



**Roll Call Number**

**Agenda Item Number**

**39**

December 5, 2011

**Date**

WHEREAS, James Pratt, 5626 Douglas Avenue, # 216, filed an appeal before the City Council of the Hearing Officer's decision upholding the Chief Humane Officer's declaration of his dog as a Dangerous Animal; and

WHEREAS, Mr. Pratt requested an opportunity to address the City Council regarding his appeal; and

WHEREAS, Mr. Pratt has been provided with the opportunity to address the City Council on his appeal; NOW THEREFORE,

BE IT RESOLVED by the City Council of the City of Des Moines, Iowa: (Choose one of the two alternatives):

\_\_\_\_\_ Alternative One: That the order of the hearing officer be upheld and Mr. Pratt's dog be declared a dangerous animal and order the dog destroyed in a humane manner under Des Moines Code §18-202(b).

MOVED BY \_\_\_\_\_ TO UPHOLD  
DECLARATION AND TO HUMANELY DESTROY THE  
ANIMAL.

\_\_\_\_\_ Alternative Two: That the order of the hearing officer be reversed and Mr. Pratt's dog not be declared a dangerous animal.

MOVED BY \_\_\_\_\_ TO REVERSE THE  
DECLARATION AND DECLARE THE ANIMAL NOT  
DANGEROUS.

FORM APPROVED:

MOVED BY \_\_\_\_\_ TO ADOPT

*K. Massier*

Katharine J. Massier

COUNCIL ACTION	YEAS	NAYS	PASS	ABSENT
COWNIE				
COLEMAN				
GRIESS				
HENSLEY				
MAHAFFEY				
MEYER				
MOORE				
TOTAL				

MOTION CARRIED

APPROVED

Mayor

**CERTIFICATE**

I, DIANE RAUH, City Clerk of said City hereby certify that at a meeting of the City Council of said City of Des Moines, held on the above date, among other proceedings the above was adopted.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal the day and year first above written.

City Clerk

**EXHIBITS FOR DANGEROUS ANIMAL****“KLOE”**

**EXHIBIT A**     **Hearing Officer’s Decision  
(City Exhibits 1-29)**

**Animal Investigation Reports  
Code Sections**

**EXHIBIT B**     **James Pratt’s Exhibits  
(Exhibits 1-8)**

**EXHIBIT C**     **Appeal from James Pratt**

**EXHIBIT D**     **Letter to James Pratt  
(Setting date of Appeal to Council)**

**EXHIBIT E**     **Hearing Transcript**

**EXHIBIT A**

EX. A  
39



November 14, 2011

James Pratt  
5626 Douglas Avenue, #216  
Des Moines, IA 50310

Subject: Dangerous Animal

Attached is the ruling from the City of Des Moines Hearing Officer, for the Administrative Hearing on November 7, 2011. Please read it carefully, so you are aware of the decision, any deadlines you might be required to comply with, as well as any other requirements you may be held to.

Sincerely,

A handwritten signature in black ink that reads "Diane Rauh". The signature is fluid and cursive.

Diane Rauh  
City Clerk

DR:kh  
Attach

**City of Des Moines, Iowa  
November 7, 2011 Administrative Hearing**

In re:

JAMES PRATT,  
Respondent

DECISION AND ORDER  
AND  
NOTICE OF APPEAL RIGHTS

James Pratt, owner of a black and white colored female Pit Bull breed dog named "Chloe" (ARL# A14146270), appeared in his own behalf. Sergeant Scott Raudabaugh, the Chief Humane Officer with the City of Des Moines Police Department (the "DMPD"), appeared on behalf of the City of Des Moines, Iowa (the "City").

