENCE PHONE # BUSINESS PHONE #		

REVIEWED BY **2002**
MONA 3/19
 BOND
 YES NO



INVESTIGATION REPORT

PACC Activity: A16-189939

ACO & Badge K. Baugus 1918

Prima Animal Care Veterinarian Dr. Jennifer Wilcox DVM has asked for an investigation into a recently adopted dog for neglecting to get veterinary care.

March 17th 2016 at approximately 1738 hrs. I, Officer Baugus 1918 arrived at _____ to check on vet care required for Maya, an adult female blue and white Pit Bull.

Per Dr. Wilcox, On March 9th 2016 _____ called the clinic at PACC because the dog Maya was straining to urinate and crying. _____ stated that she had taken Maya to a vet on the list provided upon adoption and was told the dog has a urinary tract infection but _____ did not have any money to purchase the needed medication to treat the dog. _____ wanted Dr. Wilcox to provide the medication. _____ was told at that time that the dog was not PACC's dog any longer, _____ needed to take the dog to a vet for an exam and provide the medications for treatment.

_____ was also advised that if she did not get treatment for the dog within four days, an Officer would investigate this case for cruelty and neglect.

On March 17th 2016, eight days later, a complaint was put in for an Officer to investigate. I arrived at 1738 hrs. and met with _____. I asked about vet care for Maya and I was told the dog had an appointment tomorrow. (03.18.16) I asked for _____ identification and I issued a citation for neglect-no vet care. I advised _____ that after her appointment, she was to have the proof of vet care and the Dr's notes faxed to PACC by 6PM on the 18th of march. If the dog was in fact seen and received treatment, I would void the citation. If I did not receive the proof, the citation would go through.

_____ signed the citation and received her copy. I then gave her a notice to give to the vet that outlined what we needed faxed and when. _____ stated she understood. I asked what vet she had an appointment with and _____ stated she did not have an appointment yet, she was going to go down the list she was provided to see if she can get an appointment. I explained again that she had to have the dog treated, it has already been too long.

I asked _____ where Maya was now and she said the dog was in the back yard. I asked to see the dog and was let into the back yard.

The dog was friendly, wagging her tail and appeared happy. _____ and her husband(?) stated Maya is a house dog and is not left outdoors. I noted the small back yard smelled of animal waste. There was minimal waste on the ground, but there was a large garbage near the gate full of feces. There was a pan of water provided. No shelter. I again asked about where the dog spent most of her time. I was told that Maya is like one of her kids and she is an indoor dog.



Activity A16-189939

INVESTIGATION REPORT (Continued)

stated that she has been giving Maya unsweetened cranberry juice to treat the urinary tract infection for the last week, and she seems to think it is helping.

I advised that home remedy's (like the cranberry juice) is most helpful at the onset of symptoms, but not so when the illness is a full blown infection as in this case.

I advised again that if we do not receive proof of vet care within 24 hrs. the citation will go through and the dog will be impounded. The husband stated that the dog is putting out more urine now and she does not cry like before. She is still straining however and painful.

March 19th 2016 at approximately 1450 hrs.

As of today, March 19th 2016 Pima Animal Care Center has not heard from the dog owners or received any veterinary paperwork to show that Maya has been examined and received treatment for her Urinary tract infection.

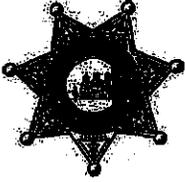
The citations are going through and the dog will be impounded.

Officer Signature

H. Baugus 1918

Date 3-19-2016

INVESTIGATION REPORT Pima County Health Department Pima Animal Care Center 4000 N. Silverbell Rd. Tucson, Arizona 85745 Phone: (520) 724-5900 Fax: (520) 724-5960		SUSPECT [REDACTED]			ACO NAME / BADGE # X. Delgadillo 2047		ACTIVITY/BITE NUMBER A15-183616								
SUSPECT'S ADDRESS [REDACTED]		BITE <input type="checkbox"/> WELFARE <input checked="" type="checkbox"/> DANGEROUS <input type="checkbox"/>			OTHER <input type="checkbox"/>										
CITY STATE ZIP RESIDENCE PHONE NUMBER		CITY STATE ZIP BUSINESS PHONE NUMBER			DRIVERS LICENSE										
SUSPECT'S BUSINESS ADDRESS		CI <input type="checkbox"/> CO <input type="checkbox"/> OTHER <input type="checkbox"/>			DOB SOCIAL SECURITY NUMBER										
SEX WEIGHT HEIGHT EYES HAIR ORIGIN		DOB SOCIAL SECURITY NUMBER			DATE AND TIME OF INCIDENT 03/16/17 17:43										
DOES THIS INCIDENT REQUIRE VICTIM REQUEST FOR WAIVER OF RIGHTS? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		LOCATION OF INCIDENT FOOD <input type="checkbox"/> WATER <input type="checkbox"/> SHELTER <input type="checkbox"/> VENTILATION <input type="checkbox"/> ABANDONED <input type="checkbox"/> TIED/UT <input type="checkbox"/> BEATEN <input type="checkbox"/> WASTE <input type="checkbox"/> INJ / ILL <input type="checkbox"/> OTHER (EXPLAIN) <input type="checkbox"/>			Date and time reported 11/30/15 12:22										
<input type="checkbox"/> I CHOOSE "upon request" rights in this case		VICTIM/COMPLAINANT NAME DATE OF BIRTH RESIDENCE PHONE BUSINESS PHONE			CITY STATE ZIP										
<input type="checkbox"/> I WAVE "upon request" rights in this case.		VICTIM'S ADDRESS			CITY STATE ZIP										
<input type="checkbox"/> REQUEST/WAIVER exception per A.R.S. § 13-4405 (B) and § 8-286 (B)		VICTIM'S BUSINESS ADDRESS			CITY STATE ZIP										
NAME OF LAWFUL REPRESENTATIVE (IF APPLICABLE)		DANGEROUS ASSESSMENT REQUESTED YES <input type="checkbox"/> NO <input type="checkbox"/>		RESTITUTION REQUESTED YES <input type="checkbox"/> NO <input type="checkbox"/>		DANGEROUS CASE NUMBER		OTHER AGENCY CASE # <input type="checkbox"/> SHERIFF DEPT <input type="checkbox"/> TUCSON POLICE <input type="checkbox"/> FIRE <input type="checkbox"/> OTHER:		FOLLOW UP REQUEST <input type="checkbox"/> SD <input type="checkbox"/> TPD <input type="checkbox"/> OTHER:					
<input type="checkbox"/> ADDRESS AND PHONE NUMBER SAME AS VICTIM		<input type="checkbox"/> VIOLATION <input type="checkbox"/> NON-VIOLATION		BITE SEVERITY: PART OF BODY BITTEN:		TREATED BY PHONE NUMBER		DATE QUARANTINED RELEASE DATE:		PACC <input type="checkbox"/> VET <input type="checkbox"/> HOME <input type="checkbox"/>					
RELATIONSHIP TO VICTIM PHONE NUMBER		VET CLINIC		PHONE NUMBER		OWNER KNOWS OF BITE YES <input type="checkbox"/> NO <input type="checkbox"/>		FTQ <input type="checkbox"/> UTQ <input type="checkbox"/>		QUARANTINE (DAYS) 10 <input type="checkbox"/> 15 <input type="checkbox"/> 45 <input type="checkbox"/> 180 <input type="checkbox"/> <input type="checkbox"/> FRA HEAD#					
LAWFUL REPRESENTATIVE ADDRESS		CLINIC'S ADDRESS		3 rd PARTY CITATIONS YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		CITING ACO		PREVIOUS VIOLATIONS YES <input type="checkbox"/> NO <input type="checkbox"/>		PREVIOUS CASE NUMBER OTHER ADDITIONAL REPORTS					
VICTIM OR LAWFUL REPRESENTATIVE SIGNATURE		CODE/ORD VIOLATED 6.04.110(B)(4)		CITATIONS/NUMBERS 75410		REVIEWED BY <i>2002</i> <i>KANST 3/19</i>		BOND YES <input type="checkbox"/> NO <input type="checkbox"/>		YES <input type="checkbox"/> NO <input type="checkbox"/>					
BREED/DESCRIPTION		ANIMAL'S NAME		COLOR		SEX		AGE		LICENSE #		CONDITION		ANIMAL ID#	
Poodle Mix		Peluche		White/Black		M		Adult		[]		[]		[]	
Heeler Mix		Penny		White/Black		F		Adult		Cited		[]		[]	
Fowl		None		White/Brown		F		Adult		[]		[]		[]	
VICTIM OWNER <input type="checkbox"/>		[]		[]		[]		[]		[]		[]		[]	
VICTIM OWNER <input type="checkbox"/>		[]		[]		[]		[]		[]		[]		[]	
VICTIM OWNER <input type="checkbox"/>		[]		[]		[]		[]		[]		[]		[]	
VICTIM OWNER <input type="checkbox"/>		[]		[]		[]		[]		[]		[]		[]	
VICTIM OWNER <input type="checkbox"/>		[]		[]		[]		[]		[]		[]		[]	
VICTIM OWNER <input type="checkbox"/>		[]		[]		[]		[]		[]		[]		[]	
WITNESS 1		M <input checked="" type="checkbox"/> F <input type="checkbox"/>		DOB		ADDRESS		RESIDENCE PHONE #		BUSINESS PHONE #		[]		[]	
WITNESS 2		M <input type="checkbox"/> F <input type="checkbox"/>		DOB		ADDRESS		RESIDENCE PHONE #		BUSINESS PHONE #		[]		[]	
WITNESS 3		M <input type="checkbox"/> F <input type="checkbox"/>		DOB		ADDRESS		RESIDENCE PHONE #		BUSINESS PHONE #		[]		[]	
WITNESS 4		M <input type="checkbox"/> F <input type="checkbox"/>		DOB		ADDRESS		RESIDENCE PHONE #		BUSINESS PHONE #		[]		[]	



INVESTIGATION REPORT

PACC Activity: A15-183616

ACO & Badge X. Delgadillo#2047

On December 1, 2015 at approximately 16:22 I, Officer Delgadillo #2047, arrived to in reference to a Neglect- emaciated animal(s) complaint.

I drove into the property through the open gate, where I met with [redacted] I explained that the dogs must be confined at all time while out in the yard; she stated she left to pick up her daughter and that is why the gates were left open. I observed a white and black poodle mix who was identified as Peluche. Peluche was severely matted and in desperate need of grooming/vet care. She explained that the dog just showed up one day; I explained after 5 days, the dog is considered hers. I asked if she wanted to relinquish ownership; she declined as she would take him to the groomers. The other dog, Penny, a white with black spots Heeler mix is pregnant and is limping. She stated that she did not know why. We then walked the property and I advised her the horses, goat and fowl must have potable water at all times; understand the water is self-watering but the container must be clean and free of algae. I provided her a premise inspection for vet care for both dogs; excessive waste clean up and potable water for all the animals. I advised a re-check would be conducted. [redacted] stated that she understood and signed the premise inspection form. I also provided her with the Pet fix program flier and advised of licensing requirements

On March 16, 2016 at approximately 17:43 I, Investigator Delgadillo #2047 arrived to to conduct a re-check of the welfare of the animals.

I drove through the open gates and the heeler mix Penny greeted me at the gate. I met with [redacted] I asked if [redacted] was available and he contacted her via cellphone; she arrived shortly after.

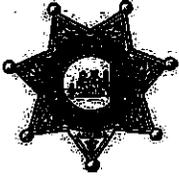
I advised [redacted] that I walked the property and the condition of the animals had not improved since my last visit on 12/1/15. She then stated that she was not the property owner and that her mother [redacted] is the owner of the animals. I questioned why did she state and sign the premise inspection on my first visit as the property owner. He immediately declined stated that she did not sign any document.

I explained that Peluche's condition has not changed and that the dog is severely matted which is a violation of negelct. She stated that she has been calling PACC to pick up the stray dog. I reminded her that my visit I offered to take Peluche and she wanted to keep him and obtain grooming for him.

Officer's Signature:

Date:

3/19/16



INVESTIGATION REPORT (Continued)

She immediately became defensive and declared she stated no such comment. I researched Chameleon and found no requests for a stray dog being confined at this address. I impounded Peluche at the request of [redacted]. I then explained that there is a chicken in a kennel with absolutely no water. [redacted] stated that his aunt told him that the chicken was bitten by Penny and placed in the kennel so the roosters would not "jump on her". I advised that the animals must have potable water at all times. I then explained that citations would be issued and they asked me to leave the property. I exited the property and requested assistance from Pima County Sheriff.

Deputy Rodriguez badge#5819 PCSO case#1603160236, arrived and I explained that citations would need to be issued and the residents are non-compliant. At this time property owner, had arrived.

Deputy Rodriguez spoke with [redacted] and [redacted] and it was decided that [redacted] would accept the citations.

[redacted] was cited into Pima County Justice for the following violations:

- Neglect-Vet Care for Peluche, a black and white poodle mix.
- Leash Law and No License for Penny, a white and black Heeler mix.
- Neglect- No Water for a white and brown chicken.

[redacted] signed her citations; received a copy and was provided her court date and time.

Penny, the Heeler mix was no longer limping and appeared healthy.

On March 17, 2016 I met with Dr. Wilcox regarding the condition of Peluche. She explained other than the obvious severely matted hair; the dog has an abscessed tooth and is tick infested.

Officer Signature

Date

3/19/16

INVESTIGATION REPORT Pima County Health Department Pima Animal Care Center 4000 N. Silverbell Rd Tucson, Arizona 85745 Phone: (520) 724-5900 Fax: (520) 724-5960		SUSPECT			ACO NAME / BADGE #		ACTIVITY/BITE NUMBER	
		SUSPECT'S ADDRESS			D.Robledo #1990		A16-189068	
		CITY	STATE	ZIP	RESIDENCE PHONE NUMBER		BITE <input type="checkbox"/> WELFARE <input checked="" type="checkbox"/> DANGEROUS <input type="checkbox"/>	
		SUSPECT'S BUSINESS ADDRESS			OTHER <input type="checkbox"/>		CI <input checked="" type="checkbox"/> CO <input type="checkbox"/> OTHER <input type="checkbox"/>	
CITY		STATE	ZIP	BUSINESS PHONE NUMBER		DRIVERS LICENSE		
SEX	WEIGHT	HEIGHT	EYES	HAIR	ORIGIN	DOB	SOCIAL SECURITY NUMBER	
DOES THIS INCIDENT REQUIRE VICTIM REQUEST FOR WAIVER OF RIGHTS? YES <input type="checkbox"/> NO <input type="checkbox"/>				DATE AND TIME OF INCIDENT		Date and time reported		
FOOD <input type="checkbox"/> WATER <input type="checkbox"/> SHELTER <input type="checkbox"/> VENTILATION <input type="checkbox"/> ABANDONED <input type="checkbox"/> TIED/UT <input checked="" type="checkbox"/> BEATEN <input type="checkbox"/> WASTE <input type="checkbox"/> INJ / ILL <input type="checkbox"/> OTHER (EXPLAIN) <input type="checkbox"/>				2/29/16 1434hrs.		2/29/16 1405hrs		
<input type="checkbox"/> I CHOOSE "upon request" rights in this case		VICTIM/COMPLAINANT NAME		DATE OF BIRTH		RESIDENCE PHONE		
<input type="checkbox"/> I WAIVE "upon request" rights in this case.		Daniel Robledo				BUSINESS PHONE		
<input type="checkbox"/> REQUEST/WAIVER exception per A.R.S. § 13-4405 (B) and § 8-286 (B)		VICTIM'S ADDRESS		CITY		STATE ZIP		
		4000 N. Silverbell Rd.		Tucson		Az 85745		
NAME OF LAWFUL REPRESENTATIVE (IF APPLICABLE)		DANGEROUS ASSESSMENT REQUESTED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	RESTITUTION REQUESTED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	DANGEROUS CASE NUMBER	OTHER AGENCY CASE # <input type="checkbox"/> SHERIFF DEPT <input type="checkbox"/> TUCSON POLICE <input type="checkbox"/> FIRE <input type="checkbox"/> OTHER:		FOLLOW UP REQUEST <input type="checkbox"/> SD <input type="checkbox"/> TPD <input type="checkbox"/> OTHER:	
<input type="checkbox"/> ADDRESS AND PHONE NUMBER SAME AS VICTIM		<input type="checkbox"/> VIOLATION	BITE SEVERITY:	TREATED BY	PHONE NUMBER	DATE QUARANTINED	PACC <input type="checkbox"/>	
RELATIONSHIP TO VICTIM		<input type="checkbox"/> NON-VIOLATION	PART OF BODY BITTEN:			RELEASE DATE:	VET <input type="checkbox"/>	
PHONE NUMBER		VET CLINIC		PHONE NUMBER	OWNER KNOWS OF BITE YES <input type="checkbox"/> NO <input type="checkbox"/>		HOME <input type="checkbox"/>	
LAWFUL REPRESENTATIVE ADDRESS		CLINIC'S ADDRESS		QUARANTINE (DAYS) 10 <input type="checkbox"/> 15 <input type="checkbox"/> 45 <input type="checkbox"/> 180 <input type="checkbox"/>		<input type="checkbox"/> FRA HEAD#		
		3 rd PARTY CITATIONS YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	CITING ACO D.Tenkate #1911	PREVIOUS VIOLATIONS YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	PREVIOUS CASE NUMBER	OTHER ADDITIONAL REPORTS		
VICTIM OR LAWFUL REPRESENTATIVE SIGNATURE		CODE/DRO VIOLATED 4-3(2)(E)(2)				REVIEWED BY KONST 3/3		
		CITATIONS/NUMBERS 73048				BOND YES <input type="checkbox"/> NO <input type="checkbox"/>		
BREED/DESCRIPTION		ANIMAL'S NAME	COLOR	SEX	AGE	LICENSE #	CONDITION	
rottweiler		Kaizer	blk/bm	m	1y			
VICTIM OWNER <input checked="" type="checkbox"/>								
VICTIM OWNER <input type="checkbox"/>								
VICTIM OWNER <input type="checkbox"/>								
VICTIM OWNER <input type="checkbox"/>								
VICTIM OWNER <input type="checkbox"/>								
VICTIM OWNER <input type="checkbox"/>								
VICTIM OWNER <input type="checkbox"/>								
WITNESS 1		R. Tovar #2021	M <input checked="" type="checkbox"/> F <input type="checkbox"/>	DOB	ADDRESS	RESIDENCE PHONE #	BUSINESS PHONE #	
WITNESS 2			M <input type="checkbox"/> F <input type="checkbox"/>	DOB	ADDRESS	RESIDENCE PHONE #	BUSINESS PHONE #	
WITNESS 3			M <input type="checkbox"/> F <input type="checkbox"/>	DOB	ADDRESS	RESIDENCE PHONE #	BUSINESS PHONE #	
WITNESS 4			M <input type="checkbox"/> F <input type="checkbox"/>	DOB	ADDRESS	RESIDENCE PHONE #	BUSINESS PHONE #	



INVESTIGATION REPORT

PACC Activity: A16-189068

ACO & Badge Daniel Robledo #1990

February 29, 2016 at 1434 hours, I Officer Daniel Robledo #1990, responded to an emergency complaint of a dog tied up to a boat with no water and in distress.

I arrived and observed a rottweiler in question under boat. I can see its tied up with a cable to the back of the boat. I entered the yard through a locked gate by just lifting up the gate. The dog had water, shade, food and shelter; but it was tied up . I went to the front door, but received no answer. The dog would come up from under boat, but then it would go back under. The cable was approximately 30 feet long and appeared it was purposely tangled so the dog could go no further then to its water and food. I took photos. I tried to pull out the dog, but it was scared and it would go back under the boat. I then had Officer Tovar come to assist. We pulled out the dog, cut the cable to release and impound the dog. I posted a notice of impounded

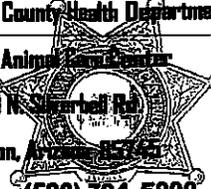
On 3/1/16 1300 hours Supervisor Tenkate #1911 met with the dog owner . who resides at when he came to redeem his impounded dog. She explained that tie outs are illegal and he said he knew that but the dog can jump the fence and may bite someone. She explained that he would need to construct either a covered kennel run or put up higher fencing. He said he was keeping th public safe by tying up his 1 1/2 year old male Rottweiler named Kaizer. said he was going to fix the confinement. Supervisor Tenkate then asked for identification and he provided her with his Arizona driver's license. then signed and received a copy of citation #73048 for neglect tie out and is aware of his court date, time and location. He then returned to licensing to redeem his dog.

