

**CITY OF FERGUSON
OFFICE OF THE CHIEF OF POLICE**

Index as:

Confidential Sources

Informants

CONFIDENTIAL SOURCES

471.00 PURPOSE

The purpose of this General Order is to establish procedural guidelines for members of the Ferguson Police Department to expend appropriate funds for the employment of persons to obtain evidence.

471.01 DEFINITIONS

- A. **“Informant”** - Anyone who gives or serves as a source of confidential information to the police.
- B. **“Confidential Sources” (CS)** - Anyone who gives information to the police and whose identity is concealed and deemed to be confidential.

471.02 PROCEDURE (Permissible Use of Money for CS)

- A. Informants may be developed by any member of this police department. Once the informant has demonstrated his **reliability**, they should be considered as a "Confidential Source" (CS), thus eligible to receive monies for their services.
- B. The criteria for using a paid CS would include determining the **legitimacy** and **value** of information to an investigation. This would affect the amount of the fund to be paid to the individual CS.
- C. The Division of Operational Support Commander and Supervisor may authorize payment to a CS up to \$200 for information or services received without prior approval of the Chief. The Chief of Police may authorize the expenditure of funds in excess of \$200 to a CS when funding is deemed necessary for information or services received.
- D. The Commander of the Division of Operational Support will administer control over the CS funds. He will be responsible for complete and accurate reporting and documentation of all monetary transactions by any member of this department to a CS. All CS funds will be kept in a locked safe in the Operational Support's office. Only the Operational Support Commander and Supervisor are authorized to enter the safe. All entries into the safe must be recorded in the safe log.

1. Detectives requesting CS funds should contact their supervisor or commander. Any other officer requesting CS funds will prepare a memorandum to the Operational Support Commander with approval from their own supervisor.
 2. Any false transaction, false documentation of a transaction or negligence in handling and accounting for funds will result in disciplinary action and possible criminal prosecution.
- E. An audit will be conducted annually on the CS funds by the Administrative Assistant to the Chief. The audit will be conducted in the first month of the fiscal year (July).

471.03 IDENTIFICATION OF CS

- A. Each person who is considered a CS will be identified and protected by utilizing the following system:
1. The CS will be assigned a CS number. This number will be unique to the individual CS;
 2. A FPD Form 132 titled "Confidential Source Agreement" will be filled out;
 3. A FPD Form 130 "Descriptive and Identifying Data of CS Form" must be filled out.
 4. A photo of the CS.
- B. The complete master file of CS will be permanently maintained in the Detective Bureau safe.

471.04 CONTROL OF INFORMANTS

- A. CS will be advised that they are not employees of this department. They have no enforcement powers and are not to represent themselves as police officers. The CS will complete the attached agreement.
- B. CS will not be allowed to commit crimes. When an officer determines that the CS has committed a crime, the officer will report the relevant facts to his supervisor. If the facts warrant prosecution, the matter will be submitted to the prosecuting attorney's office.
- C. Officers of this department are not authorized to offer immunity to a CS.

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- D. No payment or compensation of any kind will be made to a CS without prior approval from either the Operational Support Commander or Supervisor. Whenever a payment is made, proper documentation and signed receipts with witnesses are required.
- E. When contacting a CS of the opposite sex or a CS whose sexual preferences may make an investigation more susceptible to compromise through improprieties, it is recommended that a second officer be present.
- F. A juvenile may be used as a CS; however, an officer must first consider the age and life experience of the juvenile, as well as any possible risks or consequences that might arise from using a juvenile as a CS. **A supervisor will be consulted to determine if parental consent is necessary.**

471.05 CONFIDENTIAL SOURCE PACKET

- A. Photograph (Mug-Shot Type)
- B. FPD Form 130: Descriptive and Identifying Data of CS
- C. FPD Form 132: Confidential Source Agreement
- D. FPD Form 131: CS Receipt of Funds Form

By order of:

A handwritten signature in cursive script that reads "Colonel Thomas Jackson". The signature is written in dark ink and is positioned above the printed name.