**Procedural History**

At approximately 12:10 AM on September 26, 2011, DMPD Police Officer Wing sustained a dog bite to the left inner thigh from a black and white colored female Pit Bull breed dog while responding to a "domestic" at 5626 Douglas Avenue, Des Moines, Polk County, Iowa; an extended stay motel room occupied by James Pratt (City Exhibits 18-19). On September 26, 2011, Mr. Pratt's dog "Chloe" was impounded and placed in quarantine with ARL CCC. On September 27, 2011, a Veterinarian examined "Chloe" and found the dog to have "predominant Pit Bull physical characteristics" (City Exhibit 23). On September 27, 2011, the City's Chief Humane Officer declared "Chloe" to be a "Vicious Dog," as defined under Section 18-41 of the City of Des Moines Municipal Code (the "Municipal Code") (City Exhibit 24). At approximately 8:49 AM on September 30, 2011, the DMPD slid a "Vicious Dog" declaration letter under the door of room 216 at the Douglas Avenue extended stay motel; where Mr. Pratt was known to be residing. The declaration letter notified Mr. Pratt that: (1) his dog "Chloe" was impounded at the animal shelter; (2) the dog was identified as over 6-months old and a vicious dog breed as defined under Section 18-41 of the Municipal Code; (3) he may reclaim the dog after properly licensing it as a "Vicious Dog" with the City Clerk's Office, which included agreeing to properly confine/leash it; (4) if his dog is found unlicensed or not properly confined/leashed two times it may be destroyed in a humane manner in accordance with Sections 18-57&58 of the Municipal Code; and (5) he had a right to appeal the "Vicious Dog" declaration provided his request was filed with the City Clerk's Office within three business days of receiving the notice of the "Vicious Dog" declaration (City Exhibits 24&25). The record is void of any evidence that Mr. Pratt filed an appeal with the City Clerk's Office to dispute the "Vicious Dog" declaration. At approximately 1:00 PM on October 12, 2011, the DMPD personally served Mr. Pratt with a copy of the "Vicious Dog" declaration letter; with Mr. Pratt's signature obtained on the receipt of service form (City Exhibit 26). On October 12, 2011 Mr. Pratt signed the "Vicious Dog" Compliance Form and filed it with the City Clerk's Office (City Exhibit 27).

At approximately 3:23 PM on October 25, 2011, the DMPD responded to a report of dog bite/domestic disturbance in the parking lot of an extended stay motel located at 5626 Douglas Avenue, Des Moines, Polk County, Iowa; in which three adults and a black and red Yorki dog were bite victims. On October 25, 2011, "Chloe" was impounded because the dog was found to have bitten at least two adults and killed the Yorki during the dog bite/domestic disturbance. On October 31, 2011, the Veterinary Diagnostic Laboratory at Iowa State University issued results from rabies testing and a necropsy on the victim dog; noting the dog tested negative for the

rabies virus and the dog had died from trauma, jugular laceration and hemorrhage from multiple bite wounds (City Exhibits 8-10). On November 3, 2011, DMPD contacted Mr. Pratt's Mother, who had sustained a bite injury, informing her that the victim dog had tested negative for rabies; an unsuccessful attempt was made to inform the victim dog's owner. On November 4, 2011, ARL CCC, at the request by DMPD, informed the victim dog owner that her dog tested negative for the rabies virus (City Exhibit 12). On November 3, 2011, the DMPD Chief Humane Officer declared "Chloe" (a/k/a "Cloe") a "Dangerous Animal" as defined under Section 18-196 of the Municipal Code (City Exhibit 1). On November 3, 2011, DMPD slid a copy a Notice form and the declaration letter under the door of room 216 at the Douglas Avenue extended stay motel; where Mr. Pratt was known to be staying (City Exhibit 2). The Notice informed Mr. Pratt that: (1) the City was declaring his dog "Chloe" to be a "Dangerous Animal" because the dog was involved in bite incidents of a person on two separate occasions within a 12-month period, as specified under Section 18-196 of the Municipal Code; (2) an administrative hearing to review the "Dangerous Animal" declaration had been scheduled for 10:00 AM on November 7th; (3) if the "Dangerous Animal" declaration is upheld "Chloe" may be destroyed in a humane manner as provided under Section 18-202 of the Municipal Code; and (4) "Chloe" will remain in impound pending the decision of the Administrative Hearing Officer. The administrative hearing was so conducted.