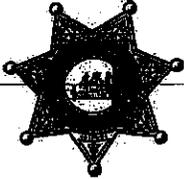
Officer's Signature:

Date:

3-3-16

4

INVESTIGATION REPORT Pima County Health Department  Pima Animal Care Center 4000 N. Silverbell Rd. Tucson, Arizona 85745 Phone: (520) 724-5900 Fax: (520) 724-5960		SUSPECT [REDACTED]		ACD NAME / BADGE # X. Delgadillo 2047		ACTIVITY/BITE NUMBER A16-188156	
SUSPECT'S ADDRESS		CITY		STATE	ZIP	RESIDENCE PHONE NUMBER	
SUSPECT'S BUSINESS ADDRESS		CITY		STATE	ZIP	BUSINESS PHONE NUMBER	
SEX		WEIGHT	HEIGHT	EYES	HAIR	ORIGIN	DOB
						SOCIAL SECURITY NUMBER	
DOES THIS INCIDENT REQUIRE VICTIM REQUEST FOR WAIVER OF RIGHTS? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		LOCATION OF INCIDENT		DATE AND TIME OF INCIDENT		Date and time reported	
		FOOD	WATER	SHELTER	VENTILATION	ABANDONED	TIED OUT
						BEATEN	
						WASTE	
						INJ./ILL	
						OTHER (EXPLAIN) <input checked="" type="checkbox"/> Neglect	
<input type="checkbox"/> I CHOOSE "upon request" rights in this case		VICTIM/COMPLAINANT NAME		DATE OF BIRTH		RESIDENCE PHONE	
<input type="checkbox"/> I WAIVE "upon request" rights in this case.		VICTIM'S ADDRESS		CITY		STATE ZIP	
<input type="checkbox"/> REQUEST/WAIVER exception per A.R.S. § (3-4405 (B) and § 8-286 (B))		VICTIM'S BUSINESS ADDRESS		CITY		STATE ZIP	
NAME OF LAWFUL REPRESENTATIVE (IF APPLICABLE)		DANGEROUS ASSESSMENT REQUESTED YES <input type="checkbox"/> NO <input type="checkbox"/>		RESTITUTION REQUESTED YES <input type="checkbox"/> NO <input type="checkbox"/>		DANGEROUS CASE NUMBER	
						OTHER AGENCY CASE # <input type="checkbox"/> SHERIFF DEPT <input type="checkbox"/> TUCSON POLICE <input type="checkbox"/> FIRE <input type="checkbox"/> OTHER:	
						FOLLOW UP REQUEST <input type="checkbox"/> SO <input type="checkbox"/> TPD <input type="checkbox"/> OTHER:	
<input type="checkbox"/> ADDRESS AND PHONE NUMBER SAME AS VICTIM		<input type="checkbox"/> VIOLATION		BITE SEVERITY:		TREATED BY	
		<input type="checkbox"/> NON-VIOLATION		PART OF BODY BITTEN:		PHONE NUMBER	
						DATE QUARANTINED	
						RELEASE DATE:	
RELATIONSHIP TO VICTIM		VET CLINIC		PHONE NUMBER		OWNER KNOWS OF BITE	
PHONE NUMBER						YES <input type="checkbox"/> NO <input type="checkbox"/>	
LAWFUL REPRESENTATIVE ADDRESS		CLINIC'S ADDRESS		QUARANTINE (DAYS) 10 <input type="checkbox"/> 15 <input type="checkbox"/> 45 <input type="checkbox"/> 180 <input type="checkbox"/>		<input type="checkbox"/> FRA HEAD#	
		3 rd PARTY CITATIONS YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		CITING ACD X. Delgadillo#2047		PREVIOUS VIOLATIONS YES <input type="checkbox"/> NO <input type="checkbox"/>	
						PREVIOUS CASE NUMBER	
						OTHER ADDITIONAL REPORTS	
VICTIM OR LAWFUL REPRESENTATIVE SIGNATURE		CODE/ORD VIOLATED 6.04.110(B) (4)		CITATIONS/NUMBERS 75402		REVIEWED BY 2002 Honst 3/1	
						BOND YES <input type="checkbox"/> NO <input type="checkbox"/>	
BREED/DESCRIPTION		ANIMAL'S NAME		COLOR	SEX	AGE	LICENSE #
Shepherd Mix		Hunter		tan/white	M	9y	none
VICTIM OWNER <input checked="" type="checkbox"/>							CONDITION
VICTIM OWNER <input type="checkbox"/>							deceased
VICTIM OWNER <input type="checkbox"/>							
VICTIM OWNER <input type="checkbox"/>							
VICTIM OWNER <input type="checkbox"/>							
VICTIM OWNER <input type="checkbox"/>							
VICTIM OWNER <input type="checkbox"/>							
VICTIM OWNER <input type="checkbox"/>							
WITNESS 1		M <input checked="" type="checkbox"/> F <input type="checkbox"/>	DOB	ADDRESS		RESIDENCE PHONE #	BUSINESS PHONE #
WITNESS 2		M <input type="checkbox"/> F <input type="checkbox"/>	DOB	ADDRESS		RESIDENCE PHONE #	BUSINESS PHONE #
WITNESS 3		M <input type="checkbox"/> F <input type="checkbox"/>	DOB	ADDRESS		RESIDENCE PHONE #	BUSINESS PHONE #
WITNESS 4		M <input type="checkbox"/> F <input type="checkbox"/>	DOB	ADDRESS		RESIDENCE PHONE #	BUSINESS PHONE #



INVESTIGATION REPORT

PACC Activity: A16-188156

ACO & Badge X. Delgadillo#2047

On February 16, 2016 at approximately 1230 hours Supervisor Tenkate met with _____, who resides at _____ He explained he came to PACC about the dog on dog attack that caused the death of his dog.

He explained the following to Supervisor Tenkate, On 2/6/16 at approximately 1730-1800 hours he witnessed the neighbors 4 large dogs inside his fenced yard attacking his Light tan 9yo neutered Shepherd chow mix named Hunter. The 4 dogs were described as a black/brown Rottie/shepherd/hound mix and 4 lighter brown mixes owned by _____ who resides at _____ also owns 2 smaller white Poodle type mixes that were not involved in the attack.

_____ said that his dog Hunter received numerous wounds to his hind legs and inner thigh area and front legs. He treated the dog himself until Monday 2/8/16 and took Hunter to his own vet at 0830 hours. His dog was treated by _____ at the _____ said that Hunter died at the clinic that day.

Supervisor Tenkate spoke to _____ from _____ who said that Hunter sustained numerous bite wounds and the dog went into shock and his heart stopped. He was given CPR, recovered and was being given inter venous fluids when at about 1230 hours the dog died at the clinic.

On February 23, 2016 I, Investigator Delgadillo #2047 contacted _____ to inquire further on Hunter and left a message for _____. At approximately 18:06 hrs I received an incoming call on my personal cell phone from _____. I inquired about Hunter and the fact that the dog was not taken for vet care for approximately a day and a half. _____ stated that he received Hunter as a patient on 2/8/16 approximately 0835hrs. _____ stated that when Hunter was brought to the clinic he observed him to be "almost gone". _____ was advised of the dog attack that occurred. Hunter had bite wounds to the abdomen area (_____ assumed that the dog had become submissive during the attack) and also a bite wound to his right thigh area. He stated that the owner, _____, explained to him that he saw the dog acting normal so he just cleaned the wounds and sprayed Blukote to the wounds. He stated that the dog was in septic shock, and had to be resuscitated. _____ stated in his professional opinion if the dog would have been brought for medical attention immediately, Hunter would have survived the attack.

Officer's Signature:

Date:

3/1/16

INVESTIGATION REPORT		SUSPECT				ACO NAME / BADGE #		COMPLAINT NUMBER		
Pima County Health Department Pima Animal Care Center 4000 N. Campbell Rd. Tucson, Arizona 85714 Phone: (520) 741-5900 Fax: (520) 724-5960		SUSPECT'S ADDRESS				T. Haynes #2032		A16-190035		
		SUSPECT'S BUSINESS ADDRESS				BITE <input checked="" type="checkbox"/> WELFARE <input checked="" type="checkbox"/> DANGEROUS <input type="checkbox"/> OTHER <input type="checkbox"/>		CODE IF OTHER :		
		ZIP	CITY	STATE	RESIDENCE PHONE NUMBER		CI <input checked="" type="checkbox"/> CO <input type="checkbox"/> OTHER <input type="checkbox"/>		DRIVERS LICENSE	
		SEX	WEIGHT	HEIGHT	EYES	HAIR COLOR	ORIGIN	DOB	SSN	
DOES THIS INCIDENT REQUIRE VICTIM REQUEST FOR WAIVER OF RIGHTS? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		LOCATION OF INCIDENT				DATE AND TIME REPORTED		DATE AND TIME OCCURRED		
						03/16/16 / 2059 hours		03/16/16 / 2030 hours		
		FOOD <input type="checkbox"/> WATER <input type="checkbox"/> SHELTER <input type="checkbox"/> INJURED/ILL <input type="checkbox"/> VENTILATION <input type="checkbox"/> ABANDONED <input type="checkbox"/> TIEOUT <input type="checkbox"/> BEATEN <input type="checkbox"/> WASTE <input type="checkbox"/> OTHER (EXPLAIN) <input checked="" type="checkbox"/> Animal Attack								
<input checked="" type="checkbox"/> I CHOOSE "upon request" rights in this case		VICTIM/COMPLAINANT NAME			D.O.B.		RESIDENCE PHONE NO.		BUSINESS PHONE NO.	
<input type="checkbox"/> I WAIVE "upon request" rights in this case.		VICTIM'S ADDRESS			ZIP		CITY	STATE		
<input type="checkbox"/> REQUEST/WAIVER exception per A.R.S. § 13-4405 (B) and § 8-2385 (B)		VICTIM'S BUSINESS ADDRESS			ZIP		CITY	STATE		
NAME OF LAWFUL REPRESENTATIVE (IF APPLICABLE)		DANGEROUS ASSESSMENT REQUESTED	RESTITUTION REQUESTED	DANGEROUS CASE NUMBER	OTHER AGENCY CASE # 1603160562			FOLLOW UP REQUEST		
		YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		<input type="checkbox"/> SO <input checked="" type="checkbox"/> TPD <input type="checkbox"/> TFD <input type="checkbox"/> OTHER:			<input type="checkbox"/> SO <input type="checkbox"/> TPD <input type="checkbox"/> OTHER:		
<input type="checkbox"/> ADDRESS AND PHONE NUMBER SAME AS VICTIM		<input type="checkbox"/> VIOLATION	BITE SEVERITY:		TREATED BY	PHONE NUMBER	DATE QUARANTINED	PACC <input type="checkbox"/>		
RELATIONSHIP TO VICTIM		<input type="checkbox"/> NON-VIOLATION	PART OF BODY BITTEN:				RELEASE DATE:	VET <input type="checkbox"/>		
PHONE NUMBER		VET CLINIC			PHONE NUMBER	OWNER KNOWS OF BITE		HOME <input type="checkbox"/>		
						YES <input type="checkbox"/> NO <input type="checkbox"/>		FTQ <input type="checkbox"/>		
LAWFUL REPRESENTATIVE ADDRESS		CLINIC'S ADDRESS			QUARANTINE		FRA HEAD#			
					10 <input type="checkbox"/> 15 <input type="checkbox"/> 45 <input type="checkbox"/> 180 <input type="checkbox"/>					
		3RD PARTY CITATIONS	CITING ACO		PREVIOUS VIOLATIONS	PREVIOUS CASE NUMBER	OTHER ADDITIONAL REPORTS			
		YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	T. Haynes #2032		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		A16-186915			
VICTIM OR LAWFUL REPRESENTATIVE SIGNATURE		CODE/ORD VIOLATED						REVIEWED BY		
		4-97, 4-7(2)(B), 4-3(2)(B)						3-20-16		
		CITATIONS/NUMBERS						DTX1911		
		74446, 74447						BOND YES <input type="checkbox"/> NO <input type="checkbox"/>		
BREED/DESCRIPTION VICTIM OR OWNER ANIMAL		ANIMAL'S NAME	COLOR	SEX	AGE	TAG COLOR	LICENSE #	VX CERTIFICATE #	COND	ANIMAL ID#
Pit Bull		VICTIM <input type="checkbox"/> OWNER <input checked="" type="checkbox"/>	Biggie	Tan/White	M	A			inj	
Pit Bull		VICTIM <input type="checkbox"/> OWNER <input checked="" type="checkbox"/>	Bella	White/Tan	F	A			N	
Pit Bull		VICTIM <input checked="" type="checkbox"/> OWNER <input type="checkbox"/>	Chico	Tan/White	M	A			inj	
Husky Mix		VICTIM <input checked="" type="checkbox"/> OWNER <input type="checkbox"/>	Chase	White/Gray	M	5M			inj	
		VICTIM <input type="checkbox"/> OWNER <input type="checkbox"/>								
		VICTIM <input type="checkbox"/> OWNER <input type="checkbox"/>								
		VICTIM <input type="checkbox"/> OWNER <input type="checkbox"/>								
WITNESS 1		M <input checked="" type="checkbox"/> F <input type="checkbox"/>	DOB	ADDRESS			RESIDENCE PHONE #	BUSINESS PHONE #		
Officer Vazquez #44603				4410 S Park Tucson, AZ 85714				(520)741-4949		
WITNESS 2		M <input checked="" type="checkbox"/> F <input type="checkbox"/>	DOB	ADDRESS			RESIDENCE PHONE #	BUSINESS PHONE #		
Sergeant Simmers #44535				4410 S Park Tucson, AZ 85714				(520)741-4949		
WITNESS 3		M <input type="checkbox"/> F <input type="checkbox"/>	DOB	ADDRESS			RESIDENCE PHONE #	BUSINESS PHONE #		
WITNESS 4		M <input type="checkbox"/> F <input type="checkbox"/>	DOB	ADDRESS			RESIDENCE PHONE #	BUSINESS PHONE #		



INVESTIGATION REPORT

Activity Number: A16-190035

ACO name & Badge: T. Haynes #2032

On March 16, 2016 at approximately 2123 hours I arrived at [redacted] and met with Tucson Police Officer Vasquez #44603 and Sergeant Simmers #44535 (1603160562). They had a medium, tan/white, male, Pit Bull confined in the back of the patrol car. They said that the dog lives next door at [redacted] and had jumped the fence and attacked the two dogs at [redacted] in their kennel. The officers said that the dog was acting rather aggressive upon their arrival and they removed the dog from the kennel using a catch pole that they had. They advised that they were unable to make contact with the residents of [redacted] as it appeared that there was no one home. They also said that there was another dog in the yard at [redacted] and that they did not see any water in the yard when they were trying to figure out how the first dog got into the neighbor's yard.

I went to [redacted] and observed a medium, white/tan, female, Pit Bull in the yard. She came up to the fence and was friendly with me. I entered the yard and she stayed with me as I went to the front door and around to the back door. The house was dark and in the yard I found several empty and turned over buckets and bowls. I did not find any water available to the dog. It appeared that the water had been gone for a while. I leashed the white dog and brought her out to impound her due to there not being any water available and the owner not being home.

As I was leaving the yard a male pulled up in a vehicle and spoke with me and the officers. He said that the dogs belonged to his sister and that she was at work. The officers asked if he could contact her and have her come home. He inquired about the other dog, calling him Biggie, as he petted the female. It was explained that we could not give him any information at this time. He then left the scene. I then walked the female to my truck and scanned her and no microchip was detected. I loaded her into my truck and she was impounded without incident.

I then went to the patrol car and started talking to Biggie. He wagged his tail and was friendly with me. I was able to leash him and remove him from the car without any issues. As I was walking him to my truck the male returned with a female and she started yelling at me and the officers. I continued to walk Biggie back to my truck and impounded him without incident.

I returned to where the officers were and attempted to speak to the female and she refused to talk to me. The officers continued to speak with her and I went back into the yard and took photographs of the empty buckets and bowls.

Shortly after I returned to the front yard another vehicle pulled up and a young man

got out and introduced himself to me. He said that his name was and that he was the dog owner. He requested to know what was going on so the officers and I explained that his dog, Biggie, had gotten into the neighbor's yard and had attacked their dogs. I also explained that there was no water available in his yard for his dogs and based on that, both dogs had been impounded. During our conversation, Bella, the name of the second dog, was given.

I requested his identification and he provided me with his Arizona Driver's License. I advised him that he would be receiving citations for the dogs not having any water available. I also told him that I had not spoken to the neighbor yet and that there may be more citations for the attack.

Officer Vazquez and I then went to and met with victim dog owner He said that at approximately 2030 hours he and the family had returned home and as they were pulling their vehicle into the carport they observed the neighbor's tan/white Pit Bull in the kennel with his dogs. He said that his dog, Chico, a male, tan/white, Pit Bull, was cowering in a corner away from the bigger dog and that his second dog, Chase, a male, white/gray, Siberian Husky mix, was also keeping away from the intruding dog. He said that he could see injuries on both of his dogs, especially Chico, from the big dog fighting with them.

said that the big dog tears up the common fence and that he has made multiple repairs to the fence to try and keep him out. He has put sheets of plywood and wire fencing between the yards to keep the dog out of his yard. I could not find any new holes in the fence but I did see an open area at the top of the fence next to the kennel. It appears that Biggie climbed the common fence and got into the kennel through the open corner.

said that he believes that this is not the first time that the big dog has gotten into his yard and attacked his dog. He said that he came home one day about a month ago and found Chico torn up and blood everywhere in the yard. He could only guess that it was the neighbor's dog because he had seen the dog stick its head through the holes that he had made in the fence. is requesting citations for the incident and restitution for vet bills. Chico and Chase's injuries from tonight were photographed. I requested identification and he provided me with his Arizona Driver's License. I advised him that I would return it as soon as I was done with the citations for the neighbor.

Citation #74446 was issued to for Neglect-No Water for both dogs and third party citation #74447 was issued to for leash law and biting animal (animal attack) X2 for Biggie. Citation, court date, time, and location were explained to He acknowledged, signed and received a copy of both citations. I also provided him with a copy of the Pet-Fix flyer and the Pima County Animal Law pamphlet. His Arizona Driver's License was then returned to him. I discussed with him several different remedies that he could use to keep his dogs from running out of water and gave him some suggestions about fencing to keep this from happening again. Biggie and Bella were then returned to him.

I then went and met with I provided him a copy of the Pet-Fix flyer and a copy of the Pima County Animal Laws pamphlet. He was very upset that Biggie was returned to It was explained that I could not keep the dog and hopefully the citations were enough for him to keep the dog confined. Officer Vazquez and I then cleared the scene.

Officer's Signature: JHaynes

Date: 03.19.16

INVESTIGATION REPORT		SUSPECT				ACO NAME / BADGE #		COMPLAINT NUMBER			
Pima County Health Department Pima Animal Care Center 4000 N. Silverbell Rd Tucson, Arizona 85711 Phone: (520) 243-5900 Fax: (520) 243-5990 www.pimaanimalcare.org		SUSPECT'S ADDRESS				1942 Eckelbarger		A16-190250			
		SUSPECT'S BUSINESS ADDRESS				BITE <input type="checkbox"/> WELFARE <input checked="" type="checkbox"/> DANGEROUS <input type="checkbox"/> OTHER <input type="checkbox"/>		CODE IF OTHER :			
		ZIP	CITY	STATE	RESIDENCE PHONE NUMBER						
		SUSPECT'S BUSINESS ADDRESS				CI <input checked="" type="checkbox"/> CO <input type="checkbox"/> OTHER <input type="checkbox"/>		DRIVERS LICENSE			
ZIP	CITY	STATE	BUSINESS PHONE NUMBER		DOB		SSN				
SFX	WEIGHT	HEIGHT	EYES	HAIR COLOR	ORIGIN	DATE AND TIME REPORTED		DATE AND TIME OCCURRED			
LOCATION OF INCIDENT					3-21-16 / 1345		3-21-16 / 1345				
DOES THIS INCIDENT REQUIRE VICTIM REQUEST FOR WAIVER OF RIGHTS? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		4000 N. Silverbell Rd				FOOD <input type="checkbox"/> WATER <input type="checkbox"/> SHELTER <input type="checkbox"/> INJURED/ILL <input checked="" type="checkbox"/> VENTILATION <input type="checkbox"/>		ABANDONED <input type="checkbox"/> TIEOUT <input type="checkbox"/> BEATEN <input type="checkbox"/> WASTE <input type="checkbox"/> OTHER (EXPLAIN)			
<input type="checkbox"/> I CHOOSE "upon request" rights in this case		VICTIM/COMPLAINANT NAME			D.O.B		RESIDENCE PHONE NO.		BUSINESS PHONE NO.		
<input type="checkbox"/> I WAIVE "upon request" rights in this case.		1942 Eckelbarger					724-5992				
<input type="checkbox"/> REQUEST/WAIVER exception per A.R.S. § 13-4405 (B) and § 8-286 (B)		VICTIM'S ADDRESS			ZIP		CITY		STATE		
		4000 N. Silverbell Rd			85745		Tucson		AZ		
NAME OF LAWFUL REPRESENTATIVE (IF APPLICABLE)		DANGEROUS ASSESSMENT REQUESTED	RESTITUTION REQUESTED	DANGEROUS CASE NUMBER	OTHER AGENCY CASE #			FOLLOW UP REQUEST			
		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		<input type="checkbox"/> SO <input type="checkbox"/> TPD <input type="checkbox"/> TFD <input type="checkbox"/> OTHER:			<input type="checkbox"/> SO <input type="checkbox"/> TPD <input type="checkbox"/> OTHER:			
<input type="checkbox"/> ADDRESS AND PHONE NUMBER SAME AS VICTIM		<input type="checkbox"/> VIOLATION	BITE SEVERITY:		TREATED BY	PHONE NUMBER	DATE QUARANTINED		PACC <input type="checkbox"/>		
RELATIONSHIP TO VICTIM		<input type="checkbox"/> NON-VIOLATION	PART OF BODY BITTEN:				RELEASE DATE:		VET <input type="checkbox"/>		
PHONE NUMBER		VET CLINIC		PHONE NUMBER	OWNER KNOWS OF BITE		FTQ <input type="checkbox"/>		HOME <input type="checkbox"/>		
LAWFUL REPRESENTATIVE ADDRESS					YES <input type="checkbox"/> NO <input type="checkbox"/>		UTQ <input type="checkbox"/>				
		CLINIC'S ADDRESS		QUARANTINE	10 <input type="checkbox"/> 15 <input type="checkbox"/> 45 <input type="checkbox"/> 180 <input type="checkbox"/>		FRA HEAD#				
		3RD PARTY CITATIONS	CITING ACO	PREVIOUS VIOLATIONS	PREVIOUS CASE NUMBER	OTHER ADDITIONAL REPORTS					
		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	1942 Eckelbarger	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>							
VICTIM OR LAWFUL REPRESENTATIVE SIGNATURE		CODE/ORD VIOLATED					REVIEWED BY		BOND		
		4-3 (Z)(D)					3-22-16		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		
		CITATIONS/NUMBERS					DTR 1911				
		75482 (A)									
BREED/DESCRIPTION VICTIM OR OWNER ANIMAL		ANIMAL'S NAME		COLOR	SEX	AGE	TAG COLOR	LICENSE #	VX CERTIFICATE #	COND	ANIMAL ID#
Lab mix		Buddy		Cream	M	10yr				P	
VICTIM OWNER <input type="checkbox"/>											
OWNER <input checked="" type="checkbox"/>											
VICTIM OWNER <input type="checkbox"/>											
OWNER <input type="checkbox"/>											
VICTIM OWNER <input type="checkbox"/>											
OWNER <input type="checkbox"/>											
WITNESS 1		M <input type="checkbox"/> F <input checked="" type="checkbox"/>	DOB	ADDRESS			RESIDENCE PHONE #		BUSINESS PHONE #		
Dr. Karyn Carlson				4000 N. Silverbell Rd					724-5900		
WITNESS 2		M <input type="checkbox"/> F <input type="checkbox"/>	DOB	ADDRESS			RESIDENCE PHONE #		BUSINESS PHONE #		
WITNESS 3		M <input type="checkbox"/> F <input type="checkbox"/>	DOB	ADDRESS			RESIDENCE PHONE #		BUSINESS PHONE #		
WITNESS 4		M <input type="checkbox"/> F <input type="checkbox"/>	DOB	ADDRESS			RESIDENCE PHONE #		BUSINESS PHONE #		

INVESTIGATION REPORT



Activity Number: A16-190250

ACO name & Badge: 1942 Eckelbarger

On 3-21-16 at 1345 hours I Investigator Eckelbarger (1942) met with dog owner, _____, at the Pima Animal Care Center while she was signing over her dog "Buddy" for euthanasia. _____ stated she first started noticing Buddy losing weight about 1 month prior. She also had stated that Buddy had a seizure approximately 1 month prior after changing his food. She stated it had been years since Buddy's last veterinary visit. She stated that he stopped eating and drinking on 3-20-16 and could no longer walk. _____ stated she has owned Buddy for all 10 years of his life.