COLONEL THOMAS JACKSON

Attachments

FPD Form 130: Descriptive and Identifying Data of CS

FPD Form 131: Confidential Source Receipt of Funds

FPD Form 132: Confidential Source Agreement

Distribution

All Department Personnel

April 21, 2010

FERGUSON POLICE DEPARTMENT CONFIDENTIAL SOURCE DESCRIPTION & IDENTIFICATION											
Name				Other Names Used (Including Nicknames)					Maiden Name		
Address				City		State		How Long		Telephone	
Previous Address				City		State		How Long		Telephone	
Sex	Race	Height	Weight	Age		Date of Birth		Place of Birth			
Citizenship	Hair	Eyes	Glasses	Build	Complexion	Social Security No.		Driver's License No.			
Distinguishing Marks/Scars				Operational Scars				Tattoos			
Attire								Visible Injuries			
Automobile (year, color, make, model)								License (year, state, number)			
Automobile (year, color, make, model)								License (year, state, number)			
Employer				Address				Occupation		Length	
Previous Employer				Address				Occupation		Length	
Marital Status	Times Married	Dates Married	Places Married			Times Divorced		Dates Divorced	Places Divorced		
Present Spouse				Maiden Name			Date of Birth		Occupation		
Previous Spouse		Address			Previous Spouse			Address			
Father		Address			Mother			Address			
Father-in-law		Address			Sister/Brother			Address			
Sister/Brother		Address			Sister/Brother			Address			
Sister/Brother		Address			Sister/Brother			Address			
Children		Age	Children			Age	Children			Age	
Children		Age	Boy/Girl Friend				Address				
Military Service (Branch)		Dates	Rank Attained:		Job Assignment:		Service No		Type Discharge		
Read () Yes () No	Write () Yes () No	Registered Voter () Yes () No		County			Union Member () Yes () No		Union and Local No.		
High School Attended				Years		College Attended				Years	

FPD FORM 130

FERGUSON POLICE DEPARTMENT

CONFIDENTIAL SOURCE

RECEIPT OF FUNDS

Complaint Number _____

PURPOSE: Purchase of Evidence ()

Information Services ()

I hereby acknowledge the receipt of Funds in the amount of

_____ and / 100 Dollars (\$ _____),

provided to me by _____
(NAME AND DSN)

Provided by: _____ **Date** _____ **Confidential Source** _____ **Date** _____

Witnessed by: _____ **Date** _____ **Assigned C/S Number** _____

FPD FORM 131

Ferguson Police Department
Bureau of Investigation

CONFIDENTIAL SOURCE AGREEMENT

The undersigned cooperating individual agrees to the following:

1. I will provide truthful information at all times;
2. I am not an employee of the Ferguson Police Department (FPD) and may not represent myself as such. Further, I may not enter into any contracts or incur any obligations on behalf of the Ferguson Police Department, except as specifically instructed and approved by the FPD;
3. I will abide by the instructions given to me, will not take any independent action, and I will not engage in any unlawful acts for which I may be subject to prosecution, except as specifically authorized by representatives of the Ferguson Police Department;
4. I will not engage in witness tampering, witness intimidation, entrapment, or the fabrication, alteration, or destruction of evidence;
5. I understand that if I am cooperating in exchange for consideration by a prosecuting office, the Ferguson Police Department will advise the prosecuting office the nature and extent of my assistance to the FPD, but cannot make any prosecutive or sentencing promises. Likewise, I understand that no promises or representations can be made to me regarding alien status and / or my right to enter or remain in the United States.
6. I understand that the Ferguson Police Department will strive to protect my identity, but cannot guarantee that it will not be divulged. I understand that the prosecutor's office may require me to testify in criminal proceedings at a later date.
7. I understand that I cannot be guaranteed any reward, payments, or other compensation and I am liable for any taxes that may be owed on monies the City of Ferguson pays me.

CONFIDENTIAL SOURCE:

Signature

Date

WITNESS:

Signature

Date

WITNESS:

Signature

Date