#### Discussion

Sergeant Raudabaugh argued Mr. Pratt's dog "Chloe" is a "Dangerous Animal" as defined under Section 18-196(1) of the Municipal Code because of the dog's vicious behavior during two recent occasions. Sergeant Raudabaugh testified that "Chloe" was found to be the bite dog during an incident on September 26, 2011 and again on October 25, 2011. Sergeant Raudabaugh testified that during the first incident, a Police Officer was bitten on the inner left thigh, which caused a puncture wound and tooth scrapes (DMPD Case# 11-31528). Sergeant Raudabaugh offered evidence into the record that the Officer had responded to a "Domestic" in room 216 of the Douglas Avenue extended stay motel (City Exhibit 18-19). Sergeant Raudabaugh testified that Mr. Pratt was identified as "Chloe's" owner and that the dog was on a leash in the room and under the control of an Ashley Martinez. Sergeant Raudabaugh testified that Ms. Martinez had been instructed to keep the dog away from the Police Officers; but the dog could not be controlled and it ran at the victim Officer, biting and breaking the skin of his inner left thigh (City Exhibits 20-21).

Sergeant Raudabaugh testified that during the most recent incident, on October 25, 2011, "Chloe" was being walked on a leash held by Mr. Pratt's Mother in the parking lot of the Douglas Avenue extended stay motel. Sergeant Raudabaugh testified that "Chloe" attacked a Yorkie dog, which had come up and was sniffing it; "Chloe" grabbed it in its jaw, repeatedly shook it and would not release it (DMPD case# 11-35116) (City Exhibit 6-7). Sergeant Raudabaugh testified that the record reflects that Mr. Pratt's Mother was punching "Chloe" in the head trying to get the dog off of the Yorkie dog (City Exhibit 15a). Sergeant Raudabaugh testified that an adult male, who resides at a neighboring property, responded to the yelling and screaming by jumping the property line fence and attempting to get "Chloe's" jaw open in order to release the victim dog (City Exhibit 16-17). Sergeant Raudabaugh testified that the male adult neighbor sustained a tear and bleeding on his right ring finger (DMPD case# 11-35118). Sergeant Raudabaugh testified that the victim dog's female adult owner also sustained injuries in her attempt to free her dog (City Exhibits 13-15a). Sergeant Raudabaugh testified that "Chloe" bit into and tore the victim dog's female adult owner's left pant leg; causing a one inch tooth scrape across her left knee (DMPD case# 11-35117). Sergeant Raudabaugh testified that the record also reflects that Mr. Pratt's Mother sustained multiple punctures from a dog bite on her right

hand; which were sustained while trying to get "Chloe" to release the Yorki (DMPD case# 11-35116) (City Exhibits 6-7).

Mr. Pratt and various members of his family all argued during the November 7, 2011 administrative hearing that "Chloe" is a very loving and gentle dog and the perfect pet; noting that they would not have the dog around their young daughter if that were not the case. Mr. Pratt offered eight photos of "Chloe" into the record that show the dog in a calm state. However, Mr. Pratt's Mother, Bonnie Kennedy acknowledged during her testimony that she could not control "Chloe" during the October 25, 2011 incident; admitting that she had punched "Chloe" in the head in an attempt to get the dog to release its grip on the Yorki. Both Mr. Pratt and Ms. Kennedy, argued that "Chloe" is just territorial and that it is understandable for it or any dog to react in such a manner when another dog or person invades its territory. However, such behavior by an animal is unacceptable and dangerous to the public safety.

Mr. Pratt also seemed to argue that his dog is being unfairly targeted based on its breed. However, the issue is whether it is reasonable for the City to declare "Chloe" a "Dangerous Animal" under Section 18-196 of the Municipal Code, which provides in pertinent part:

*Dangerous animal* means any animal, including a dog . . . that has exhibited vicious propensities in present or past conduct, including such that the animal:

- (1) has bitten or clawed a person on two separate occasions within a 12-month period; [or]
- (3) could not be controlled or restrained by the owner at the time of the attack to prevent the occurrence.