I then observed Buddy who appeared emaciated. I could easily see his rib, hip, and skull bones. He was barely able to lift his head and could not walk. I took photographs of the dog and setup for Dr. Carlson to examine for a welfare case.

I then cited _____ for neglect-vet care on "Buddy" under City jurisdiction. _____ signed and received her copy of the citation.

Officer's Signature:

[Handwritten signature]
1942

Date: 3-22-16

INVESTIGATION REPORT

Pima County Health Department
 Pima Animal Care Center
 4000 N. Silverbell Rd
 Tucson, Arizona 85712
 Phone: (520) 743-6969
 Fax: (520) 243-5960
 www.pimaanimalcare.org



SUSPECT				ACO NAME / BADGE # 1942 Eckelbarger				COMPLAINT NUMBER A16-188629					
SUSPECT'S ADDRESS								BITE <input type="checkbox"/> WELFARE <input checked="" type="checkbox"/> DANGEROUS <input type="checkbox"/> OTHER <input type="checkbox"/>					
ZIP		CITY		STATE		RESIDENCE PHONE NUMBER				CODE IF OTHER :			
SUSPECT'S BUSINESS ADDRESS								CI <input checked="" type="checkbox"/> CO <input type="checkbox"/> OTHER <input type="checkbox"/>					
ZIP		CITY		STATE		BUSINESS PHONE NUMBER				DRIVER'S LICENSE			
SEX	WEIGHT	HEIGHT	FYFR	HAIR COLOR		ORIGIN		DOB		SSN			
DOES THIS INCIDENT REQUIRE VICTIM REQUEST FOR WAIVER OF RIGHTS? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>				LOCATION OF INCIDENT				DATE AND TIME REPORTED 2-22-16 / 1359		DATE AND TIME OCCURRED 3-21-16 / 1530			
FOOD	WATER	SHELTER	INJURED/ILL	VENTILATION	ABANDONED	TIEOUT	BEATEN	WASTE	OTHER (EXPLAIN)				
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/> I CHOOSE "upon request" rights in this case	VICTIM/COMPLAINANT NAME 1942 Eckelbarger				D.O.B		RESIDENCE PHONE NO.		BUSINESS PHONE NO. 724-5992				
<input type="checkbox"/> I WAIVE "upon request" rights in this case.	VICTIM'S ADDRESS						ZIP		CITY	STATE			
<input type="checkbox"/> REQUEST/WAIVER exception per A.R.S. § 13-4405 (B) and § 8-288 (B)	VICTIM'S BUSINESS ADDRESS 4000 N. Silverbell Rd						ZIP 85745		CITY Tucson	STATE AZ			
NAME OF LAWFUL REPRESENTATIVE (IF APPLICABLE)	DANGEROUS ASSESSMENT REQUESTED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		RESTITUTION REQUESTED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		DANGEROUS CASE NUMBER		OTHER AGENCY CASE # <input type="checkbox"/> SO <input type="checkbox"/> TPD <input type="checkbox"/> TFD <input type="checkbox"/> OTHER:		FOLLOW UP REQUEST <input type="checkbox"/> SO <input type="checkbox"/> TPD <input type="checkbox"/> OTHER:				
<input type="checkbox"/> ADDRESS AND PHONE NUMBER SAME AS VICTIM	<input type="checkbox"/> VIOLATION		BITE SEVERITY:		TREATED BY		PHONE NUMBER		DATE QUARANTINED		PACC <input type="checkbox"/>		
RELATIONSHIP TO VICTIM	<input type="checkbox"/> NON-VIOLATION		PART OF BODY BITTEN:						RELEASE DATE:		VET <input type="checkbox"/>		
PHONE NUMBER	VET CLINIC				PHONE NUMBER		OWNER KNOWS OF BITE YES <input type="checkbox"/> NO <input type="checkbox"/>				HOME <input type="checkbox"/>		
LAWFUL REPRESENTATIVE ADDRESS	CLINIC'S ADDRESS				QUARANTINE 10 <input type="checkbox"/> 15 <input type="checkbox"/> 45 <input type="checkbox"/> 180 <input type="checkbox"/>				FRA HEAD# <input type="checkbox"/>				
	3RD PARTY CITATIONS YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		CITING ACO 1942 Eckelbarger		PREVIOUS VIOLATIONS YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		PREVIOUS CASE NUMBER		OTHER ADDITIONAL REPORTS				
VICTIM OR LAWFUL REPRESENTATIVE SIGNATURE	CODE/ORD VIOLATED 4-3 (2)(E)(2), 4-3 (2)(B)								REVIEWED BY 3-22-16 DTK/1911				
	CITATIONS/NUMBERS 75491 (A-B)								BOND YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>				
BREED/DESCRIPTION VICTIM OR OWNER ANIMAL		ANIMAL'S NAME		COLOR		SEX	AGE	TAG COLOR	LICENSE #	VX CERTIFICATE #	COND	ANIMAL ID#	
G. Shep		Chloe		Black/tan		F	7mo				Ok		
VICTIM OWNER <input type="checkbox"/>	OWNER <input checked="" type="checkbox"/>												
VICTIM OWNER <input type="checkbox"/>	OWNER <input type="checkbox"/>												
VICTIM OWNER <input type="checkbox"/>	OWNER <input type="checkbox"/>												
VICTIM OWNER <input type="checkbox"/>	OWNER <input type="checkbox"/>												
VICTIM OWNER <input type="checkbox"/>	OWNER <input type="checkbox"/>												
VICTIM OWNER <input type="checkbox"/>	OWNER <input type="checkbox"/>												
WITNESS 1	M <input type="checkbox"/> F <input type="checkbox"/>		DOB		ADDRESS				RESIDENCE PHONE #		BUSINESS PHONE #		
WITNESS 2	M <input type="checkbox"/> F <input type="checkbox"/>		DOB		ADDRESS				RESIDENCE PHONE #		BUSINESS PHONE #		
WITNESS 3	M <input type="checkbox"/> F <input type="checkbox"/>		DOB		ADDRESS				RESIDENCE PHONE #		BUSINESS PHONE #		
WITNESS 4	M <input type="checkbox"/> F <input type="checkbox"/>		DOB		ADDRESS				RESIDENCE PHONE #		BUSINESS PHONE #		



INVESTIGATION REPORT

Activity Number: A16-188629

ACO name & Badge:1942 Eckelbarger

On 3-21-16 at 1520 hours I Investigator Eckelbarger (1942) responded to [redacted] where I met with [redacted] who showed me "Chloe" (7month old female G. Shepherd) in the backyard. Chloe was on a chain tie-out approximately 20 feet long. She had some access to shade at the time I responded, but no water. The water bowl was empty and dry. Chloe appeared to be panting as well and it was approximately 90 degrees Fahrenheit outdoors. [redacted] stated Chloe belongs to her adult daughter who was in Mexico so [redacted] was the caretaker of Chloe. I advised of the tie-out law and the need for water at all times. She stated their confinement was not secure (no gates), which was why she was tied out. She stated Chloe did not get along with her other daughter's small Maltese who was indoors which was another reason why Chloe was tied outside.

I then cited [redacted] for neglect-tieout and neglect-no water on Chloe under City jurisdiction. [redacted] signed and received her copies of the citations. I then had [redacted] put Chloe indoors in a separate bedroom. I advised we would be back out for a follow-up in 2 weeks. I also took photographs of Chloe on tie-out and the empty water bowl.

Officer's Signature:

Date: 3-22-16

INVESTIGATION REPORT Pima County Health Department Pima Animal Care Center 4000 N. Silverbell Rd. Tucson, Arizona 85745 Phone: (520) 724-5900 Fax: (520) 724-5960		SUSPECT				ACD NAME / BADGE # Konst #2002		ACTIVITY/BITE NUMBER A16-190392													
		SUSPECT'S ADDRESS																			
		CITY		STATE		ZIP		RESIDENCE PHONE NUMBER													
		SUSPECT'S BUSINESS ADDRESS																			
		CITY		STATE		ZIP		BUSINESS PHONE NUMBER													
		SEX		WEIGHT		HEIGHT		EYES		HAIR		ORIGIN		DOB		SOCIAL SECURITY NUMBER					
DOES THIS INCIDENT REQUIRE VICTIM REQUEST FOR WAIVER OF RIGHTS? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		LOCATION OF INCIDENT				DATE AND TIME OF INCIDENT				Date and time reported											
		FOOD		WATER		SHELTER		VENTILATION		ABANDONED		TIED/OUT		BEATEN		WASTE		INJ / ILL		OTHER (EXPLAIN)	
<input type="checkbox"/> I CHOOSE "upon request" rights in this case		VICTIM/COMPLAINANT NAME				DATE OF BIRTH		RESIDENCE PHONE				BUSINESS PHONE									
<input type="checkbox"/> I WAIVE "upon request" rights in this case.		VICTIM'S ADDRESS				CITY		STATE		ZIP											
<input type="checkbox"/> REQUEST/WAIVER exception per A.R.S. § 13-4405 (B) and § 8-286 (B)		VICTIM'S BUSINESS ADDRESS				CITY		STATE		ZIP											
NAME OF LAWFUL REPRESENTATIVE (IF APPLICABLE)		DANGEROUS ASSESSMENT REQUESTED YES <input type="checkbox"/> NO <input type="checkbox"/>		RESTITUTION REQUESTED YES <input type="checkbox"/> NO <input type="checkbox"/>		DANGEROUS CASE NUMBER		OTHER AGENCY CASE # <input type="checkbox"/> SHERIFF DEPT <input type="checkbox"/> TUCSON POLICE <input type="checkbox"/> FIRE <input type="checkbox"/> OTHER:				FOLLOW UP REQUEST <input type="checkbox"/> SD <input type="checkbox"/> TPD <input type="checkbox"/> OTHER:									
<input type="checkbox"/> ADDRESS AND PHONE NUMBER SAME AS VICTIM		<input type="checkbox"/> VIOLATION <input type="checkbox"/> NON-VIOLATION		BITE SEVERITY: PART OF BODY BITTEN:		TREATED BY		PHONE NUMBER		DATE QUARANTINED		PACC <input type="checkbox"/>		VET <input type="checkbox"/>		HOME <input type="checkbox"/>					
RELATIONSHIP TO VICTIM		VET CLINIC				PHONE NUMBER		OWNER KNOWS OF BITE YES <input type="checkbox"/> NO <input type="checkbox"/>				FTQ <input type="checkbox"/>		UTQ <input type="checkbox"/>							
LAWFUL REPRESENTATIVE ADDRESS		CLINIC'S ADDRESS				QUARANTINE (DAYS) 10 <input type="checkbox"/> 15 <input type="checkbox"/> 45 <input type="checkbox"/> 180 <input type="checkbox"/>		FRA HEAD#													
		3 rd PARTY CITATIONS YES <input type="checkbox"/> NO <input type="checkbox"/>		CITING ACD Konst #2002		PREVIOUS VIOLATIONS YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		PREVIOUS CASE NUMBER		OTHER ADDITIONAL REPORTS											
VICTIM OR LAWFUL REPRESENTATIVE SIGNATURE		CODE/ORD VIOLATED 4-3 (2) (D)				CITATIONS/NUMBERS				REVIEWED BY 2002 KONST 3/23 BOND YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>											
BREED/DESCRIPTION		ANIMAL'S NAME		COLOR		SEX		AGE		LICENSE #		CONDITION		ANIMAL ID#							
Lab mix		Orla		Tan		F		15y				Poor									
VICTIM OWNER <input checked="" type="checkbox"/>																					
VICTIM OWNER <input type="checkbox"/>																					
VICTIM OWNER <input type="checkbox"/>																					
VICTIM OWNER <input type="checkbox"/>																					
VICTIM OWNER <input type="checkbox"/>																					
VICTIM OWNER <input type="checkbox"/>																					
VICTIM OWNER <input type="checkbox"/>																					
WITNESS 1		M <input type="checkbox"/> F <input checked="" type="checkbox"/>		DOB		ADDRESS		RESIDENCE PHONE #		BUSINESS PHONE #											
WITNESS 2 Dr Rios		M <input type="checkbox"/> F <input checked="" type="checkbox"/>		DOB		ADDRESS 4000 N Silverbell Rd		RESIDENCE PHONE #		BUSINESS PHONE #											
WITNESS 3		M <input type="checkbox"/> F <input type="checkbox"/>		DOB		ADDRESS		RESIDENCE PHONE #		BUSINESS PHONE #											
WITNESS 4		M <input type="checkbox"/> F <input type="checkbox"/>		DOB		ADDRESS		RESIDENCE PHONE #		BUSINESS PHONE #											



INVESTIGATION REPORT

PACC Activity: A16-190392

ACO & Badge Konst #2002

On 03/23/16 brought his 15 year old Lab mix named Orla in for euthanasia. I Supervisor Konst badge #2002 was at the intake door area for another matter. I was then asked to look at the dog by Kennel Technician II . She had concerns over the condition of the dog and the owners statement the dog had not been to a Veterinarian since it was a puppy.

I observed Orla to be laying in a stainless steel rolling kennel. I could see the dogs rear back area had been shaved and appeared to have some hair loss and areas of skin loss. On the center back I observed the hair to be moving with solid masses of maggots under the hair. I was told by the owner that they had decided to bring the dog in after they observed maggots coming from the anal area of Orla. They stated the dog has had incontinence since it was spade as a puppy over 14 years ago. The owner also stated they have never had the dog to a Veterinarian since it was spade. I ask if it ever had a rabies vaccination; stated not since it was a puppy.

They did not notice any change until a couple of months ago. Then a couple of days ago the dog was no longer active. So him and the family decided it was time to put Orla down. A family member had shaved the rear back area recently because of the maggots.

I explained to that the Pima Animal Care Center Veterinarian felt the dog was neglected. The dog did not get in this condition in a short time. The condition on the skin came from being constantly wet and does not spread rapidly. The maggots coming from inside Orla shows the dog has had a infection for awhile. I issued citation 73770 for Neglect no Vet care in Tucson City Court. The citation was explained and stated he understood. ...2002

Officer's Signature:

Konst

Date:

3/23/16

Report Snapshot								Officer's Case Report													
DOES THIS INCIDENT REQUIRE VICTIM REQUEST FOR WAIVER OF RIGHTS? YES <input type="checkbox"/> NO <input type="checkbox"/>		TYPE OF INCIDENT FOOD <input type="checkbox"/> WATER <input type="checkbox"/> SHELTER <input type="checkbox"/> VENTILATION <input type="checkbox"/> ABANDONED <input type="checkbox"/> TIED/OUT <input type="checkbox"/> BEATEN <input type="checkbox"/> WASTE <input type="checkbox"/> BJJ/ILL <input checked="" type="checkbox"/> OTHER (EXPLAIN) <input type="checkbox"/>				DATE AND TIME OF INCIDENT 03.17.16 1750		Date and time reported 03.04.16 1400		Pima Animal Care Veterinarian Dr. Jennifer Wilcox DVM has asked for an investigation into a recently adopted dog for neglecting to get veterinary care. March 17th 2016 at approximately 1738 hrs. I, Officer Baugus 1918 arrived at on vet care required for Maya, an adult female blue and white Pit Bull. to check Per Dr. Wilcox, On March 9th 2016 I called the clinic at PACC because the dog Maya was straining to urinate and crying. stated that she had taken Maya to a vet on the list provided upon adoption and was told the dog has a urinary tract infection but did not have any money to purchase the needed medication to treat the dog. I wanted Dr. Wilcox to provide the medication. I was told at that time that the dog was not PACC's dog any longer, needed to take the dog to a vet for an exam and provide the medications for treatment was also advised that if she did not get treatment for the dog within four days, an Officer would investigate this case for cruelty and neglect. On March 17th 2016, eight days later. a complaint was put in for an Officer to investigate. I arrived at 1738 hrs. and met with I asked about vet care for Maya and I was told the dog had an appointment tomorrow. (03.18.16) I asked for identification and I issued a citation for neglect-no vet care. I advised that after her appointment, she was to have the proof of vet care and the Dr's notes faxed to PACC by 6PM on the 18th of march. If the dog was in fact seen and received treatment, I would void the citation. If I did not receive the proof, the citation would go through. I signed the citation and received her copy. I then gave her a notice to give to the vet that outlined what we needed faxed and when. stated she understood. I asked what vet she had an appointment with and stated she did not have an appointment yet, she was going to go down the list she was provided to see if she can get an appointment. I explained again that she had to have the dog treated, it has already been too long. I asked where Maya was now and she said the dog was in the back yard. I asked to see the dog and 1111as let into the back yard. The dog was friendly, wagging her tail and appeared happy. I and her husband(?) stated Maya is a house dog and is not left outdoors. I noted the small back yard smelled of animal waste. There was minimal waste on the ground, but there was a large garbage near the gate full of feces. There was a pan of water provided. No shelter. I again asked about where the dog spent most of her time. I was told that Maya is like one of her kids and she is an indoor dog. stated that she has been giving Maya unsweetened cranberry juice to treat the urinary tract infection for the last week, and she seems to think it is helping. I advised that home remedy's (like the cranberry juice) is most helpful at the onset of symptoms, but not so when the illness is a full blown infection as in this case. I advised I again that if we do not receive proof of vet care within 24 hrs. the citation will go through and the dog will be impounded. The husband stated that the dog is putting out more urine now and she does not cry like before. She is still straining however and painful. March 19th 2016 at approximately 1450 hrs. As of today, March 19th 2016 Pima Animal Care Center has not heard from the dog owners or received any veterinary paperwork to show that Maya has been examined and received treatment for her urinary tract infection. The citations are going through and the dog will be impounded.											
<input type="checkbox"/> I CHOOSE "upon request" rights in this case. <input type="checkbox"/> I WAIVE "upon request" rights in this case.		VICTIM/COMPLAINANT NAME Dr. Jennifer Wilcox DVM		DATE OF BIRTH		RESIDENCE PHONE		BUSINESS PHONE 724.5900													
		VICTIM'S ADDRESS		CITY Tucson		STATE Az		ZIP 85745													
<input type="checkbox"/> REQUEST/WAIVER exception per A.R.S. 9 (3-4405 (RD) and 9-8-206 (D))		VICTIM'S BUSINESS ADDRESS 4000 N Silverbell Rd		CITY Tucson		STATE Az		ZIP 85745													
NAME OF LAWFUL REPRESENTATIVE (IF APPLICABLE)		DANGEROUS ASSESSMENT REQUESTED YES <input type="checkbox"/> NO <input type="checkbox"/>		RESTITUTION REQUESTED YES <input type="checkbox"/> NO <input type="checkbox"/>		DANGEROUS CASE NUMBER		OTHER AGENCY CASE # <input type="checkbox"/> SHERIFF DEPT <input type="checkbox"/> TUCSON POLICE <input type="checkbox"/> FIRE <input type="checkbox"/> OTHER:										FOLLOW UP REQUEST <input type="checkbox"/> SO <input type="checkbox"/> TPD <input type="checkbox"/> OTHER:			
<input type="checkbox"/> ADDRESS AND PHONE NUMBER SAME AS VICTIM		<input type="checkbox"/> VIOLATION		BITE SEVERITY:		TREATED BY		PHONE NUMBER										DATE QUARANTINED		PACC YES <input type="checkbox"/> HOME <input type="checkbox"/>	
		<input type="checkbox"/> NON-VIOLATION		PART OF BODY BITTEN:														RELEASE DATE:			
RELATIONSHIP TO VICTIM		VET CLINIC		PHONE NUMBER		OWNER KNOWS OF BITE YES <input type="checkbox"/> NO <input type="checkbox"/>												FTO <input type="checkbox"/> LTD <input type="checkbox"/>			
LAWFUL REPRESENTATIVE ADDRESS		CLINIC'S ADDRESS		QUARANTINE (DAYS) 10 <input type="checkbox"/> 15 <input type="checkbox"/> 45 <input type="checkbox"/> 180 <input type="checkbox"/>		<input type="checkbox"/> FRA HEAD#															
		<input checked="" type="checkbox"/> 3 rd PARTY CITATIONS YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		CITING ACO K. Baugus 1918		PREVIOUS VIOLATIONS YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		PREVIOUS CASE NUMBER										OTHER ADDITIONAL REPORTS			
VICTIM OR LAWFUL REPRESENTATIVE SIGNATURE		CODE/ORD VIOLATED 4-3 (2)(D)		CITATIONS/NUMBERS 75554		REVIEWED BY Kromer 3/19		BOND YES <input type="checkbox"/> NO <input type="checkbox"/>													
BREED/DESCRIPTION		ANIMAL'S NAME		COLOR		SEX		AGE		LICENSE #		CONDITION									
Pit Bull		Maya		Blue/White		SF		6yrs				ill									
<input type="checkbox"/> VICTIM OWNER <input checked="" type="checkbox"/>																					
Summary																					
The dog was impounded, treated and is currently with a foster.																					