As can be noted, the DMPD "Dangerous Animal" declaration does not take into consideration a dog's breed but instead focuses on whether the dog has exhibited vicious propensities in present and past conduct.

Therefore the first query is whether "Chloe" has bitten or clawed a person on two separate occasions within a 12-month period, as delineated in Section 18-196(1) of the Municipal Code. The record reflects that "Chloe" bit a DMPD Police Officer on his left inner thigh causing a puncture wound and tooth scrapes while responding to a "domestic" in Mr. Pratt's room at the Douglas Avenue extended stay motel on September 26, 2011 (DMPD case# 11-31528). The record also reflects that 29-days later "Chloe" bit and caused injuries to at least two adults who were responding to "Chloe's" deathly attack of a Yorki dog that had come up to sniff "Chloe" on October 25, 2011 (DMPD case #11-35117 & #11-35118). Therefore, it is found reasonable for the City to declare "Chloe" a "Dangerous Animal" under Section 18-196(1) of the Municipal Code.

In the alternative, this case may also be considered under Section 18-196(3), which calls for determining whether "Chloe" could not be controlled or restrained by the owner at the time of the attack(s) to prevent the occurrence. The record reflects that during the September 26, 2011 incident, a Ms. Martinez was in Mr. Pratt's room at the extended stay motel on Douglas Avenue and that she was holding "Chloe" on a leash. The record reflects that DMPD Officers had responded to the "domestic" in Mr. Pratt's room and they had informed Ms. Martinez to keep "Chloe" away from them. The record reflects that Ms. Martinez could not control "Chloe" which allowed the dog to come at one of the Officers and bite him causing an injury to his inner left thigh.

Furthermore, Ms. Kennedy did not dispute that a Yorkie had come up to sniff "Chloe" and she was unable to control "Chloe's" reaction to the Yorkie's presence while she had control of the dog's leash during their walk in the parking lot of the Douglas Avenue extended stay motel on October 25, 2011. Ms. Kennedy even acknowledged during her testimony that she kept punching "Chloe" in the head in an attempt to get the dog to release its grip on the Yorkie; which further indicates that she did not have control of the dog as required by Section 18-196(3) of the Municipal Code.

For clarification purposes, "controlled or restrained by the owner," as noted under Section 18-196(3) of the Municipal Code, shall be deemed to be when the dog is on leash and under the actual physical control of a person eighteen (18) years of age or older who appears to be acting on behalf of the owner. In the case at hand, the record reflects that both persons who had control of "Chloe's" leash, on each occasion were adults (City Exhibit 20— Ms. Kennedy's son's DOB as 8/12/81 & Martinez's DOB as 12/1/84). Given one of these adults is Mr. Pratt's Mother and the other a female in his room at the Douglas Avenue extended stay motel, it is reasonable to consider them both agents of Chloe's owner, Mr. Pratt. Therefore, it is found reasonable to find that the bite dog's owner did not control or restrain "Chloe" in order to prevent the bite incidents in September and October; therefore it is found reasonable for the City to declare "Chloe" a "Dangerous Animal" under Section 18-196(3) of the Municipal Code.

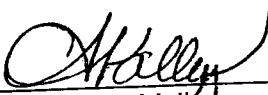
#### **Decision and Order**

By a preponderance of all evidence in the record, the declaration by the Chief Humane Officer is upheld, and "Chloe" the black and white colored female Pit Bull breed dog (ARL# A14146270), owned by James Pratt, is found to be a "Dangerous Animal." Therefore, the Chief Humane Officer is ordered to destroy the dog in a humane manner as provided under section 18-202(b) of the Municipal Code. Furthermore, James Pratt is held liable and ordered to pay all impoundment and quarantine costs as provided under Section 18-202 of the Municipal Code, as well as any citation fines that may have been issued and remain unpaid in connection with DMPD cases 11-31528, 11-35116, 11-35117 and 11-35118.