Committee Member Comments/ Request for Information	Member
	T. Barrick
Please add owner(s) to do not adopt list. At court appearance, if possible, request owner be prohibited from owning animals under the cruelty statute.	N. Emptage
	P. Hubbard
	P. Jacobs
	S. Kaluzniacki
	D. Marshall
	H. Mendelsohn
	J. Neumann
	E. O'Donnell
	J. Schwerin
Do we have an outcome as of now? Please have a report for our PACC AC meeting. If no care given, can the dog be taken back to PACC?	G. Smith
	City of Tucson Rep.

Report Snapshot										Officer's Case Report									
DOES THIS INCIDENT REQUIRE VICTIM REQUEST FOR WAIVER OF RIGHTS? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>					LOCATION OF INCIDENT FEED <input type="checkbox"/> WATER <input type="checkbox"/> SHELTER <input type="checkbox"/> VENTILATION <input type="checkbox"/> ABANDONED <input type="checkbox"/> TIED/UT <input type="checkbox"/> BEATEN <input type="checkbox"/> WASTE <input type="checkbox"/> INJ/ILL <input type="checkbox"/> OTHER (EXPLAIN) <input type="checkbox"/>					DATE AND TIME OF INCIDENT 03/16/17 17:43					Date and time reported 11/30/15 12:22				
<input type="checkbox"/> I CHOOSE "upon request" rights in this case.					VICTIM/COMPLAINANT NAME					DATE OF BIRTH					RESIDENCE PHONE				
<input type="checkbox"/> I WAIVE "upon request" rights in this case.					VICTIM'S ADDRESS					CITY					STATE ZIP				
<input type="checkbox"/> REQUEST/WAIVER exception per A.R.S. § 13-1405 (B) and § 8-286 (B)					VICTIM'S BUSINESS ADDRESS					CITY					STATE ZIP				
NAME OF LAWFUL REPRESENTATIVE (IF APPLICABLE)					DANGEROUS ASSESSMENT REQUESTED YES <input type="checkbox"/> NO <input type="checkbox"/>					RESTITUTION REQUESTED YES <input type="checkbox"/> NO <input type="checkbox"/>					DANGEROUS CASE NUMBER				
<input type="checkbox"/> ADDRESS AND PHONE NUMBER SAME AS VICTIM					<input type="checkbox"/> VIOLATION					BITE SEVERITY:					TREATED BY				
RELATIONSHIP TO VICTIM					<input type="checkbox"/> NON-VIOLATION					PART OF BODY BITTEN:					PHONE NUMBER				
PHONE NUMBER					VET CLINIC					PHONE NUMBER					OWNER KNOWS OF BITE YES <input type="checkbox"/> NO <input type="checkbox"/>				
LAWFUL REPRESENTATIVE ADDRESS					CLINIC'S ADDRESS					QUARANTINE (DAYS) 10 <input type="checkbox"/> 15 <input type="checkbox"/> 45 <input type="checkbox"/> 180 <input type="checkbox"/>					FRA HEAD#				
VICTIM OR LAWFUL REPRESENTATIVE SIGNATURE					2 nd PARTY CITATIONS YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>					CITING ACD					PREVIOUS VIOLATIONS YES <input type="checkbox"/> NO <input type="checkbox"/>				
CODE/ORD VIOLATED 6.04.110(B)(4)					CITATIONS/NUMBERS 75410					PREVIOUS CASE NUMBER					OTHER ADDITIONAL REPORTS				
BREED/DESCRIPTION					ANIMAL'S NAME					COLOR					SEX				
Poodle Mix					Peluche					White/Black					M Adult				
Heeler Mix					Penny					White/Black					F Adult Cited				
Fowl					None					White/Brown					F Adult				
Summary																			
The owner was cited for neglect no Vet care, neglect no water on the chicken. The dog Peluche was surrendered and has since been adopted. This complaint is closed.																			
Committee Member Comments/ Request for Information															Member				
Since they had not complied on recheck is there any plan on future rechecks for the animals remaining on the property?															T. Barrick				
															N. Emptage				
															P. Hubbard				
															P. Jacobs				
															S. Kaluzniacki				
															D. Marshall				
Did the other animals have potable water on re-check?															H. Mendelsohn				
															J. Neumann				
															E. O'Donnell				
															J. Schwerin				
What about the limping pregnant pit bull? Was that dog rechecked, and what is the outcome?															G. Smith				
															City of Tucson Rep.				

On December 1, 2015 at approximately 16:22, Officer Delgadillo #2047, arrived to in reference to a Neglect- emaciated animal(s) complaint. I drove into the property through the open gate, where I met with I explained that the dogs must be confined at all time while out in the yard; she stated she left to pick up her daughter and that is why the gates were left open. I observed a white and black poodle mix who was Identified as Peluche. Peluche was severely matted and In desperate need of grooming/vet care. She explained that the dog just showed up one day; I explained after 5 days, the dog is considered hers. I asked If she wanted to relinquish ownership; she declined as she would take him to the groomers. The other dog, Penny, a white with black spots Heeler mix is pregnant and Is limping. She stated that she did not know why. We then walked the property and I advised her the horses, goat and fowl must have potable water at all times; understand the water is self-watering but the container must be clean and free of algae. I provided her a premise Inspection for vet care for both dogs; excessive waste clean up and potable water for all the animals. I advised a re-check would be conducted. stated that she understood and signed the premise Inspection form. I also provided her with the Pet fix program flier and advised of licensing requirements On March 16, 2016 at approximately 17:43 I, Investigator Delgadillo #2047 arrived to to conduct a re-check of the welfare of the animals. I drove through the open gates and the heeler mix Penny greeted me at the gate. I met with. I asked If 1 was available and he contacted her via cell phone; she arrived shortly after. I advised that I walked the property and the condition of the animals had not improved since my last visit on 12/11/15. She then stated that she was not the property owner and that her mother is the owner of the animals. I questioned why did she state and sign the premise inspection on my first visit as the property owner. He Immediately declined stated that she did not sign any document. I explained that Peluche"s condition has not changed and that the dog Is severely matted which is a violation of negelct. She stated that she has been calling PACC to pick up the stray dog. I reminded her that my visit I offered to take Peluche and she wanted to keep him and obtain grooming for him.

Report Snapshot										Officer's Case Report													
DOES THIS INCIDENT REQUIRE VICTIM REQUEST FOR WAIVER OF RIGHTS? YES <input type="checkbox"/> NO <input type="checkbox"/>		LOCATION OF INCIDENT FOOD <input type="checkbox"/> WATER <input type="checkbox"/> SHELTER <input type="checkbox"/> VENTILATION <input type="checkbox"/> ABANDONED <input type="checkbox"/> TIED/UT <input checked="" type="checkbox"/> BEATEN <input type="checkbox"/> WASTE <input type="checkbox"/> INJ/ILL <input type="checkbox"/> OTHER (EXPLAIN) <input type="checkbox"/>				DATE AND TIME OF INCIDENT 2/29/16 1434hrs. 2/29/16 1405hrs						February 29, 2016 at 1434 hours, I Officer Daniel Robledo #1990, responded to an emergency complaint of a dog tied up to a boat with no water and in distress. I arrived and observed a rottweiler in question under boat I can see its tied up with a cable to the back of the boat. I entered the yard through a locked gate by just lifting up the gate. The dog had water, shade, food and shelter; but It was tied up . I went to the front door, but received no answer. The dog would come up from under boat, but then it would go back under. The cable was approximately 30 feet long and appeared it was purposely tangled so the dog could go no further then to its water and food. I took photos. I tried to pull out the dog, but it was scared and it would go back under the boat I then had Officer Tovar come to assist. We pulled out the dog, cut the cable to release and impound the dog. I posted a notice of impound. On 3/1/16 1300 hours Supervisor Tenkate #1911 met with the dog owner, who resides at when he came to redeem his impounded dog. She explained that tie outs are illegal and he said he knew that but the dog can jump the fence and may bite someone. She explained that he would need to construct either a covered kennel run or put up higher fencina. He said he was keeping the public safe by tying up his 1 1/2 year old male Rottweiler named Kaizer. said he was going to fix the confinement. Supervisor Ten kate then asked for Identification and he provided her with his Arizona driver's license. then signed and received a copy of citation #73048 for neglect tie out and is aware of his court date, time and location. He then returned to licensing to redeem his dog.											
<input type="checkbox"/> I CHOOSE "upon request" rights in this case		VICTIM/COMPLAINANT NAME Daniel Robledo				DATE OF BIRTH		RESIDENCE PHONE		BUSINESS PHONE 724-5900													
<input type="checkbox"/> I WAIVE "upon request" rights in this case.		VICTIM'S ADDRESS				CITY		STATE		ZIP													
<input type="checkbox"/> REQUEST/WAIVER exception per A.R.S. § 13-4405 (D) and § 8-285 (E)		VICTIM'S BUSINESS ADDRESS 4000 N. Silverbell Rd.				CITY Tucson		STATE Az		ZIP 85745													
NAME OF LAWFUL REPRESENTATIVE (IF APPLICABLE)		DANGEROUS ASSESSMENT REQUESTED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		RESTITUTION REQUESTED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		DANGEROUS CASE NUMBER		OTHER AGENCY CASE # <input type="checkbox"/> SHERIFF DEPT <input type="checkbox"/> TUCSON POLICE <input type="checkbox"/> FIRE <input type="checkbox"/> OTHER:		FOLLOW UP REQUEST <input type="checkbox"/> SO <input type="checkbox"/> TPO <input type="checkbox"/> OTHER:													
<input type="checkbox"/> ADDRESS AND PHONE NUMBER SAME AS VICTIM		<input type="checkbox"/> VIOLATION		BITE SEVERITY:		TREATED BY		PHONE NUMBER		DATE QUARANTINED												PACIC <input type="checkbox"/> VET <input type="checkbox"/> HOME <input type="checkbox"/>	
		<input type="checkbox"/> NON-VIOLATION		PART OF BODY BITTEN:						RELEASE DATE:													
RELATIONSHIP TO VICTIM		VET CLINIC				PHONE NUMBER		OWNER KNOWS OF BITE YES <input type="checkbox"/> NO <input type="checkbox"/>		FTD <input type="checkbox"/> UTD <input type="checkbox"/>													
PHONE NUMBER																							
LAWFUL REPRESENTATIVE ADDRESS		CLINIC'S ADDRESS				QUARANTINE (DAYS) 10 <input type="checkbox"/> 15 <input type="checkbox"/> 45 <input type="checkbox"/> 180 <input type="checkbox"/>		<input type="checkbox"/> FRA HEAD#															
		<input type="checkbox"/> 3 rd PARTY CITATIONS YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		CITING ACO D.Tenkate #1911		PREVIOUS VIOLATIONS YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		PREVIOUS CASE NUMBER		OTHER ADDITIONAL REPORTS													
VICTIM OR LAWFUL REPRESENTATIVE SIGNATURE		CODE/ORD VIOLATED 4-3(2)(E)(2)								REVIEWED BY KIMST 3/3													
		CITATIONS/NUMBERS 73048								BOND YES <input type="checkbox"/> NO <input type="checkbox"/>													
BREED/DESCRIPTION		ANIMAL'S NAME		COLOR		SEX		AGE		LICENSE #		CONDITION		ANIMAL ID#									
rottweiler		VICTIM OWNER <input checked="" type="checkbox"/> Kaizer		blk/brn		m		1y															
Summary																							
One dog was impounded. Staff reviewed animal welfare requirements and laws with the owner and issued citations. The owner redeemed the dog.																							
Committee Member Comments/ Request for Information																							
If owner afraid of dog biting what action was owner taking until confinement could be fixed.												Member T. Barrick											
Was there a recheck? Owner's awareness that animal could jump fence but fear the dog might bite someone raises concern. Why was there a delay in correcting confinement especially if owner concerned about public safety?												N. Emptage											
												P. Hubbard											
												P. Jacobs											
												S. Kaluzniacki											
												D. Marshall											
												H. Mendelsohn											
												J. Neumann											
												E. O'Donnell											
												J. Schwerin											
Do we have an outcome of this issue yet?												G. Smith											
												City of Tucson Rep.											

Report Snapshot								Officer's Case Report															
DOES THIS INCIDENT REQUIRE VICTIM REQUEST FOR WAIVER OF RIGHTS? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		LOCATION OF INCIDENT FOOD <input type="checkbox"/> WATER <input type="checkbox"/> SHELTER <input type="checkbox"/> VENTILATION <input type="checkbox"/> ABANDONED <input type="checkbox"/> TIED/UT <input type="checkbox"/> BEATEN <input type="checkbox"/> WASTE <input type="checkbox"/> INJ/ILL <input type="checkbox"/> OTHER (EXPLAIN) <input checked="" type="checkbox"/> Neglect				DATE AND TIME OF INCIDENT 02/06/16 17:30		Date and time reported 02/16/16 12:30		On February 16, 2016 at approximately 1230 hours Supervisor Tenkate met with __, who resides at . He explained he came to PACC about the dog on dog attack that caused the death of his dog. He explained the following to Supervisor Tenkate, On 2/6/16 at approximately 1730-1800 hours he witnessed the neighbors 41 large dogs inside his fenced yard attacking his light tan 9 y/o neutered shepherd chow mix named Hunter. The 4 dogs were described as a black/brown Rottie/shepherd/hound mix and 4 lighter brown mixes owned by who resides at . also owns 2 smaller white poodle type mixes that were not involved in the attack. said that his dog Hunter received numerous wounds to his hind legs and inner thigh area and front legs. He treated the dog himself until Monday 2/8/16 and took Hunter to his own vet at 0830 hours. His dog was treated by at the said that Hunter died at the clinic that day. Supervisor Tenkate spoke to from who said that Hunter sustained numerous bite wounds and the dog went into shock and his heart stopped. He was given CPR, recovered and was being given intravenous fluids when at about 1230 hours the dog died at the clinic. On February 23, 2016 I, Investigator Delgadillo #2047 contacted . to Inquire further on Hunter and left a message for . At approximately 18:06 hrs I received an incoming call on my personal cell phone from . I inquired about Hunter and the fact that the dog was not taken for vet care for approximately a day and a half. stated that he received Hunter as a patient on 2/8/16 approximately 0835hrs. stated that when Hunter was brought to the clinic he observed him to be "almost gone". was advised of the dog attack that occurred. Hunter had bite wounds to the abdomen area (assumed that the dog had become submissive during the attack) and also a bite wound to his right thigh area. He stated that the owner, , explained to him that he saw the dog acting normal so he just cleaned the wounds and sprayed Blukote to the wounds. He stated that the dog was in septic shock, and had to be resuscitated. stated in his professional opinion if the dog would have been brought for medical attention immediately, Hunter would have survived the attack.													
<input type="checkbox"/> I CHOOSE "upon request" rights in this case. <input type="checkbox"/> I WAIVE "upon request" rights in this case.		VICTIM/COMPLAINANT NAME		DATE OF BIRTH		RESIDENCE PHONE		BUSINESS PHONE															
		VICTIM'S ADDRESS				CITY		STATE										ZIP					
		VICTIM'S BUSINESS ADDRESS				CITY		STATE										ZIP					
NAME OF LAWFUL REPRESENTATIVE (IF APPLICABLE)		DANGEROUS ASSESSMENT REQUESTED YES <input type="checkbox"/> NO <input type="checkbox"/>		RESTITUTION REQUESTED YES <input type="checkbox"/> NO <input type="checkbox"/>		DANGEROUS CASE NUMBER		OTHER AGENCY CASE # <input type="checkbox"/> SHERIFF DEPT <input type="checkbox"/> TUCSON POLICE <input type="checkbox"/> FIRE <input type="checkbox"/> OTHER:										FOLLOW UP REQUEST <input type="checkbox"/> SO <input type="checkbox"/> TPD <input type="checkbox"/> OTHER:					
<input type="checkbox"/> ADDRESS AND PHONE NUMBER SAME AS VICTIM		<input type="checkbox"/> VIOLATION		BITE SEVERITY:		TREATED BY		PHONE NUMBER										DATE QUARANTINED		PACC <input type="checkbox"/> VET <input type="checkbox"/> HOME <input type="checkbox"/>			
RELATIONSHIP TO VICTIM		<input type="checkbox"/> NON-VIOLATION		PART OF BODY BITTEN:		PHONE NUMBER		OWNER KNOWS OF BITE YES <input type="checkbox"/> NO <input type="checkbox"/>										RELEASE DATE:		FTO <input type="checkbox"/> LTR <input type="checkbox"/>			
PHONE NUMBER		VET CLINIC		QUARANTINE (DAYS) 10 <input type="checkbox"/> 15 <input type="checkbox"/> 45 <input type="checkbox"/> 180 <input type="checkbox"/>		<input type="checkbox"/> FRA HEAD#																	
LAWFUL REPRESENTATIVE ADDRESS		CLINIC'S ADDRESS				3 rd PARTY CITATIONS YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		CITING ACO X.Delgadillo#2047										PREVIOUS VIOLATIONS YES <input type="checkbox"/> NO <input type="checkbox"/>		PREVIOUS CASE NUMBER		OTHER ADDITIONAL REPORTS	
VICTIM OR LAWFUL REPRESENTATIVE SIGNATURE		CODE/DIV VIOLATED 6.04.110(B) (4)		CITATIONS/NUMBERS 75402		REVIEWED BY Monst 3/1		BOND YES <input type="checkbox"/> NO <input type="checkbox"/>															
BREED/DESCRIPTION		ANIMAL'S NAME		COLOR		SEX		AGE		LICENSE #		CONDITION		ANIMAL ID#									
Shepherd Mix		Hunter		tan/white		M		9y		none		deceased											
<input checked="" type="checkbox"/> VICTIM <input checked="" type="checkbox"/> OWNER																							
Summary																							
The owner was cited for neglect no Vet care. The dog was already deceased when the officer investigated. This complaint is closed.																							
Committee Member Comments/ Request for Information												Member											
												T. Barrick											
Owner should be prohibited from having additional animals. According to the report, the animal would have survived if it received immediate medical attention and owner left animal in pain and suffering. This could happen again if an animal owned by this individual needs medical attention.												N. Emptage											
												P. Hubbard											
												P. Jacobs											
												S. Kaluzniacki											
												D. Marshall											
What happened with attacking aggressive dogs? Is there a Dangerous Dogs investigation at this time? Do we have results of the court case? Two issues here, neglect on owners part, and dangerous dog issue on neighbors part.												H. Mendelsohn											
												J. Neumann											
												E. O'Donnell											
												J. Schwerin											
What happened with attacking aggressive dogs? Is there a Dangerous Dogs investigation at this time? Do we have results of the court case? Two issues here, neglect on owners part, and dangerous dog issue on neighbors part.												G. Smith											

Report Snapshot									
DOES THIS INCIDENT REQUIRE VICTIM REQUEST FOR WAIVER OF RIGHTS? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		LOCATION OF INCIDENT		DATE AND TIME REPORTED 03/16/16 / 2059 hours		DATE AND TIME OCCURRED 03/16/16 / 2030 hours			
<input checked="" type="checkbox"/> I CHOOSE "upon request" rights in this case		FOOD WATER SHELTER INJURED/ILL VENTILATION		ABANDONED TIEOUT BEATEN WASTE		OTHER (EXPLAIN) <input checked="" type="checkbox"/> Animal Attack			
<input type="checkbox"/> I WAIVE "upon request" rights in this case.		VICTIM/COMPLAINANT NAME		D.O.B		RESIDENCE PHONE NO.			
<input type="checkbox"/> REQUEST/WAIVER exception per A.R.S. § 12-6405 (B) and § 12-286 (B)		VICTIM'S ADDRESS		ZIP		CITY		STATE	
NAME OF LAWFUL REPRESENTATIVE (IF APPLICABLE)		DANGEROUS ASSESSMENT REQUESTED YES <input type="checkbox"/> NO <input type="checkbox"/>		RESTITUTION REQUESTED YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		DANGEROUS CASE NUMBER		OTHER AGENCY CASE # 1603160562 <input type="checkbox"/> SO <input checked="" type="checkbox"/> TPD <input type="checkbox"/> TFD <input type="checkbox"/> OTHER:	
<input type="checkbox"/> ADDRESS AND PHONE NUMBER SAME AS VICTIM		<input type="checkbox"/> VIOLATION		BITE SEVERITY:		TREATED BY		DATE QUARANTINED	
RELATIONSHIP TO VICTIM		<input type="checkbox"/> NON-VIOLATION		PART OF BODY BITTEN:		PHONE NUMBER		RELEASE DATE:	
PHONE NUMBER		VET CLINIC		PHONE NUMBER		OWNER KNOWS OF BITE YES <input type="checkbox"/> NO <input type="checkbox"/>		PACC <input type="checkbox"/> VET <input type="checkbox"/> HOME <input type="checkbox"/> FTO <input type="checkbox"/> UTO <input type="checkbox"/>	
LAWFUL REPRESENTATIVE ADDRESS		CLINIC'S ADDRESS		QUARANTINE 10 <input type="checkbox"/> 15 <input type="checkbox"/> 45 <input type="checkbox"/> 180 <input type="checkbox"/>		FRA HEAD#		OTHER ADDITIONAL REPORTS A16-186915	
VICTIM OR LAWFUL REPRESENTATIVE SIGNATURE		3 RD PARTY CITATIONS YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		CITING ACO T. Haynes #2032		PREVIOUS VIOLATIONS YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		PREVIOUS CASE NUMBER	
		CODE/BRD VIOLATED 4-97, 4-7(2)(B), 4-3(2)(B)		CITATIONS/NUMBERS 74448, 74447		REVIEWED BY DTK/16		BOND YES <input type="checkbox"/> NO <input type="checkbox"/>	
BREED/DESCRIPTION VICTIM OR OWNER ANIMAL		ANIMAL'S NAME		COLOR		SEX		AGE	
Pit Bull		Biggie		Tan/White		M		A	
Pit Bull		Bella		White/Tan		F		A	
Pit Bull		Chico		Tan/White		M		A	
Husky Mix		Chase		White/Gray		M		SM	

Officer's Case Report

On March 16, 2016 at approximately 2123 hours I arrived at, and met with Tucson Police Officer Vasquez #44603 and Sergeant Simmers #44535 (1603160562). They had a medium, tan/white, male 1 Pit Bull confined in the back of the patrol car. They said that the dog lives next door at and had jumped the fence and attacked the two dogs at in their kennel. The officers said that the dog was acting rather aggressive upon their arrival and they removed the dog from the kennel using a catch pole that they had. They advised that they were unable to make contact with the residents of as it appeared that there was no one home. They also said that there was another dog in the yard at and that they did not see any water in the yard when they were trying to figure out how the first dog got into the neighbor's yard. I went to and observed a medium, white/tan, female, Pit Bull in the yard. She came up to the fence and W/IS friendly with me. I entered the yard and she stayed with me as I went to the front door and around to the back door. The house was dark and in the yard I found several empty and turned over buckets and bowls. I did not find any water available to the dog. It appeared that the water had been gone for a while. I leashed the white dog and brought her out to impound her due to there not being any water available and the owner not being home. As I was leaving the yard a male pulled up in a vehicle and spoke with me and the officers. He said that the dogs belonged to his sister and that she was at work. The officers asked if he could contact her and have her come home. He inquired about the other dog, calling him Biggie, as he petted the female. It was explained that we could not give him any information at this time. He then left the scene. I then walked the female to my truck and scanned her and no microchip was detected. I loaded her into my truck and she was impounded without incident I then went to the patrol car and started talking to Biggie. He wagged his tail and was friendly with me. I was able to leash him and remove him from the car without any issues. As I was walking him to my truck the male returned with a female and she started yelling at me and the officers. I continued to walk Biggie back to my truck and impounded him without incident. I returned to where the officers were and attempted to speak to the female and she refused to talk to me. The officers continued to speak with her and I went back into the yard and took photographs of the empty buckets and bowls. Shortly after I returned to the front yard another vehicle pulled up and a young man got out and introduced himself to me. He said that his name was and that he was the dog owner. He requested to know what was going on so the officers and I explained that his dog, Biggie, had gotten into the neighbor's yard and had attacked their dogs. I also explained that there was no water available in his yard for his dogs and based on that, both dogs had been impounded. During our conversation, Bella, the name of the second dog, was given. I requested his identification and he provided me with his Arizona Driver's License. I advised him that he would be receiving citations for the dogs not having any water available. I also told him that I had not spoken to the neighbor yet and that there may be more citations for the attack. Officer Vasquez and I then went to and met with victim dog owner. He said that at approximately 2030 hours he and the family had returned home and as they were pulling their vehicle into the carport they observed

Summary

No animal was impounded. Staff reviewed animal welfare requirements and laws with the owner and issued citations for neglect no water. Owner licensed both dogs.

the neighbor's tan/white Pit Bull in the kennel with his dogs. He said that his dog, Chico, a male, tan/white, Pit Bull, was cowering in a corner away from the bigger dog and that his second dog, Chase, a male, white/gray, Siberian Husky mix, was also keeping away from the intruding dog. He said that he could see injuries on both of his dogs, especially Chico, from the big dog fighting with them. He said that the big dog tears up the common fence and that he has made multiple repairs to the fence to try and keep him out. He has put sheets of plywood and wire fencing between the yards to keep the dog out of his yard. I could not find any new holes in the fence but I did see an open area at the top of the fence next to the kennel. It appears that Biggie climbed the common fence and got into the kennel through the open corner. He said that he believes that this is not the first time that the big dog has gotten into his yard and attacked his dog. He said that he came home one day about a month ago and found Chico torn up and blood everywhere in the yard. He could only guess that it was the neighbor's dog because he had seen the dog stick its head through the holes that he had made in the fence. He is requesting citations for the incident and restitution for vet bills. Chico and Chase's injuries from tonight were photographed. I requested identification and he provided me with his Arizona Driver's License. I advised him that I would return it as soon as I was done with the citations for the neighbor. Citation #74446 was issued to for Neallict-No Water for both dogs and third party citation #74447 was issued to for leash law and biting animal (animal attack) X2 for Biggie. Citation, court date, time, and location were explained to He acknowledged, signed and received a copy of both citations. I also provided him with a copy of the Pet-Fix flyer and the Pima County Animal Law pamphlet. His Arizona-Driver's License was then returned to him. I discussed with him several different remedies that he could use to keep his dogs from running out of water and gave him some suggestions about fencing to keep this from happening again. Biggie and Bella were then returned to him. I then went and met with I provided him a copy of the Pet-Fix flyer and a copy of the Pima County Animal Laws pamphlet He was very upset that Biggie was returned to It was explained that I could not keep the dog and hopefully the citations were enough for him to keep the dog confined. Officer Vazquez and I then cleared the scene.

Committee Member Comments/ Request for Information	Member
	T. Barrick
	N. Emptage
	P. Hubbard
	P. Jacobs
	S. Kaluzniacki
	D. Marshall
Why can't a biting dog be kept if the owner can't keep it on his property?	H. Mendelsohn
	J. Neumann
	E. O'Donnell
	J. Schwerin
Is there follow-up on the dog that was jumping the fence and attacking the other dogs?	G. Smith
	City of Tucson Rep.

Report Snapshot										Officer's Case Report																			
DOES THIS INCIDENT REQUIRE VICTIM REQUEST FOR WAIVER OF RIGHTS? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		LOCATION OF INCIDENT 4000 N. Silverbell Rd				DATE AND TIME REPORTED 3-21-16 / 1345		DATE AND TIME OCCURRED 3-21-16 / 1345				On 3-21-16 at 1345 hot• I Investigator Eckelbarger (1942) met with dog owner, , at the Pima Animal Care Center while she was signing over her dog "Buddy" for euthanasia. · stated she first started noticing Buddy losing weight about 1 month prior. She also had stated that Buddy had a seizure approximately 1 month prior after changing his food. She stated it had been years since Buddy's last veterinary visit. She stated that he stopped eating and drinking on 3-20-16 and could no longer walk. stated she has owned Buddy for all10 years of his life. I then observed Buddy who appeared emaciated. I could easily see his rib,hip, and skull bones. He was barely able to lift his head and could not walk. I took photographs of the dog and setup for Dr. Carlson to examine for a welfare case. I then cited for neglect-vet care on "Buddy" under City jurisdiction. signed and received her copy of the citation.																	
<input type="checkbox"/> I CHOOSE "upon request" rights in this case		<input type="checkbox"/> I WAIVE "upon request" rights in this case				<input type="checkbox"/> REQUEST/WAIVER exception per A.R.S. § 13-4405 (B) and § 8-298 (B)		<input type="checkbox"/> REQUEST/WAIVER exception per A.R.S. § 13-4405 (B) and § 8-298 (B)																					
VICTIM/COMPLAINANT NAME 1942 Eckelbarger		D.O.B		RESIDENCE PHONE NO.		BUSINESS PHONE NO. 724-5892		VICTIM'S ADDRESS		ZIP												CITY		STATE					
VICTIM'S BUSINESS ADDRESS 4000 N. Silverbell Rd		ZIP 85745		CITY Tucson		STATE AZ		DANGEROUS ASSESSMENT REQUESTED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		RESTITUTION REQUESTED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>												DANGEROUS CASE NUMBER		OTHER AGENCY CASE # <input type="checkbox"/> SO <input type="checkbox"/> TPD <input type="checkbox"/> TFD <input type="checkbox"/> OTHER:		FOLLOW UP REQUEST <input type="checkbox"/> SO <input type="checkbox"/> TPD <input type="checkbox"/> OTHER:			
<input type="checkbox"/> ADDRESS AND PHONE NUMBER SAME AS VICTIM		<input type="checkbox"/> VIOLATION		BITE SEVERITY:		TREATED BY		PHONE NUMBER		DATE QUARANTINED												PACC VET HOME		<input type="checkbox"/> FTQ		<input type="checkbox"/> UTQ			
RELATIONSHIP TO VICTIM		<input type="checkbox"/> NON-VIOLATION		PART OF BODY BITTEN:		OWNER KNOWS OF BITE YES <input type="checkbox"/> NO <input type="checkbox"/>		RELEASE DATE:		PHONE NUMBER												OWNER KNOWS OF BITE YES <input type="checkbox"/> NO <input type="checkbox"/>		FTQ		UTQ			
PHONE NUMBER		VET CLINIC		CLINIC'S ADDRESS		QUARANTINE 10 <input type="checkbox"/> 15 <input type="checkbox"/> 45 <input type="checkbox"/> 180 <input type="checkbox"/>		FRA HEAD#		3RD PARTY CITATIONS YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>												CITING ACO 1942 Eckelbarger		PREVIOUS VIOLATIONS YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		PREVIOUS CASE NUMBER		OTHER ADDITIONAL REPORTS	
LAWFUL REPRESENTATIVE ADDRESS		VICTIM OR LAWFUL REPRESENTATIVE SIGNATURE		CODE/ORD VIOLATED 4-3 (2)(D)		CITATIONS/NUMBERS 75482 (A)		REVIEWED BY 3-22-16 DTH/1911		BOND YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>												BREED/DESCRIPTION VICTIM OR OWNER ANIMAL		ANIMAL'S NAME		COLOR		SEX	
Lab mix		<input type="checkbox"/> VICTIM <input checked="" type="checkbox"/> OWNER		Buddy		Cream		M		10yr																			

Summary

The owner was cited for neglect no Vet care. The dog was being euthanized when the officer investigated.

Committee Member Comments/ Request for Information

Member

	T. Barrick
	N. Emptage
	P. Hubbard
	P. Jacobs
	S. Kaluzniacki
	D. Marshall
	H. Mendelsohn
	J. Neumann
	E. O'Donnell
	J. Schwerin
This owner should be tagged to be refused dog ownership from PACC in the future.	G. Smith
	City of Tucson Rep.

Report Snapshot										Officer's Case Report						
DOES THIS INCIDENT REQUIRE VICTIM REQUEST FOR WAIVER OF RIGHTS? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		LOCATION OF INCIDENT FOOD <input type="checkbox"/> WATER <input type="checkbox"/> SHELTER <input type="checkbox"/> VENTILATION <input type="checkbox"/> ABANDONED <input type="checkbox"/> TIED <input type="checkbox"/> BEATEN <input type="checkbox"/> WASTE <input type="checkbox"/> INJ/ILL <input checked="" type="checkbox"/> OTHER (EXPLAIN)				DATE AND TIME OF INCIDENT 03/23/16 14:00 Date and time reported 03/23/16 14:00				On 03/23/16 brought his 15 year old Lab mix named Orla in for euthanasia. I Supervisor Konst badge #2002 was at the intake door area for another matter. I was then asked to look at the dog by Kennel Technician II . She had concerns over the condition of the dog and the owners statement the dog had not been to a Veterinarian since it was a puppy. I observed Orla to be laying In a stainless steel rolling kennel. I could see the dogs rear back area had been shaved and appeared to have some hair loss and areas of skin loss. On the center back I observed the hair to be moving with solid masses of maggots under the hair. I was told by the owner that they had decided to bring the dog In after they observed maggots coming from the anal area of Orla. They stated the dog has had incontinence since it was spade as a puppy over 14 years ago. The owner also stated they have never had the dog to a Veterinarian since it was spade. I ask if it ever had a rabies vaccination; stated not since it was a puppy. They did not notice any change until a couple of months ago. Then a couple of days ago the dog was no longer active. So him and the family decided it was time to put Orla down. A family member had shaved the rear back area recently because of the maggots. I explained to that the Pima Animal Care Center Veterinarian felt the dog was neglected. The dog did not get in this condition in a short time. The condition on the skin came from being constantly wet and does not spread rapidly. The maggots coming from inside Orla shows the dog has had an infection for awhile. I issued citation 73770 for Neglect no Vet care in Tucson City Court. The citation was explained and stated he understood.						
<input type="checkbox"/> I CHOOSE "upon request" rights in this case. <input type="checkbox"/> I WAIVE "upon request" rights in this case.		VICTIM/COMPLAINANT NAME		DATE OF BIRTH		RESIDENCE PHONE		BUSINESS PHONE								
<input type="checkbox"/> REQUEST/WAIVER exception per A.R.S. § 13-4405 (B) and § 8-286 (D)		VICTIM'S ADDRESS		CITY		STATE		ZIP								
NAME OF LAWFUL REPRESENTATIVE (IF APPLICABLE)		DANGEROUS ASSESSMENT REQUESTED YES <input type="checkbox"/> NO <input type="checkbox"/>		RESTITUTION REQUESTED YES <input type="checkbox"/> NO <input type="checkbox"/>		DANGEROUS CASE NUMBER		OTHER AGENCY CASE # <input type="checkbox"/> SHERIFF DEPT <input type="checkbox"/> TUCSON POLICE <input type="checkbox"/> FIRE <input type="checkbox"/> OTHER:			FOLLOW UP REQUEST <input type="checkbox"/> SO <input type="checkbox"/> TPD <input type="checkbox"/> OTHER:					
<input type="checkbox"/> ADDRESS AND PHONE NUMBER SAME AS VICTIM		<input type="checkbox"/> VIOLATION		BITE SEVERITY:		TREATED BY		PHONE NUMBER			DATE QUARANTINED		PACC VET <input type="checkbox"/> HOME <input type="checkbox"/>			
<input type="checkbox"/> NON-VIOLATION		PART OF BODY BITTEN:		PHONE NUMBER		OWNER KNOWS OF BITE YES <input type="checkbox"/> NO <input type="checkbox"/>		RELEASE DATE:			FTQ <input type="checkbox"/> LTD <input type="checkbox"/>					
RELATIONSHIP TO VICTIM		VET CLINIC		PHONE NUMBER		OWNER KNOWS OF BITE		RELEASE DATE:			FTQ <input type="checkbox"/> LTD <input type="checkbox"/>					
PHONE NUMBER		CLINIC'S ADDRESS		QUARANTINE (DAYS) 10 <input type="checkbox"/> 15 <input type="checkbox"/> 45 <input type="checkbox"/> 180 <input type="checkbox"/> <input type="checkbox"/> FRA HEAD#		3 rd PARTY CITATIONS YES <input type="checkbox"/> NO <input type="checkbox"/>		CITING ACD Konst #2002			PREVIOUS VIOLATIONS YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		PREVIOUS CASE NUMBER		OTHER ADDITIONAL REPORTS	
LAWFUL REPRESENTATIVE ADDRESS		VICTIM OR LAWFUL REPRESENTATIVE SIGNATURE		CODE/ORD VIOLATED 4-3 (2) (D)		CITATIONS/NUMBERS		REVIEWED BY Konst 3/23			BOND YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>					
BREED/DESCRIPTION		ANIMAL'S NAME		COLOR		SEX		AGE			LICENSE #		CONDITION		ANIMAL ID#	
Lab mix		Orla		Tan		F		15y		Poor						
Summary																
The owner was cited for neglect no Vet care. The dog was being euthanized when the officer investigated.																
Committee Member Comments/ Request for Information													Member			
Owner's residence should be visited to determine if other animals are owned. Due to the neglect of Orla, there may be other animals which need to be checked.													T. Barrick			
													N. Emptage			
													P. Hubbard			
													P. Jacobs			
													S. Kaluzniacki			
													D. Marshall			
They should not be allowed to own any animals or adopt from PACC													H. Mendelsohn			
													J. Neumann			
													E. O'Donnell			
													J. Schwerin			
This is a horrible case of chronic neglect The owner and his family members should never be permitted to have a dog from PACC The suffering this dog endured is unimaginable.													G. Smith			



MEMORANDUM

TO: Marcy Flanagan, Deputy Director
FROM: Debra Tenkate, Animal Care Field Supervisor 
DATE: April 5, 2016
SUBJECT: Dangerous Dog Case for March 2016

Tucson:

1. A16-187532  A dog named Mary-Jane was declared not dangerous by Investigator Eckelbarger.

Pima County/Oro Valley:

2. A16-188156  A dog named Toreto was declared dangerous by Investigator Delgadillo. The second dog named Geo had been signed over to PACC prior to the dangerous dog evaluation. Both dogs were impounded and euthanized at PACC.
3. A16-190348  A dog named Cowlee was declared not dangerous by Investigator Eckelbarger.
4. A16-190085  Two dogs named Buddy and White Socks were declared dangerous by Investigator Eckelbarger. Both dogs were impounded and then redeemed by the owner after their confinement was modified. The owner requested a hearing to contest the declaration of dangerous. The hearing is scheduled for April 11, 2016. Investigator Eckelbarger will monitor compliance.

DD#1

INVESTIGATION REPORT		SUSPECT				ACQ NAME / BADGE #		ACTIVITY/BITE NUMBER	
Pima County Health Department Pima Animal Care Center 4000 N. Starball Rd Tucson, Arizona 85745 Phone: (520) 724-5900 Fax: (520) 724-5960		SUSPECT'S ADDRESS ██████████				T. Foster #2042		A16-187532	
		CITY		STATE	ZIP	RESIDENCE PHONE NUMBER		BITE <input checked="" type="checkbox"/> WELFARE <input type="checkbox"/> DANGEROUS <input type="checkbox"/>	
		Tucson		AZ				OTHER <input type="checkbox"/> N/A	
		SUSPECT'S BUSINESS ADDRESS				CI <input checked="" type="checkbox"/> CO <input type="checkbox"/> OTHER <input type="checkbox"/> N/A		DRIVERS LICENSE	
		UNK							
		CITY		STATE	ZIP	BUSINESS PHONE NUMBER		SOCIAL SECURITY NUMBER	
		N/A		N/A	N/A	N/A		Not Asked	
DOES THIS INCIDENT REQUIRE VICTIM REQUEST FOR WAIVER OF RIGHTS? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		LOCATION OF INCIDENT				DATE AND TIME OF INCIDENT		Date and time reported	
						02/03/16 18:05		02/03/16 18:11	
		FOOD		WATER	SHELTER	VENTILATION	ABANDONED	TIEDOUT	BEATEN
		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		WASTE		INJ / ILL	OTHER (EXPLAIN)				
		<input type="checkbox"/>		<input type="checkbox"/>					
<input type="checkbox"/> I CHOOSE "upon request" rights in this case.		VICTIM/CRIMINAL NAME			DATE OF BIRTH		RESIDENCE PHONE		BUSINESS PHONE
<input type="checkbox"/> I WAIVE "upon request" rights in this case.		VICTIM'S ADDRESS			CITY		STATE		ZIP
					Tucson		AZ		
<input type="checkbox"/> REQUEST/WAIVER exception per A.R.S. § 13-4405 (B) and § 8-286 (B)		VICTIM'S BUSINESS ADDRESS			CITY		STATE		ZIP
					Tucson		AZ		
NAME OF LAWFUL REPRESENTATIVE (IF APPLICABLE)		DANGEROUS ASSESSMENT REQUESTED		RESTITUTION REQUESTED		DANGEROUS CASE NUMBER		OTHER AGENCY CASE #	
N/A		YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>				N/A	
<input type="checkbox"/> ADDRESS AND PHONE NUMBER SAME AS VICTIM		<input checked="" type="checkbox"/> VIOLATION		BITE SEVERITY:		TREATED BY		PHONE NUMBER	
		<input type="checkbox"/> NON-VIOLATION		2-Puncture		UNK		N/A	
RELATIONSHIP TO VICTIM				PART OF BODY BITTEN:		DATE QUARANTINED		PACC <input type="checkbox"/>	
N/A				Knee		N/A		VET <input type="checkbox"/>	
PHONE NUMBER		VET CLINIC		PHONE NUMBER		OWNER KNOWS OF BITE		HOME <input type="checkbox"/>	
N/A		N/A		N/A		YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		FTQ <input type="checkbox"/>	
LAWFUL REPRESENTATIVE ADDRESS		CLINIC'S ADDRESS		QUARANTINE (DAYS)		RELEASE DATE:		UTD <input checked="" type="checkbox"/>	
N/A		N/A		10 <input checked="" type="checkbox"/> 15 <input type="checkbox"/> 45 <input type="checkbox"/> 180 <input type="checkbox"/>		02/12/16			
		3 RD PARTY CITATIONS		CITING ACO		PREVIOUS VIOLATIONS		PREVIOUS CASE NUMBER	
		YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		2042		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		N/A	
VICTIM OR LAWFUL REPRESENTATIVE SIGNATURE		CODE/ORD VIOLATED				OTHER ADDITIONAL REPORTS		REVIEWED BY	
		4-97; 4-7(2)(B)				N/A		2012	
		CITATIONS/NUMBERS						KONST 3/5	
		#75504 (A, B)						BOND YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
BREED/DESCRIPTION		ANIMAL'S NAME		COLOR	SEX	AGE	LICENSE #	CONDITION	ANIMAL ID#
Lab Mix		Mary-Jane		Black/White	F	2yr	L15-25221	Normal	A455962
VICTIM OWNER <input checked="" type="checkbox"/>									
VICTIM OWNER <input type="checkbox"/>									
VICTIM OWNER <input type="checkbox"/>									
VICTIM OWNER <input type="checkbox"/>									
VICTIM OWNER <input type="checkbox"/>									
VICTIM OWNER <input type="checkbox"/>									
VICTIM OWNER <input type="checkbox"/>									
WITNESS 1		M <input type="checkbox"/> F <input checked="" type="checkbox"/>		DOB		ADDRESS		RESIDENCE PHONE #	
WITNESS 2		M <input type="checkbox"/> F <input type="checkbox"/>		DOB		ADDRESS		RESIDENCE PHONE #	
WITNESS 3		M <input type="checkbox"/> F <input type="checkbox"/>		DOB		ADDRESS		RESIDENCE PHONE #	
WITNESS 4		M <input type="checkbox"/> F <input type="checkbox"/>		DOB		ADDRESS		RESIDENCE PHONE #	



DD#1

INVESTIGATION REPORT

PACC Activity: A16-187532

ACO & Badge T. Foster #2042

02/03/16 18:11 Pima Animal Care Center received a report from a supervisor at UPS alleging that one of his employees was bitten that day while delivering packages. He stated that the biting animal resides at [redacted] Jr. He also reported that the owner's name is [redacted] and that his phone number is [redacted]

02/03/16 18:47 Pima Animal Care Center received a call from the bite victim, [redacted]. He provided the call taker with his address and times he was usually available to meet with an officer. He also stated that the front yard at [redacted] is unfenced and that the biting dog charged out the open front door and bit him.