#### **Appeal Rights**

This order may be appealed to the City Council provided a written appeal is filed with the City Clerk's office within three days of receipt of this order.

This written ruling is hereby submitted on this 14<sup>th</sup> day of November, 2011 in Des Moines, Polk County, Iowa.

  
\_\_\_\_\_  
Camille A. Valley  
Administrative Hearing Officer



**DES MOINES POLICE DEPARTMENT #25 E. FIRST, DES MOINES IA 50309-4891**

Judy A. Bradshaw  
Chief of Police

Richard Singleton  
Major, Administrative Services Bureau

**FAX**Date: 11/15/11Number of pages including cover sheet: 02

To:

"LAREN"

Phone:

Fax phone: (515) 237-1645

CC:

From:

DES MOINES POLICELARRY G. GILMORE 4972

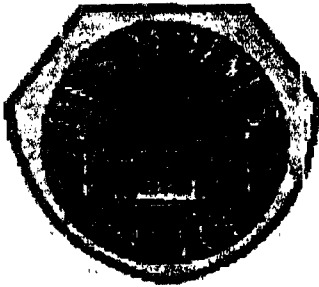
Phone:

Fax phone: 515/237-1874

REMARKS:

☐ Urgent☐ For your review☐ Reply ASAP☐ Please commentDOCUMENT SERVICE - JAMES PRATT

Ex. A

**Chief Humane Officer****DOCUMENT SERVICE**DMPD Case number: 11-35116, 11-35118, 11-35128, 11-35117ARI number (if known): A14146270Animal owner's name: JAMES PRATTAddress: 10 MAPLE #240 NEVADA FOWA 50201Location of service: 10 MAPLE #240 NEVADA FOWA 50201Date and time served: 11/14/11 1625 HRS

Official serving document (print name):

LARRY G. GILMOREOfficial's identification number: 4972Type of document served: ☐ Vicious dog letter ☐ Dangerousanimal letter ☐ Illegal animal letter ☒ Hearing ruling letter☐ City Council decision letter ☐ Other: \_\_\_\_\_Name of person receiving document (they print their name):James PrattTheir signature: ☒James Pratt441-9004 cellEFACU

Ex. A  
City Exhibit  
1

November 3, 2011

Mr. James Pratt  
5626 Douglas Avenue # 216  
Des Moines, Iowa



Dear Mr. Pratt,

On October 25, 2011 while in the apartment complex parking lot your black and white colored female pit bull breed dog, named "Cloe," bit and killed another dog when the dog went up to your dog and was sniffing your dog. Your dog was impounded for quarantine at the city animal shelter. (2011-35116)

During that bite incident your dog bit the owner of the other dog while she was trying to assist her dog, which resulted in a scrape injury to her leg. (2011-35117)

Also during that bite incident a neighbor tried to help by trying to pry open your dog's mouth and one of the dog's teeth caught his finger and tore the skin. (2011-35118)

On September 26, 2011 while at your apartment your dog pulled away from the person holding it and your dog bit a police officer that was there handling another problem, which resulted in a puncture wound and scrapes to his leg. Your dog was impounded for quarantine at the city animal shelter. (2011-31528)

Because your dog was involved in bite incidents of a person on two separate occasions within a 12 month period your dog is being declared a "Dangerous Animal," as defined by city ordinance 18-196.

An **Administrative Hearing** to review the "Dangerous Animal" declaration has been scheduled for **10:00 A.M. on Monday, November 7, 2010** in the City Council Chambers in the Des Moines City Hall at 400 Robert D. Ray Drive. Your dog will remain in impound pending a decision by the Hearing Officer.

If the "Dangerous Animal" declaration is upheld your dog may be ordered destroyed in a humane manner or you may be given the option to cause it to be destroyed in a humane manner, in accordance with city ordinance 18-202.