02/20/16 18:10 Officer K. Baugus #1918 met with the bite victim [redacted]. [redacted] is a UPS driver and stated that on February 3rd 2016 he delivered a package to [redacted]. That property is a duplex-style residence and the front yard is unfenced. He stated that he knocked on the door and heard a large dog barking inside. The door opened and the dog lunged out the door. [redacted] backed away and told the guy to get his dog. [redacted] stated that the man had no control over the dog and that the dog lunged and bit him on his right knee. [redacted] advised Officer Baugus that there were two punctures and that his knee had a lot of swelling.

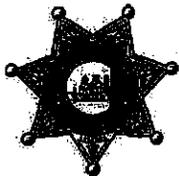
[redacted] stated that the owner provided proof of current rabies vaccinations. The victim also stated that he believed that the dog was redeemed from PACC in January for another bite. [redacted] also told Officer Baugus that the dog owner claimed that the dog belonged to his son. He went on to add that the dog owner asked [redacted] why he was so upset and stated, "it's just a dog bite".

When Officer Baugus met with [redacted] his injuries were healed. She observed that [redacted] had two small areas that appeared to be scars. She was unable to successfully photograph them but reported that she feels that they are consistent with an animal bite. The victim stated that he went to and Urgent Care for treatment because his knee swelled to approximately the same size as a grapefruit. He added that he could not bend his knee and that his boss had to assist him with his delivery route as a result.

[redacted] advised Officer Baugus that his supervisor photographed the PACC paper work that showed proof of vaccinations but stated that he did not have a copy of the photo. He also stated that his Urgent Care paperwork and dog owner information has already been forwarded to the attorney he hired. He stated that he is certain that he can identify the dog that bit him and that he believes that the dog is a Labrador or Rottweiler mix.

Officer's Signature: *Continued*

Date:



INVESTIGATION REPORT (Continued)

02/27/16 12:20 I, Investigator Foster #2042 arrived and knocked on the dog owner's front door and was met by Mr. [redacted] and his wife. I stated my name and that I was at his house regarding the situation with the UPS driver. He freely acknowledged the situation except that he stated that at no time did Mary Jane break [redacted] skin. They stated that there was a reddish bruise-like mark but no punctures or breaks in the skin. They also stated that [redacted] was provided with proof of rabies vaccinations at the time of the incident and that the victim and his boss both returned at different times returned to photograph his house and property. I explained that I needed to conduct a health check of the dog and to issue citations that the victim has requested.

The dog owner provided me with his ID and proof of current license and vaccinations for the dog. There was a different owner listed on the document but under the owner's name is a notation that the fees were paid by [redacted] I asked about that and the couple told me that their son [redacted] is the dog's original owner and that he regularly left her for extended periods of time with various people and that the last time he left her at their home they just kept her and that he has not returned to claim her.

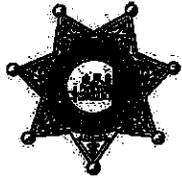
I completed the requested citations and presented them to [redacted]. He acknowledged, signed, and accepted a copy of the citations. I then provided him with info on a Misdemeanor compromise through the prosecutor's office. I returned his ID to him and provided him with his court date, time, and location.

I next advised him of the Dangerous Dog-Evaluation that was requested and explained what that entailed. I photographed the dog and observed that Mary appeared to be of normal health and temperament at the time of my visit. The couple seemed nervous about having the dog around me and I observed that Mary-Jane displayed unsafe behavior while I was at their home. At one point the owner allowed the dog to approach me (on leash) and although she seemed OK to the owner, I observed her body language to be tense, uncertain, and territorial in appearance. As I was preparing to leave Mary charged me and fortunately the owner regained control of her before she reached the end of the leash.

02/29/16 16:01 I arrived at [redacted] and was met in the street by [redacted] I stated my name and the reason for my visit asked him to look at a photograph that was taken of the alleged biter. [redacted] readily identified the Lab mix as the dog that bit him on 02/03/16. He stated that he is filing a civil suit against the dog owner and is seeking "pain and suffering." I explained that the criminal case cannot address that and can only provide restitution for out of pocket costs. He stated that he knows and that is why he hired an attorney and is filing a civil suit against the dog owner. At that time I notified him that I conducted a Health-Check of Mary-Jane and did not observe any signs or symptoms of illness or disease.

Officer Signature Continued

Date



Activity A16-187532

DD#1

Page 4

INVESTIGATION REPORT (Continued)

also told me that he has delivered packages to that address for years and that he is very familiar with the dog and her aggressive behavior. He stated that the owner has told him on several occasions that he cannot control Mary-Jane. stated that based on his past experiences with the dog and the lackadaisical attitude that the owner had the day he was bitten, that he is still requesting a Dangerous Dog-Evaluation be conducted on his behalf. I explained that there is a chance that the dog will not accumulate enough points to be declared Dangerous by Pima Animal Care Center. I explained that if the owner is found guilty of owning a biting animal in the city of Tucson that the judge will declare the dog Vicious without regard to the outcome of the Dangerous Animal Evaluation conducted by PACC. He stated that he understood. I also suggested that he try to obtain copies of the photos that his boss took of his injury and maintain a copy for the case. I thanked for his time and cooperation and left the area.

Officer Signature J. Foster #2042

Date 03/05/2016

DD#1



PIMA COUNTY HEALTH DEPARTMENT
PIMA ANIMAL CARE CENTER
4000 N. SILVERBELL RD. TUCSON, AZ 85745
(520) 724-5900 FAX (520) 724-5960
www.pima.gov/animalcare

CASE NO: AIG-189401
OWNER: [REDACTED]
ANIMAL NAME: Mary-Jane

ADDRESS: _____
SEX: S BREED: Lab mix
COLOR: Black/white DATE: 3-7-16

EVALUATION CRITERIA

REPORTED BITES:

NON-VIOLATION BITE + 3
VIOLATION-BITE + 6 +6

SEVERITY OF INJURY TO HUMANS:

(Check One Factor Only Per Victim)
NO BREAK IN SKIN + 1
BREAK IN SKIN OR BRUISING + 2
MEDICAL CARE (RELEASED) + 3 +3
MULTIPLE BITES-SINGLE INCIDENT + 4
BIT DOWN AND SHOOK VICTIM + 4
MEDICAL CARE (HOSPITALIZATION) + 5

Animal Complaints or Violations:

LEASH LAW CITATIONS + 2 +2
LEASH LAW COMPLAINTS + 1
ATTEMPTED BITE CITATIONS + 2
ANIMAL ATTACK CITATIONS + 3
OTHER CITATIONS / OR COMPLAINTS + 1

SEVERITY OF INJURY TO ANIMALS:

ATTACK WITH NO INJURY + 1
INJURIES TREATED BY OWNER + 2
VET CARE (1 To 2 Visits) + 3
EXTENSIVE VET CARE (>2 VISITS) + 4
INJURIES RESULTED IN DEATH + 5

CONFINEMENT MEASURES: (Check one factor only)

(Primary Method of Confinement at the time of the incident)
SECURE FENCE/WALL AND GATES - 5
INADEQUATE FENCING OR GATES + 5 +5

OWNER ACCOUNTABILITY / RESPONSIBILITY:

REPAIRED DEFICIENT CONFINEMENT - 3 -3
ANIMAL IS NEUTERED / SPAYED - 1 -1
OWNER AWARE OF ANY AGGRESSION + 1 +1
OWNER FAILED TO REPAIR CONFINEMENT + 5
CURRENTLY LICENSED LIC # 15-252216 - 1 -1
NO CURRENT LICENSE + 1
NO CURRENT RABIES VACCINATION + 1

NEIGHBOR COMMENTS (Scored by Majority Opinion):

(Two or More Neighbors Interviewed)
ANIMAL NEVER OBSERVED AT LARGE - 3 -3
ANIMAL NOT OBSERVED AGGRESSIVE - 3 -3
ANIMAL OBSERVED AT LARGE <5X/YR + 1
ANIMAL OBSERVED AT LARGE >5X/YR + 2
ANIMAL OBSERVED BEING AGGRESSIVE + 2

DOGS BEHAVIOR: (If Observed by Officer)

ANIMAL BEHAVES AGGRESSIVELY + 2 +2
ANIMAL NOT AGGRESSIVE - 2
ANIMAL SHOWS UNSAFE BEHAVIOR + 1

Confinement / Fencing:

6 foot black wall on east/west ends of backyard. 5-6 ft wood fence south wall. One gate leading into backyard.

General Comments:

The dog Mary-Jane scored a +8 and is therefore not declared dangerous at this time.

OFFICER # 1942 Eckelbarger

TOTAL SCORE: +8

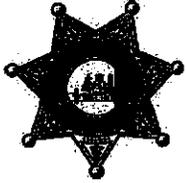
DANGEROUS
 NOT DANGEROUS

A SCORE OF TEN POINTS OR HIGHER SHALL BE DEEMED A DANGEROUS ANIMAL

We have determined that your dog displays or has a tendency, disposition, or propensity to injure, bite attack, chase or charge, OR attempt to injure, bite, attack, chase or charge a person or domestic animal in a threatening manner OR bare its teeth or approach a person or domestic animal in a threatening manner City Code 4-13 / County Code 6.04.150. The owner has ten (10) days in the City, five (5) days (County & other jurisdictions) as to appeal the declaration of dangerous by filing a request for a dangerous dog hearing, providing the dog has not been declared vicious by a court. The owner may obtain this form at PACC IN PERSON.

DD#2

INVESTIGATION REPORT		SUSPECT		A/C NAME / BADGE #		ACTIVITY/BITE NUMBER	
Pima County Health Department Pima Animal Care Center 4000 N. Campbell Rd. Tucson, Arizona 85745 Phone: (520) 724-5900 Fax: (520) 724-5960		SUSPECT'S ADDRESS		X. Delgado 2047		A16-188156	
CITY		STATE		710		RESIDENCE PHONE NUMBER	
Tucson		AZ				BITE <input type="checkbox"/> WELFARE <input type="checkbox"/> DANGEROUS <input type="checkbox"/>	
SUSPECT'S BUSINESS ADDRESS		CITY		STATE		OTHER <input checked="" type="checkbox"/> Leash Law	
						CI <input type="checkbox"/> CD <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	
CITY		STATE		ZIP		BUSINESS PHONE NUMBER	
						DRIVERS LICENSE	
SEX		WEIGHT		HEIGHT		EYES	
						HAIR	
						ORIGIN	
						DOB	
						SOCIAL SECURITY NUMBER	
DOES THIS INCIDENT REQUIRE VICTIM REQUEST FOR WAIVER OF RIGHTS? YES <input type="checkbox"/> NO <input type="checkbox"/>		LOCATION OF INCIDENT		DATE AND TIME OF INCIDENT		Date and time reported	
				02/06/16 17:30		02/16/16 12:30	
		FOOD <input type="checkbox"/> WATER <input type="checkbox"/> SHELTER <input type="checkbox"/>		VENTILATION <input type="checkbox"/> ABANDONED <input type="checkbox"/> TIED OUT <input type="checkbox"/>		BEATEN <input type="checkbox"/> WASTE <input type="checkbox"/> INJ / ILL <input type="checkbox"/>	
						OTHER (EXPLAIN) <input checked="" type="checkbox"/> leash law	
<input type="checkbox"/> I CHOOSE "upon request" rights in this case		VICTIM/COMPLAINANT NAME		DATE OF BIRTH		RESIDENCE PHONE	
<input type="checkbox"/> I WAIVE "upon request" rights in this case.						BUSINESS PHONE	
<input type="checkbox"/> REQUEST/WAIVER exception per A.R.S. § 13-4405 (B) and § 8-286 (B)		VICTIM'S ADDRESS		CITY		STATE	
						AZ	
NAME OF LAWFUL REPRESENTATIVE (IF APPLICABLE)		DANGEROUS ASSESSMENT REQUESTED		RESTITUTION REQUESTED		DANGEROUS CASE NUMBER	
		YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		A16-18857	
						OTHER AGENCY CASE # <input type="checkbox"/> SHERIFF DEPT <input type="checkbox"/> TUCSON POLICE <input type="checkbox"/> FIRE <input type="checkbox"/> OTHER:	
						FOLLOW UP REQUEST <input type="checkbox"/> SD <input type="checkbox"/> TPD <input type="checkbox"/> OTHER:	
<input type="checkbox"/> ADDRESS AND PHONE NUMBER SAME AS VICTIM		<input type="checkbox"/> VIOLATION		BITE SEVERITY:		TREATED BY	
		<input type="checkbox"/> NON-VIOLATION		PART OF BODY BITTEN:		PHONE NUMBER	
RELATIONSHIP TO VICTIM						DATE QUARANTINED	
PHONE NUMBER		VET CLINIC		PHONE NUMBER		OWNER KNOWS OF BITE	
						YES <input type="checkbox"/> NO <input type="checkbox"/>	
LAWFUL REPRESENTATIVE ADDRESS		CLINIC'S ADDRESS		QUARANTINE (DAYS)		FRA HEAD#	
				10 <input type="checkbox"/> 15 <input type="checkbox"/> 45 <input type="checkbox"/> 180 <input type="checkbox"/>			
		3 rd PARTY CITATIONS		CITING A/C		PREVIOUS VIOLATIONS	
		YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		X. Delgado#2047		PREVIOUS CASE NUMBER	
VICTIM OR LAWFUL REPRESENTATIVE SIGNATURE		CODE/ORD VIOLATED		OTHER ADDITIONAL REPORTS		REVIEWED BY 2007	
		6.04.30, 6.04.120 (B) (2)				KONST 3/1	
		CITATIONS/NUMBERS				BOND	
		75403				YES <input type="checkbox"/> NO <input type="checkbox"/>	
BREED/DESCRIPTION		ANIMAL'S NAME		COLOR		SEX	
						AGE	
						LICENSE #	
						CONDITION	
						ANIMAL ID#	
Shepherd Mix		Hunter		tan/white		M 9	
Hound Mix		Geo		Black/Tan		F	
Mastiff Mix		Toreto		Red/White		M	
VICTIM OWNER <input checked="" type="checkbox"/>							
VICTIM OWNER <input type="checkbox"/>							
VICTIM OWNER <input type="checkbox"/>							
VICTIM OWNER <input type="checkbox"/>							
VICTIM OWNER <input type="checkbox"/>							
VICTIM OWNER <input type="checkbox"/>							
WITNESS 1		M <input type="checkbox"/> F <input type="checkbox"/>		DOB		ADDRESS	
WITNESS 2		M <input type="checkbox"/> F <input type="checkbox"/>		DOB		ADDRESS	
WITNESS 3		M <input type="checkbox"/> F <input type="checkbox"/>		DOB		ADDRESS	
WITNESS 4		M <input type="checkbox"/> F <input type="checkbox"/>		DOB		ADDRESS	
						RESIDENCE PHONE #	
						BUSINESS PHONE #	



DD#2

INVESTIGATION REPORT

PACC Activity: A16-188156

ACO & Badge X. Delgadillo#2047

On February 16, 2016 at approximately 1230 hours Supervisor Tenkate met with _____, who resides at _____. I. He explained he came to PACC about the dog on dog attack that caused the death of his dog.

He explained the following to Supervisor Tenkate,
On 2/6/16 at approximately 1730-1800 hours he witnessed the neighbors 4 large dogs inside his fenced yard attacking his Light tan 9yo neutered Shepherd chow mix named Hunter. The 4 dogs were described as a black/brown Rottie/shepherd/hound mix and 4 lighter brown mixes owned by _____ Valenzuela who resides at _____. _____ also owns 2 smaller white Poodle type mixes that were not involved in the attack. The dog owner _____ is not requesting citations at this time (as he just moved in 4 months ago and wants to be a good neighbor) I explained that he has a year to have the citations issued if the dog owner does not pay the vet bill.

On February 24, 2016 at approximately 17:10 hrs I, Investigator Delgadillo#2047, arrived to _____ and met with _____. _____ requested that the dog owner be cited for leash law and biting animal for the attack on Hunter.

On February 24, 2016 at approximately 17:50 I arrived to _____ and met with _____. _____ I explained third party citations and _____ stated that he had not received a vet bill from the complainant.

_____ was cited into Pima County Justice Court for Leash law and Biting Animal for Toreto A551256, a male red and white mastiff mix and Geo A551220, black and tan hound mix. Mr. Valenzuela signed his citations; received a copy and was provided his court date and time.

Officer's Signature:

Date:

2/1/16



PIMA COUNTY HEALTH DEPARTMENT
 PIMA ANIMAL CARE CENTER
 4000 N. SILVERBELL RD. TUCSON, AZ 85745
 (520) 724-5900 FAX (520) 724-5960
 www.pima.gov/animalcare

DD#2

CASE NO: A16-188571
 OWNER: [REDACTED]
 ANIMAL NAME: Loie

ADDRESS: _____
 SEX: M BREED: Mastiff mix
 COLOR: Red/white DATE: 2/27/14

EVALUATION CRITERIA

REPORTED BITES:

NON-VIOLATION BITE	+ 3	_____
VIOLATION-BITE	+ 6	_____

SEVERITY OF INJURY TO HUMANS:
 (Check One Factor Only Per Victim)

NO BREAK IN SKIN	+ 1	_____
BREAK IN SKIN OR BRUISING	+ 2	_____
MEDICAL CARE (RELEASED)	+ 3	_____
MULTIPLE BITES-SINGLE INCIDENT	+ 4	_____
BIT DOWN AND SHOOK VICTIM	+ 4	_____
MEDICAL CARE (HOSPITALIZATION)	+ 5	_____

Animal Complaints or Violations:

LEASH LAW CITATIONS	+ 2	<u>+2</u>
LEASH LAW COMPLAINTS	+ 1	<u>+1</u>
ATTEMPTED BITE CITATIONS	+ 2	_____
ANIMAL ATTACK CITATIONS	+ 3	<u>+3</u>
OTHER CITATIONS / OR COMPLAINTS	+ 1	_____

SEVERITY OF INJURY TO ANIMALS:

ATTACK WITH NO INJURY	+ 1	_____
INJURIES TREATED BY OWNER	+ 2	_____
VET CARE (1 To 2 Visits)	+ 3	<u>+3</u>
EXTENSIVE VET CARE (>2 VISITS)	+ 4	_____
INJURIES RESULTED IN DEATH	+ 5	_____

CONFINEMENT MEASURES: (Check one factor only)
 (Primary Method of Confinement at the time of the incident)

SECURE FENCE/WALL AND GATES	- 5	_____
INADEQUATE FENCING OR GATES	+ 5	<u>+5</u>

OWNER ACCOUNTABILITY / RESPONSIBILITY:

REPAIRED DEFICIENT CONFINEMENT	- 3	_____
ANIMAL IS NEUTERED / SPAYED	- 1	_____
OWNER AWARE OF ANY AGGRESSION	+ 1	_____
OWNER FAILED TO REPAIR CONFINEMENT	+ 5	_____
CURRENTLY LICENSED LIC # _____	- 1	_____
NO CURRENT LICENSE	+ 1	<u>+1</u>
NO CURRENT RABIES VACCINATION	+ 1	<u>+1</u>

NEIGHBOR COMMENTS (Scored by Majority Opinion):
 (Two or More Neighbors Interviewed)

ANIMAL NEVER OBSERVED AT LARGE	- 3	_____
ANIMAL NOT OBSERVED AGGRESSIVE	- 3	_____
ANIMAL OBSERVED AT LARGE <5X/YR	+ 1	_____
ANIMAL OBSERVED AT LARGE >5X/YR	+ 2	<u>+2</u>
ANIMAL OBSERVED BEING AGGRESSIVE	+ 2	<u>+2</u>

DOGS BEHAVIOR: (if Observed by Officer)

ANIMAL BEHAVES AGGRESSIVELY	+ 2	_____
ANIMAL NOT AGGRESSIVE	- 2	<u>-2</u>
ANIMAL SHOWS UNSAFE BEHAVIOR	+ 1	_____

Confinement / Fencing:

The residence has field fencing and runs through gates. The confinement has been compromised, dog digging under the fence.

General Comments:

The dog was seen with 3 others, the complainant stated that the black tan bulldog mix was the aggressor but also observed ferocious aggression in the attack. The dog was not declared aggressive due to the complainant failing to obtain vet care, but has should to be declared dangerous.

OFFICER # X-Delegado Ho

TOTAL SCORE: +18

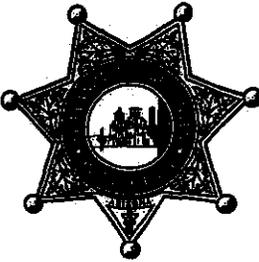
DANGEROUS
 NOT DANGEROUS

A SCORE OF TEN POINTS OR HIGHER SHALL BE DEEMED A DANGEROUS ANIMAL
 We have determined that your dog displays or has a tendency, disposition, or propensity to injure, bite attack, chase or charge, OR attempt to injure, bite, attack, chase or charge a person or domestic animal in a threatening manner OR bare its teeth or approach a person or domestic animal in a threatening manner City Code 4-13 / County Code 6.04.150. The owner has ten (10) days in the City, five (5) days (County & other jurisdictions) as to appeal the declaration of dangerous by filing a request for a dangerous dog hearing, providing the dog has not been declared vicious by a court. The owner may obtain this form at PACC IN PERSON.

DD#3

INVESTIGATION REPORT		SUSPECT [REDACTED]				ACO NAME / BADGE # 1942 Eckelbarger		COMPLAINT NUMBER A16-190348			
Pima County Health Department Pima Animal Care Center 4000 N. Silverbell Rd Tucson, Arizona 85745 Phone: (520) 243-5900 Fax: (520) 243-5960 www.pimaanimalcare.org		SUSPECT'S ADDRESS				BITE <input type="checkbox"/> WELFARE <input type="checkbox"/> DANGEROUS <input type="checkbox"/> OTHER <input checked="" type="checkbox"/>					
		ZIP	CITY Tucson	STATE AZ	RESIDENCE PHONE NUMBER		CODE IF OTHER :				
		SUSPECT'S BUSINESS ADDRESS				CI <input type="checkbox"/> CO <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Oro Valley					
		ZIP	CITY	STATE	BUSINESS PHONE NUMBER		DRIVERS LICENSE				
		SEX	WEIGHT	HEIGHT	EYES	HAIR COLOR	ORIGIN	DOB	SSN		
DOES THIS INCIDENT REQUIRE VICTIM REQUEST FOR WAIVER OF RIGHTS? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		LOCATION OF INCIDENT				DATE AND TIME REPORTED 3-20-16 / 1906		DATE AND TIME OCCURRED 3-20-16 / 1903			
		FOOD <input type="checkbox"/> WATER <input type="checkbox"/> SHELTER <input type="checkbox"/> INJURED/ILL <input type="checkbox"/> VENTILATION <input type="checkbox"/>				ABANDONED <input type="checkbox"/> TIEOUT <input type="checkbox"/> BEATEN <input type="checkbox"/> WASTE <input type="checkbox"/> OTHER (EXPLAIN)					
<input type="checkbox"/> I CHOOSE "upon request" rights in this case	VICTIM/COMPLAINANT NAME				D.O.B	RESIDENCE PHONE NO.		BUSINESS PHONE NO.			
<input type="checkbox"/> I WAIVE "upon request" rights in this case.	VICTIM'S ADDRESS				ZIP	CITY Tucson	STATE AZ				
<input type="checkbox"/> REQUEST/WAIVER exception per A.R.S. § 13-4405 (B) and § 8-286 (B)	VICTIM'S BUSINESS ADDRESS				ZIP	CITY	STATE				
NAME OF LAWFUL REPRESENTATIVE (IF APPLICABLE)	DANGEROUS ASSESSMENT REQUESTED YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		RESTITUTION REQUESTED YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		DANGEROUS CASE NUMBER		OTHER AGENCY CASE # <input type="checkbox"/> SO <input type="checkbox"/> TPD <input type="checkbox"/> TFD <input type="checkbox"/> OTHER:		FOLLOW UP REQUEST <input type="checkbox"/> SO <input type="checkbox"/> TPD <input type="checkbox"/> OTHER:		
<input type="checkbox"/> ADDRESS AND PHONE NUMBER SAME AS VICTIM	<input type="checkbox"/> VIOLATION		BITE SEVERITY:		TREATED BY	PHONE NUMBER	DATE QUARANTINED		PACC <input type="checkbox"/>		
	<input type="checkbox"/> NON-VIOLATION		PART OF BODY BITTEN:				RELEASE DATE:		VET <input type="checkbox"/>		
RELATIONSHIP TO VICTIM	VET CLINIC				PHONE NUMBER	OWNER KNOWS OF BITE YES <input type="checkbox"/> NO <input type="checkbox"/>		HOME <input type="checkbox"/>			
PHONE NUMBER								FTQ <input type="checkbox"/>			
								UTQ <input type="checkbox"/>			
LAWFUL REPRESENTATIVE ADDRESS	CLINIC'S ADDRESS				QUARANTINE 10 <input type="checkbox"/> 15 <input type="checkbox"/> 45 <input type="checkbox"/> 180 <input type="checkbox"/>		<input type="checkbox"/> FRA HEAD#				
	3RD PARTY CITATIONS YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		CITING ACO		PREVIOUS VIOLATIONS YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		PREVIOUS CASE NUMBER		OTHER ADDITIONAL REPORTS		
VICTIM OR LAWFUL REPRESENTATIVE SIGNATURE	CODE/ORD VIOLATED								REVIEWED BY 3-29-16 DTK 1911		
	CITATIONS/NUMBERS								BOND YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		
BREED/DESCRIPTION VICTIM OR OWNER ANIMAL		ANIMAL'S NAME		COLOR	SEX	AGE	TAG COLOR	LICENSE #	VX CERTIFICATE #	COND	ANIMAL ID#
Pit-bull mix		Cowlee		Black/white	F	5yr		Current		Ok	A331192
VICTIM OWNER <input checked="" type="checkbox"/>											
VICTIM OWNER <input type="checkbox"/>											
Springer Spaniel		Garby		White/red	F	2yr				I	
VICTIM OWNER <input checked="" type="checkbox"/>											
VICTIM OWNER <input type="checkbox"/>											
VICTIM OWNER <input type="checkbox"/>											
VICTIM OWNER <input type="checkbox"/>											
VICTIM OWNER <input type="checkbox"/>											
WITNESS 1		M <input type="checkbox"/> F <input type="checkbox"/>	DOB	ADDRESS			RESIDENCE PHONE #		BUSINESS PHONE #		
WITNESS 2		M <input type="checkbox"/> F <input type="checkbox"/>	DOB	ADDRESS			RESIDENCE PHONE #		BUSINESS PHONE #		
WITNESS 3		M <input type="checkbox"/> F <input type="checkbox"/>	DOB	ADDRESS			RESIDENCE PHONE #		BUSINESS PHONE #		
WITNESS 4		M <input type="checkbox"/> F <input type="checkbox"/>	DOB	ADDRESS			RESIDENCE PHONE #		BUSINESS PHONE #		

DD#3



INVESTIGATION REPORT

Activity Number: A16-190348

ACO name & Badge: 1942 Eckelbarger

On 3-23-16 I Investigator Eckelbarger (1942) was assigned a dangerous dog evaluation case on Cowlee after a reported dog on dog attack occurring on 3-20-16.

On 3-24-16 I responded to the neighborhood of the dog owners and conducted the neighborhood interviews. The majority opinion was that Cowlee has not been seen aggressive or at large. I also ran a search and found no previous complaints on the property. I called the victim, _____, who stated his dog Garby was attacked by "Cowlee" and that was the only time he had ever seen the dog. He stated he would be willing to drop the charges provided the owner agrees to pay back the restitution for his vet bills which were approximately 700 dollars.

Cowlee was adopted from the Pima Animal Care Center and it was previously noted on the animal ID that Cowlee had attacked another dog while at an off-site adoption event. There was an additional notation that Cowlee was aggressive towards smaller dogs. The dog also exhibited some fearful or unsafe behavior towards a member of the shelter staff while she was housed at the Pima Animal Care Center.

On 3-28-16 I responded to _____ where I met with dog owner, _____, who showed me his dog Cowlee and a large black and white pitbull mix "Bridget". Cowlee appeared friendly towards me. I inspected the backyard confinement which consisted of a block wall approximately 6 feet tall with one gate leading into the yard. There were no reports of the dogs escaping the confinement.

I then finished the scoresheet. Cowlee scored a +4 and is therefore not declared dangerous at this time. I issued the owner his copy of the scoresheet.

The complainant then came over to _____ address and _____ paid the vet bill. The case is now closed as resolved.

Officer's Signature:  1942

Date: 3-29-16



PIMA COUNTY HEALTH DEPARTMENT
 PIMA ANIMAL CARE CENTER
 4000 N. SILVERBELL RD. TUCSON, AZ 85745
 (520) 724-5900 FAX (520) 724-5960
 www.pima.gov/animalcare

DD#3

CASE NO: A16-190348
 OWNER: [REDACTED]
 ANIMAL NAME: Caulee

ADDRESS: _____
 SEX: F BREED: Pitbull mix
 COLOR: Black/white DATE: 3-28-16

EVALUATION CRITERIA

REPORTED BITES:

NON-VIOLATION BITE +3 _____
 VIOLATION-BITE +6 _____

SEVERITY OF INJURY TO HUMANS:

(Check One Factor Only Per Victim)

NO BREAK IN SKIN +1 _____
 BREAK IN SKIN OR BRUISING +2 _____
 MEDICAL CARE (RELEASED) +3 _____
 MULTIPLE BITES-SINGLE INCIDENT +4 _____
 BIT DOWN AND SHOOK VICTIM +4 _____
 MEDICAL CARE (HOSPITALIZATION) +5 _____

Animal Complaints or Violations:

LEASH LAW CITATIONS +2 +2
 LEASH LAW COMPLAINTS +1 1
 ATTEMPTED BITE CITATIONS +2 _____
 ANIMAL ATTACK CITATIONS +3 +3
 OTHER CITATIONS / OR COMPLAINTS +1 _____

SEVERITY OF INJURY TO ANIMALS:

ATTACK WITH NO INJURY +1 _____
 INJURIES TREATED BY OWNER +2 _____
 VET CARE (1 To 2 Visits) +3 +3
 EXTENSIVE VET CARE (>2 VISITS) +4 _____
 INJURIES RESULTED IN DEATH +5 _____

CONFINEMENT MEASURES: (Check one factor only)

(Primary Method of Confinement at the time of the incident)

SECURE FENCE/WALL AND GATES -5 _____
 INADEQUATE FENCING OR GATES +5 +5
Not under control

OWNER ACCOUNTABILITY / RESPONSIBILITY:

REPAIRED DEFICIENT CONFINEMENT -3 -3
 ANIMAL IS NEUTERED / SPAYED -1 -1
 OWNER AWARE OF ANY AGGRESSION +1 _____
 OWNER FAILED TO REPAIR CONFINEMENT +5 _____
 CURRENTLY LICENSED LIC # 15-264743 -1 -1
 NO CURRENT LICENSE +1 _____
 NO CURRENT RABIES VACCINATION +1 _____

NEIGHBOR COMMENTS (Scored by Majority Opinion):

(Two or More Neighbors Interviewed)

ANIMAL NEVER OBSERVED AT LARGE -3 -3
 ANIMAL NOT OBSERVED AGGRESSIVE -3 -3
 ANIMAL OBSERVED AT LARGE <6X/YR +1 _____
 ANIMAL OBSERVED AT LARGE >6X/YR +2 _____
 ANIMAL OBSERVED BEING AGGRESSIVE +2 _____

DOGS BEHAVIOR: (If Observed by Officer)

ANIMAL BEHAVES AGGRESSIVELY Previous +2 +2
 ANIMAL NOT AGGRESSIVE report of -2 _____
 ANIMAL SHOWS UNSAFE BEHAVIOR Aggressive at PACC +1 _____

Confinement / Fencing:

6 foot wall w/ one gate leading into yard

General Comments:

The dog Caulee scored a +4 and is therefore not declared dangerous at this time!

OFFICER # 1942 Eckelbarger

TOTAL SCORE: +4

DANGEROUS
 NOT DANGEROUS

A SCORE OF TEN POINTS OR HIGHER SHALL BE DEEMED A DANGEROUS ANIMAL

We have determined that your dog displays or has a tendency, disposition, or propensity to injure, bite attack, chase or charge, OR attempt to injure, bite, attack, chase or charge a person or domestic animal in a threatening manner OR bare its teeth or approach a person or domestic animal in a threatening manner City Code 4-13 / County Code 6.04.150. The owner has ten (10) days in the City, five (5) days (County & other jurisdictions) as to appeal the declaration of dangerous by filing a request for a dangerous dog hearing, providing the dog has not been declared vicious by a court. The owner may obtain this form at PACC IN PERSON.

DD#4

INVESTIGATION REPORT		SUSPECT [REDACTED]		ACD NAME / BADGE # A. Kirby #2057		ACTIVITY/BITE NUMBER A16-190085	
Pima County Health Department Pima Animal Care Center 4000 N. Silverbell Rd. Tucson, Arizona 85745 Phone: (520) 724-5900 Fax: (520) 724-5960		SUSPECT'S ADDRESS		BITE <input type="checkbox"/> WELFARE <input type="checkbox"/> DANGEROUS <input type="checkbox"/>		OTHER <input checked="" type="checkbox"/> Attempted Bite w/injuries	
CITY Oro Valley		STATE AZ	ZIP 85704	RESIDENCE PHONE NUMBER		CI <input type="checkbox"/> CO <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Oro Valley	
SUSPECT'S BUSINESS ADDRESS		CITY		STATE	ZIP	BUSINESS PHONE NUMBER	
CITY		STATE	ZIP	BUSINESS PHONE NUMBER		DRIVERS LICENSE	
SEX	WEIGHT	HEIGHT	EYES	HAIR	ORIGIN	DOB	SOCIAL SECURITY NUMBER
DOES THIS INCIDENT REQUIRE VICTIM REQUEST FOR WAIVER OF RIGHTS? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		LOCATION OF INCIDENT		DATE AND TIME OF INCIDENT 3/17/16 :2:37pm		Date and time reported 3/17/16 2:39pm	
FOOD <input type="checkbox"/> WATER <input type="checkbox"/> SHELTER <input type="checkbox"/> VENTILATION <input type="checkbox"/> ABANDONED <input type="checkbox"/> TIED OUT <input type="checkbox"/> BEATEN <input type="checkbox"/> WASTE <input type="checkbox"/> INJ/ILL <input type="checkbox"/> OTHER (EXPLAIN) <input type="checkbox"/>		VICTIM/COMPLAINANT NAME		DATE OF BIRTH	RESIDENCE PHONE	BUSINESS PHONE	
<input checked="" type="checkbox"/> I CHOOSE "upon request" rights in this case		VICTIM'S ADDRESS		CITY	STATE	ZIP	
<input type="checkbox"/> I WAIVE "upon request" rights in this case.		VICTIM'S BUSINESS ADDRESS		CITY	STATE	ZIP	
NAME OF LAWFUL REPRESENTATIVE (IF APPLICABLE)		DANGEROUS ASSESSMENT REQUESTED YES <input type="checkbox"/> NO <input type="checkbox"/>	RESTITUTION REQUESTED YES <input type="checkbox"/> NO <input type="checkbox"/>	DANGEROUS CASE NUMBER	OTHER AGENCY CASE # <input type="checkbox"/> SHERIFF DEPT <input type="checkbox"/> TUCSON POLICE <input type="checkbox"/> FIRE <input checked="" type="checkbox"/> OTHER: V16030916		FOLLOW UP REQUEST <input type="checkbox"/> SD <input type="checkbox"/> TPD <input type="checkbox"/> OTHER:
<input type="checkbox"/> ADDRESS AND PHONE NUMBER SAME AS VICTIM		<input checked="" type="checkbox"/> VIOLATION		BITE SEVERITY:	TREATED BY	PHONE NUMBER	DATE QUARANTINED
RELATIONSHIP TO VICTIM		<input type="checkbox"/> NON-VIOLATION		PART OF BODY BITTEN:	OWNER KNOWS OF BITE YES <input type="checkbox"/> NO <input type="checkbox"/>		PACC <input type="checkbox"/> VET <input type="checkbox"/> HOME <input type="checkbox"/>
PHONE NUMBER		VET CLINIC		PHONE NUMBER	OWNER KNOWS OF BITE		FTQ <input type="checkbox"/> LFG <input type="checkbox"/>
LAWFUL REPRESENTATIVE ADDRESS		CLINIC'S ADDRESS		QUARANTINE (DAYS) 10 <input type="checkbox"/> 15 <input type="checkbox"/> 45 <input type="checkbox"/> 180 <input type="checkbox"/>		<input type="checkbox"/> FRA HEAD#	
3 rd PARTY CITATIONS YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		CITING ACD		PREVIOUS VIOLATIONS YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PREVIOUS CASE NUMBER	OTHER ADDITIONAL REPORTS	
VICTIM OR LAWFUL REPRESENTATIVE SIGNATURE		CODE/ORD VIOLATED		REVIEWED BY		BOND YES <input type="checkbox"/> NO <input type="checkbox"/>	
CITATIONS/NUMBERS cited by Oro Valley Police		BREED/DESCRIPTION		ANIMAL'S NAME	COLOR	SEX	AGE
VICTIM OWNER <input checked="" type="checkbox"/>		Akita mix		White Socks	Brown/White	N	3Y
VICTIM OWNER <input checked="" type="checkbox"/>		Sharpei Mix		Buddy	Brown	N	9Y
VICTIM OWNER <input type="checkbox"/>							
VICTIM OWNER <input type="checkbox"/>							
VICTIM OWNER <input type="checkbox"/>							
VICTIM OWNER <input type="checkbox"/>							
VICTIM OWNER <input type="checkbox"/>							
VICTIM OWNER <input type="checkbox"/>							
WITNESS 1		M <input type="checkbox"/> F <input type="checkbox"/>	DOB	ADDRESS		RESIDENCE PHONE #	BUSINESS PHONE #
WITNESS 2		M <input type="checkbox"/> F <input type="checkbox"/>	DOB	ADDRESS		RESIDENCE PHONE #	BUSINESS PHONE #
WITNESS 3		M <input type="checkbox"/> F <input type="checkbox"/>	DOB	ADDRESS		RESIDENCE PHONE #	BUSINESS PHONE #
WITNESS 4		M <input type="checkbox"/> F <input type="checkbox"/>	DOB	ADDRESS		RESIDENCE PHONE #	BUSINESS PHONE #



SD#4

INVESTIGATION REPORT

PACC Activity: A16-190085

ACO & Badge A. Kirby #2057

03/17/16 1551 hours I Officer Kirby #2057 arrived at and met with Oro Valley Police Department (OVPD) Officer Knapp #V237. Officer Knapp advised that they were dispatched to the scene where two dogs broke free from the owners control and aggressively chased a male on a bicycle causing him to crash the bicycle into a trash can, falling off the bike and hitting his head on a large rock causing him to black out. Upon my arrival it was unclear whether the victim was bitten by the dogs or not. Victim was transported to UMC for medical treatment due to the severity and nature of the injuries. It was reported that the dogs reside at. OVPD Officer Knapp and I observed a white truck leave the residence, as we were going to make contact at, we recieved no answer at the door upon knocking several times. We were able to observe the dogs inside the home through the sliding glass door. I photographed the dogs. Due to the history of a previous bite and multiple leash law complaints I posted a notice on the door advising of a possible Dangerous dog evaluation. Officer Knapp and I then went to UMC Emergency center to meet with the victim. Upon arrival we met with UMC medical staff who advised that they did not locate anything that appeared to be a puncture wound. They advised that the victim will require stitches in two spots on the face and has multiple scraped and abrasions. Officer Knapp photographed the injuries further and provided with victim rights information. was advised of his rights as a victim and advised he wanted to move forward with the case. Officer Knapp and OVPD will be continuing with the charges against the owners and handle the case. I advised that PACC may complete a dangerous dog evaluation due to the severity of the injuries and the history of the dogs.

03/18/16 1936 Hours I Pima Animal Care Officer A. Kirby #2057 arrived to follow up with the dog owners. Oro Valley Police Officer Fletcher #V245 (OVPD) was present with me. Upon ringing the doorbell we were met by ████████ who is the mother of the license holder for the dogs known as White Socks and Buddy. I advised that due to the previous cases as well as this incident a dangerous dog evaluation was being initiated by Pima Animal Care Center. I then advised that for public safety the dogs must be placed on a Dangerous Dog Hold at PACC pending the outcome of the investigation. ████████ was extremely agitated by this and began yelling that we were going to have to arrest her. We advised that was not what we wanted to do. She began to make numerous phone calls asking people to come over. It was at this point I contacted PACC Supervisor Tenkate #1911 and she advised to ask OVPD to seek a telephonic search warrant. OVPD Officer Fletcher and I then exited the residence to seek the warrant. Once outside we were met by OVPD Officer Barkley #V241 who explained to ████████ the possible courses of action and the outcomes. ████████ asked how long the dogs would be held at our facility for, I advised a Minimum of 1 week depending on the progress of the investigation. ████████ calmed down and finally cooperated. She then assisted in leashing the dogs and loading them onto the PACC truck. I provided ████████ with a notice of impoundment listing both dogs (White Socks and Buddy) as well as the PACC Case #A16-190085 and my my last name and Badge #. OVPD Officer Fletcher provided her with a business card listing the OVPD Case number as well as his name and badge number.