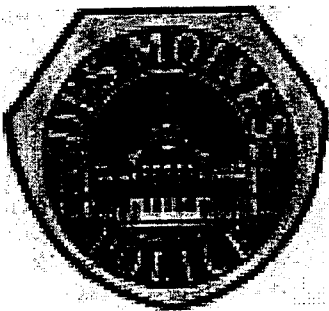
If you have any questions please call me at (515) 248-6052 or the animal shelter at (515) 284-6905 or the City Clerk's Office at (515) 283-4209.

Sincerely,

A handwritten signature in black ink, appearing to read "Scott Raudabaugh".

Sergeant Scott Raudabaugh,  
Chief Humane Officer

cc: City Clerk's Office

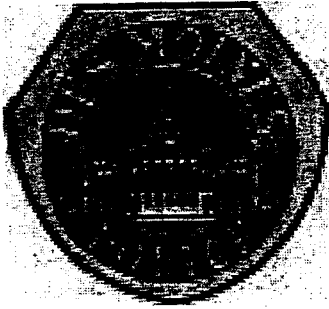
**Chief Humane Officer****DOCUMENT SERVICE**DMPD Case number: 2011-35110

ARL number (if known): \_\_\_\_\_

Animal owner's name: JAMES PRATTAddress: 5020 DOUGLAS AV. #210Location of service: SAMEDate and time served: 03 NOV 11 1020

Official serving document (print name):

SGT. RAUL ABALDIOfficial's identification number: 4770Type of document served: ☐ Vicious dog letter ☒ Dangerousanimal letter ☐ Illegal animal letter ☐ Hearing ruling letter☐ City Council decision letter ☐ Other: \_\_\_\_\_Name of person receiving document (they print their name):SLID UNDER DOOR AND INTOTheir signature: X APARTMENT10F ACU



# Chief Humane Officer

3

## DOCUMENT SERVICE

DMPD Case number: 2011-35110

ARL number (if known): \_\_\_\_\_

Animal owner's name: JAMES PRATT

Address: 5020 DOUGLAS AV. #210

Location of service: ANIMAL SHELTER

Date and time served: 04 NOV 11 1249

Official serving document (print name):

SGT. RAND ABRAHAM

Official's identification number: 4770

Type of document served: ☐ Vicious dog letter ☒ Dangerous

animal letter ☐ Illegal animal letter ☐ Hearing ruling letter

☐ City Council decision letter ☐ Other: \_\_\_\_\_

Name of person receiving document (they print their name):

James Pratt

Their signature: X James Pratt

KE ACU

4

**Sec. 18-196. - Definitions.**

The following words, terms and phrases, when used in this article, shall have the meanings ascribed to them in this section, except where the context clearly indicates a different meaning:

*Dangerous animal* means any animal, including a dog, except for an illegal animal per se, as listed in the definition of illegal animal, that has bitten or clawed a person while running at large and the attack was unprovoked, or any animal that has exhibited vicious propensities in present or past conduct, including such that the animal:

- (1) Has bitten or clawed a person on two separate occasions within a 12-month period;
- (2) Did bite or claw once causing injuries above the shoulders of a person;
- (3) Could not be controlled or restrained by the owner at the time of the attack to prevent the occurrence; or
- (4) Has attacked any domestic animal or fowl on three separate occasions within a 12-month period.

*Illegal animal* means:

- (1) Any animal which is not naturally tame or gentle and which is of a wild nature or disposition and which is capable of killing, inflicting serious injury upon or causing disease among human beings or domestic animals and having known tendencies as a species to do so.
- (2) Any animal declared to be illegal by the board of health or the city manager or his or her designee.
- (3) Any nondomesticated member of the order Carnivora which as an adult exceeds the weight of 20 pounds.
- (4) The following animals, which shall be deemed to be illegal animals per se:
  - a. Lions, tigers, jaguars, leopards, cougars, lynx and bobcats.
  - b. Wolves, coyotes and foxes.
  - c. Badgers, wolverines, weasels, skunks and mink.
  - d. Raccoons.
  - e. Bears.
  - f. Monkeys and chimpanzees.
  - g. Bats.
  - h. Alligators, crocodiles and caimans.
  - i. Scorpions.
  - j. Snakes and reptiles that are venomous.
  - k. Snakes that are constrictors over six feet in length.
  - l. Gila monsters.
  - m. Opossums.
  - n. All apes, baboons and macaques.
  - o. Piranhas.