Officer's Signature:

Date:



DD#4

PIMA COUNTY HEALTH DEPARTMENT
PIMA ANIMAL CARE CENTER
4000 N. SILVERBELL RD. TUCSON, AZ 85745
(520) 724-5900, option 3 FAX (520) 724-5960
www.pima.gov/animalcare

COMPLAINT # A16-190266
OFFICER # 1942 Eckelbarger
DATE: 3-24-16

DECLARATION OF DANGEROUS / VICIOUS ANIMAL

YOUR ANIMAL HAS BEEN DECLARED TO BE A DANGEROUS ANIMAL FOR THE FOLLOWING REASON(S):

- An animal can be declared a dangerous animal if it, without provocation, bites or otherwise causes injury to a person which results in significant medical intervention/treatment.
- An animal can be deemed dangerous if it, without provocation, kills or severely injures a domestic animal.
- An animal declared vicious by a magistrate shall be automatically deemed dangerous.

OFFICER COMMENTS:

The dog "Buddy" is declared dangerous as a result of causing significant injury to another person on 3-17-16 while in violation of the leash law.

OWNER: _____	ANIMAL NAME: <u>Buddy</u>
ADDRESS: _____	ANIMAL ID#: <u>A428532</u>
PHONE: _____	SEX: <u>M</u> COLOR: <u>Bro</u> BREED: <u>Sharpei X</u>

NOTICE

YOUR ANIMAL HAS BEEN DECLARED TO BE DANGEROUS PURSUANT TO LOCAL JURISDICTION'S ORDINANCE / CODE .

If the dog has not been declared vicious by a court, you may appeal the declaration of dangerous. You have (5) days if cited in Pima County, Marana, Sahuarita or South Tucson; OR 10 days, if cited in Tucson; to appeal the declaration of dangerous by filing a request for a dangerous dog hearing. You may obtain the request form at PACC IN PERSON.



PIMA COUNTY
ANIMAL CARE

PIMA COUNTY HEALTH DEPARTMENT
PIMA ANIMAL CARE CENTER
4000 N. SILVERBELL RD. TUCSON, AZ 85745
(520) 724-5900, option 3 FAX (520) 724-5960
www.pima.gov/animalcare

COMPLAINT # A16-190266
OFFICER # 1942 Eckelbarger
DATE: 3-24-16

DECLARATION OF DANGEROUS / VICIOUS ANIMAL

YOUR ANIMAL HAS BEEN DECLARED TO BE A DANGEROUS ANIMAL FOR THE FOLLOWING REASON(S):

- An animal can be declared a dangerous animal if it, without provocation, bites or otherwise causes injury to a person which results in significant medical intervention/treatment.
- An animal can be deemed dangerous if it, without provocation, kills or severely injures a domestic animal.
- An animal declared vicious by a magistrate shall be automatically deemed dangerous.

OFFICER COMMENTS:

The dog "White Socks" is declared dangerous as a result of causing significant injury to another person on 3-17-16 while in violation of the leash law.

OWNER: [REDACTED] ANIMAL NAME: White Socks
ADDRESS: [REDACTED] ANIMAL ID#: A428531
PHONE: [REDACTED] SEX: M COLOR: Brindle BREED: Akita

NOTICE

YOUR ANIMAL HAS BEEN DECLARED TO BE DANGEROUS PURSUANT TO LOCAL JURISDICTION'S ORDINANCE / CODE .

If the dog has not been declared vicious by a court, you may appeal the declaration of dangerous. You have (5) days if cited in Pima County, Marana, Sahuarita or South Tucson; OR 10 days, if cited in Tucson; to appeal the declaration of dangerous by filing a request for a dangerous dog hearing. You may obtain the request form at PACC IN PERSON.

Dangerous Dog Comments from Nancy Emptage

Case Number	Supervisor's Comments	Emptage Comments
1. A16-187532	A dog named Mary-Jane was declared not dangerous by Investigator Eckelbarger	
2. A16-188156	A dog named Toreto was declared dangerous by Investigator Delgadillo. The second dog named Geo had been signed over to PACC prior to the dangerous dog evaluation. Both dogs were impounded and euthanized at PACC.	
3. A 16-190348	A dog named Cow lee was declared not dangerous by Investigator Eckelbarger.	According to report "Cowlee was adopted from the Pima Animal Care Center and it was previously oted on the animal 10 that Cowlee had attacked another dog while at an off-eite adoption event There was an additional notation that Cowlee was aggressive towards smaller dogs. The dog also exhibited some fearful or unsafe behavior towards a member of the shelter staff while she was housed at the Pima Animal Care Center." <i>Was the adopter of Cowlee informed of dog's aggressive behavior?</i>
4. A16-190085	Two dogs named Buddy and White Socks were declared dangerous by Investigator Eckelbarger. Both dogs were impounded and then redeemed by the owner after their confinement was modified. The owner requested a hearing to contest the declaration of dangerous. The hearing is scheduled for April 11, 2016. Investigator Eckelbarger will monitor compliance.	

DD Comment From Dr. Smith:

Case 4 What was the outcome of the court hearing on 4/11?

**Pima Animal Care Center
Animals on Hold Report**

Animals listed are currently listed as being on hold without an outcome date. They are grouped by the type of hold

kennel_no

HOLD TYPE ENFORCEMEN

Number on Hold **34**

A16-190766

K16-214513	A555804	DOG	BELLA	PIT BULL/	
3/30/16	CONFISCATE	POLICE	NORMAL	Activity:A16-190766	D120
Kennel Comment: ENF HOLD FOR PCAO ((Do not release...2oo2))					<input type="text" value="R"/>
03/30/2016	ENFORCEM			akirby	3/30/16 13:48
03/30/16 13:48 hrs ENFORCEMENT HOLD FOR PCSO CASE.					
2057					

A16-191456

K16-215439	A557347	CAT		DOMESTIC SH/	
4/12/16	CONFISCATE	FIELD	NORMAL	Activity:A16-191456	I051
Kennel Comment: no chip ***3C3C3C3C3C***					<input type="text" value="R"/>
04/12/2016				DHINTE	4/12/16 12:11
If owner comes to redeem, please cite on behalf of Officer Hinte 2068 for the following:					
County jurisdiction					
7300 N Mona Lisa Rd #21221					
04/12/16 08:26					
neglect- no food for A557347, A557348, and A557349					
neglect- no water for A557347, A557348, and A557349					
neglect- unsanitary shelter for A557347, A557348, and A557349					
abandonment for A557347, A557348, and A557349					

K16-215440	A557348	CAT		DOMESTIC SH/	
4/12/16	CONFISCATE	FIELD	NORMAL	Activity:A16-191456	I051
Kennel Comment: no chip ***3C3C3C3C3C***					<input type="text" value="R"/>
04/12/2016				DHINTE	4/12/16 12:11
If owner comes to redeem, please cite on behalf of Officer Hinte 2068 for the following:					
County jurisdiction					
7300 N Mona Lisa Rd #21221					
04/12/16 08:26					
neglect- no food for A557347, A557348, and A557349					
neglect- no water for A557347, A557348, and A557349					
neglect- unsanitary shelter for A557347, A557348, and A557349					
abandonment for A557347, A557348, and A557349					

K16-215441	A557349	CAT		DOMESTIC SH/	
4/12/16	CONFISCATE	FIELD	NORMAL	Activity:A16-191456	I051
Kennel Comment: no chip ***3C3C3C3C3C***					<input type="text" value="R"/>

04/12/2016

DHINTE 4/12/16 12:11

If owner comes to redeem, please cite on behalf of Officer Hinte 2068 for the following:

County jurisdiction
7300 N Mona Lisa Rd #21221
04/12/16 08:26

neglect- no food for A557347, A557348, and A557349
neglect- no water for A557347, A557348, and A557349
neglect- unsanitary shelter for A557347, A557348, and A557349
abandonment for A557347, A557348, and A557349

A16-191549

K16-215556 A557597 CAT UNKNOWN DOMESTIC SH/

4/14/16 CONFISCATE EVICTION NORMAL Activity:A16-191549 **I013**

Kennel Comment: 3C- 1942

R

04/14/2016

MECKELBA 4/14/16 12:43

4-14-16 0830 hours. If owner attempts to redeem cite for abandonment and neglect-unsanitary shelter on all the cats. Also if owner attempts to redeem, bond all cats. 1942 Eckelbarger

K16-215557 A557596 CAT UNKNOWN DOMESTIC SH/

4/14/16 CONFISCATE EVICTION NORMAL Activity:A16-191549 **I032**

Kennel Comment: 3C- 1942

R

04/14/2016

MECKELBA 4/14/16 12:43

4-14-16 0830 hours. If owner attempts to redeem cite for abandonment and neglect-unsanitary shelter on all the cats. Also if owner attempts to redeem, bond all cats. 1942 Eckelbarger

K16-215558 A557599 CAT UNKNOWN DOMESTIC SH/

4/14/16 CONFISCATE EVICTION NORMAL Activity:A16-191549 **I034**

Kennel Comment: 3C- 1942

R

04/14/2016

MECKELBA 4/14/16 12:43

4-14-16 0830 hours. If owner attempts to redeem cite for abandonment and neglect-unsanitary shelter on all the cats. Also if owner attempts to redeem, bond all cats. 1942 Eckelbarger

K16-215559 A557594 CAT UNKNOWN DOMESTIC SH/

4/14/16 CONFISCATE EVICTION NORMAL Activity:A16-191549 **I035**

Kennel Comment: 3C- 1942

R

04/14/2016

MECKELBA 4/14/16 12:44

4-14-16 0830 hours. If owner attempts to redeem cite for abandonment and neglect-unsanitary shelter on all the cats. Also if owner attempts to redeem, bond all cats. 1942 Eckelbarger

K16-215560 A557593 CAT UNKNOWN DOMESTIC SH/

4/14/16 CONFISCATE EVICTION NORMAL Activity:A16-191549 **I033**

Kennel Comment: 3C- 1942

R

04/14/2016

MECKELBA 4/14/16 12:44

4-14-16 0830 hours. If owner attempts to redeem cite for abandonment and neglect-unsanitary shelter on all the cats. Also if owner attempts to redeem, bond all cats. 1942 Eckelbarger

K16-215561 A557595 CAT UNKNOWN DOMESTIC SH/

4/14/16 CONFISCATE EVICTION NORMAL Activity:A16-191549 **I016**

Kennel Comment: 3C- 1942

R

04/14/2016

MECKELBA 4/14/16 12:45

4-14-16 0830 hours. If owner attempts to redeem cite for abandonment and neglect-unsanitary shelter on all the cats. Also if owner attempts to redeem, bond all cats. 1942 Eckelbarger

K16-215562 A557586 CAT UNKNOWN DOMESTIC SH/

4/14/16 CONFISCATE EVICTION NORMAL Activity:A16-191549 kennel no
Kennel Comment: 3C- 1942 **I010**

04/14/2016 MECKELBA 4/14/16 12:45
4-14-16 0830 hours. If owner attempts to redeem cite for abandonment and neglect-unsanitary shelter on all the cats. Also if owner attempts to redeem, bond all cats. 1942 Eckelbarger

K16-215563 A557598 CAT UNKNOWN DOMESTIC SH/
4/14/16 CONFISCATE EVICTION NORMAL Activity:A16-191549 **I011**

04/14/2016 MECKELBA 4/14/16 12:45
4-14-16 0830 hours. If owner attempts to redeem cite for abandonment and neglect-unsanitary shelter on all the cats. Also if owner attempts to redeem, bond all cats. 1942 Eckelbarger

K16-215564 A557585 CAT UNKNOWN DOMESTIC SH/
4/14/16 CONFISCATE EVICTION NORMAL Activity:A16-191549 **I009**

04/14/2016 MECKELBA 4/14/16 12:46
4-14-16 0830 hours. If owner attempts to redeem cite for abandonment and neglect-unsanitary shelter on all the cats. Also if owner attempts to redeem, bond all cats. 1942 Eckelbarger

K16-215565 A557587 CAT UNKNOWN DOMESTIC SH/
4/14/16 CONFISCATE EVICTION NORMAL Activity:A16-191549 **I030**

04/14/2016 MECKELBA 4/14/16 12:46
4-14-16 0830 hours. If owner attempts to redeem cite for abandonment and neglect-unsanitary shelter on all the cats. Also if owner attempts to redeem, bond all cats. 1942 Eckelbarger

K16-215566 A557588 CAT UNKNOWN DOMESTIC SH/
4/14/16 CONFISCATE EVICTION NORMAL Activity:A16-191549 **I014**

04/14/2016 MECKELBA 4/14/16 12:46
4-14-16 0830 hours. If owner attempts to redeem cite for abandonment and neglect-unsanitary shelter on all the cats. Also if owner attempts to redeem, bond all cats. 1942 Eckelbarger

K16-215567 A557592 CAT UNKNOWN DOMESTIC SH/
4/14/16 CONFISCATE EVICTION NORMAL Activity:A16-191549 **I012**

04/14/2016 MECKELBA 4/14/16 12:47
4-14-16 0830 hours. If owner attempts to redeem cite for abandonment and neglect-unsanitary shelter on all the cats. Also if owner attempts to redeem, bond all cats. 1942 Eckelbarger

K16-215568 A557591 CAT UNKNOWN DOMESTIC SH/
4/14/16 CONFISCATE EVICTION NORMAL Activity:A16-191549 **I036**

04/14/2016 MECKELBA 4/14/16 12:47
4-14-16 0830 hours. If owner attempts to redeem cite for abandonment and neglect-unsanitary shelter on all the cats. Also if owner attempts to redeem, bond all cats. 1942 Eckelbarger

K16-215569 A557590 CAT UNKNOWN DOMESTIC SH/
4/14/16 CONFISCATE EVICTION NORMAL Activity:A16-191549 **I015**

04/14/2016 MECKELBA 4/14/16 12:48
4-14-16 0830 hours. If owner attempts to redeem cite for abandonment and neglect-unsanitary shelter on all the cats. Also if owner attempts to redeem, bond all cats. 1942 Eckelbarger

K16-215610 A557651 CAT UNKNOWN DOMESTIC SH/

4/14/16 CONFISCATE EVICTION NORMAL Activity:A16-191549
Kennel Comment: 3C- 1918

kennel no

I041

A16-191584

K16-215698 A529399 DOG KELO PIT BULL/
4/15/16 CONFISCATE FIELD OWN NORMAL Activity:A16-191584
Kennel Comment: chip # 982000365133196
DD Hold

D102

A16-191832

K16-215758 A557824 DOG PUPPY FACE LABRADOR RETR/MIX
4/16/16 CONFISCATE FIELD OWN NORMAL Activity:A16-191832
Kennel Comment: 3C, no bite, no chip
P395011

DR009

K16-215759 A557825 DOG PUPPY NOSE PIT BULL/MIX
4/16/16 CONFISCATE FIELD OWN NORMAL Activity:A16-191832
Kennel Comment: 3C, no bite, no chip
P395011

D161

K16-215760 A557826 DOG MAMA DOG QUEENSLAND HEEL/MIX
4/16/16 CONFISCATE FIELD OWN NORMAL Activity:A16-191832
Kennel Comment: 3C, no bite, no chip
P395011

DR006

K16-215762 A557827 DOG CASPER PIT BULL/MIX
4/16/16 CONFISCATE FIELD OWN NORMAL Activity:A16-191832
Kennel Comment: 3C, no bite, no chip

DR009

K16-215763 A557829 DOG PUPPY 1 QUEENSLAND HEEL/MIX
4/16/16 CONFISCATE FIELD OWN NORMAL Activity:A16-191832
Kennel Comment: 3C, no bite, no chip
P395011

D165

K16-215764 A557830 DOG PUPPY 2 QUEENSLAND HEEL/MIX
4/16/16 CONFISCATE FIELD OWN NORMAL Activity:A16-191832
Kennel Comment: 3C, no bite, no chip
P395011

D165

K16-215765 A557831 DOG PUPPY 3 QUEENSLAND HEEL/MIX
4/16/16 CONFISCATE FIELD OWN NORMAL Activity:A16-191832
Kennel Comment: 3C, no bite, no chip

D165

K16-215766 A557832 DOG PUPPY 4 QUEENSLAND HEEL/MIX
4/16/16 CONFISCATE FIELD OWN NORMAL Activity:A16-191832
Kennel Comment: 3C, no bite, no chip
P395011

D165

K16-215768 A557833 DOG PUPPY 5 QUEENSLAND HEEL/MIX
4/16/16 CONFISCATE FIELD OWN NORMAL Activity:A16-191832
Kennel Comment: 3C, no bite, no chip
P395011

D165

A16-191909

K16-215861 A557950 DOG CHIHUAHUA SH/
4/18/16 STRAY FIELD OWN NORMAL Activity:A16-191909
Kennel Comment: no chip confinement check b 4 redemption
3c3c3

V642

04/18/2016 ENFORCEM
04/18/16 10:30 NO BREAKS ON REDEMPTION FEES!!

xdelgad 4/18/16 10:30

If owner redeems please cite for leash law . 2047

NO ACTIVITY NUMBER RECORDED

K16-215708	A557768	DOG	DIGGER	GERM SHEPHERD/MIX	
4/16/16	OWNER SUR	OWNER DIED	NORMAL	Activity:	D116
Kennel Comment: no bite no chip HOLD FOR BOND (PCSO)					<input type="text" value="R"/>
K16-215709	A557769	DOG	YOGI	QUEENSLAND HEEL/LABRADOR RETR	
4/16/16	OWNER SUR	OWNER DIED	NORMAL	Activity:	D116
Kennel Comment: no bite no chip HOLD FOR BOND (PCSO)					<input type="text" value="R"/>
K16-215710	A557770	CAT	SASSY	SIAMESE/MIX	
4/16/16	OWNER SUR	OWNER DIED	NORMAL	Activity:	IGR02
Kennel Comment: no bite no chip HOLD FOR BOND PCSO 160408266 ...2oo2					<input type="text" value="R"/>
K16-215711	A557772	CAT	SCREECH	DOMESTIC SH/MIX	
4/16/16	OWNER SUR	OWNER DIED	NORMAL	Activity:	I056
Kennel Comment: no bite no chip 04/1616 HOLD FOR BOND PCSO 160408266 ...2oo2					<input type="text" value="R"/>

Donation Activity

Period: 03-01-2016 To: 03-31-2016

Donation Code	Amount
DONATION	\$124.00
DONATION ADOP	\$321.50
DONATION GEN	\$10,808.60
DONATION OUTR	\$72.00
DONATION S/N	\$12,630.20
DONATION SAMS	\$11,445.29
Grand Total	\$35,401.59

Donation Activity

Period: 07-01-2015 To: 03-31-2016

Donation Code	Amount
DONATION	\$671.02
DONATION ADOP	\$14,226.07
DONATION ENFORCE 0972	\$0.00
DONATION GEN	\$159,303.60
DONATION LIC 0973	\$20.00
DONATION OUTR	\$512.00
DONATION S/N	\$101,423.03
DONATION SAMS	\$117,713.67
Grand Total	\$393,869.39

Michael Schlueter

From: Marcy Flanagan
Sent: Monday, March 07, 2016 4:21 PM
To: Michael Schlueter
Subject: FW: More Animal Care Staff Kudos!

From: Francisco Garcia
Sent: Monday, March 7, 2016 4:19 PM
To: Jose Ocano <Jose.Ocano@pima.gov>
Cc: Marcy Flanagan <Marcy.Flanagan@pima.gov>
Subject: Fwd: More Animal Care Staff Kudos!

Great job team
Share with paccac
Sent from my iPhone

From: notification@pima.gov [mailto:notification@pima.gov]
Sent: Monday, March 07, 2016 9:59 AM
To: Maura Kwiatkowski
Subject: Feedback Form 2016-03-07 09:59 AM Submission Notification

Feedback Form 2016-03-07 09:59 AM was submitted by Guest on 3/7/2016 9:59:15 AM (GMT-07:00) US/Arizona

Name	Value
First Name	[REDACTED]
Last Name	[REDACTED]
email	[REDACTED]
Zipcode	85730

Message subject Quarantine interaction

Unfortunately I had to have contact with Pima Animal care because of a bite incident involving our dog Sherman. I am referring to case # A16 [REDACTED] Everything turned out well but i have to let you know about the Animal Control officer that came to my house on Mar. 3rd. Every dog that we have owned for the past 20 years has been a rescue in one form or another. We consider ourselves "dog people" and we take good care of our dogs so having a bite interaction for us was kind of scary and we imagined the worst. I have to tell you that the lady that showed

Comment up to our house was an absolute gem. She was kind, calming and a caring professional. I believe that her name was Deb or Deborah. I realized immediately that she was a "dog person" and treated me with respect and understanding. Please let her supervisors know that in a job that I know is very difficult on a daily basis and one where you could easily become jaded to pet owners, she is someone that PACC should be very proud of. What a wonderful person . Please forward this to the proper person and put a copy of this in her file. My wife and I want to thank her for her professionalism. Kind regards, [REDACTED]

Response requested Yes

Page_Link <http://webcms.pima.gov/cms/One.aspx?portalId=169&pageId=18469>