(C79, § 7-44; O.10,541; C85, § 7-44; O.10,886, 11,095; C91, § 7-44)

Cross reference—Definitions generally, § 1-2.



**Sec. 18-202. - Seizure, impoundment and disposition of dangerous animals.**

- (a) The chief humane officer or his or her designee, in his or her discretion or upon receipt of a complaint alleging that a particular animal is a dangerous animal as defined in this article, may initiate proceedings to declare such animal a dangerous animal. A hearing on the matter shall be conducted by the city manager or his or her designee. The person owning, keeping, sheltering, or harboring the animal in question shall be given not less than 72 hours' written notice of the time and place of the hearing. The notice shall set forth the description of the animal in question and the basis for the allegation of dangerousness. The notice shall also set forth that if the animal is determined to be dangerous it may be ordered destroyed or the owner may be given the option to cause it to be destroyed. The notice shall be served upon any adult residing at the premises where the animal is located or may be posted on those premises if no adult is present to accept service. A notice that a dog is a dangerous animal may include as an alternative an allegation that a dog is a vicious dog under sections 18-41 and 18-59 of this chapter, and the hearings shall proceed together under this section.
- (b) If, after hearing, the city manager or his or her designee determines that an animal is dangerous, the city manager or his or her designee shall either order the animal destroyed in a humane manner by the chief humane officer, or order the person owning, sheltering, harboring or keeping the animal to cause it to be destroyed in a humane manner. The order shall immediately be served upon the individual or entity against whom issued in the same manner as the notice of hearing. If the animal is ordered to be destroyed by the chief humane officer such order shall be carried out after the appeal period in subsection (c) of this section has expired. If the animal is ordered to be destroyed by the owner, such order must be complied with within three days of its issuance, otherwise the city manager or his or her designee is authorized to seize and impound the animal. An animal so seized shall be impounded for a period of seven days. If, at the end of the impoundment period, the individual or entity against whom the order of the city manager or his or her designee was issued has not appealed such order to the city council, the city manager or his or her designee shall cause the animal to be destroyed in a humane manner.
- (c) The order to destroy a dangerous animal issued by the city manager or his or her designee may be appealed to the city council. In order to appeal such order, written notice of appeal must be filed with the city clerk within three days after receipt of the order to destroy the dangerous animal. Failure to file such written notice of appeal shall constitute a waiver of the right to appeal the order of the city manager or his or her designee.
- (d) The notice of appeal shall state the grounds for such appeal and shall be delivered personally or by certified mail to the city clerk. The hearing of such appeal shall be scheduled within seven days of the receipt of notice of appeal. The hearing may be continued for good cause. The hearing shall be confined to the record made before the city manager or his or her designee and the arguments of the parties or their representatives, but no additional evidence shall be taken. After such hearing the city council may affirm or reverse the order of the city manager or his or her designee. Such determination shall be contained in a written decision and shall be filed with the city clerk within three days after the hearing or any continued session thereof.
- (e) If the city council affirms the action of the city manager or his or her designee, the city council shall either order the animal destroyed by the chief humane officer, or order that the individual or entity owning, sheltering, harboring, or keeping such dangerous animal shall cause it to be destroyed in a humane manner. The decision and order shall immediately be served upon the person or entity against whom rendered in the same manner as the order to destroy. If the animal is ordered to be destroyed by the chief humane officer the order shall be effective on the fourth day after receipt of the order by the owner unless the county district court has been petitioned to review the order within the first three days after receipt. If the animal is ordered to be destroyed by the owner and such order is not appealed to the county district court and is not complied with within three days after receipt of the order by the owner, the chief humane officer or his or her designee is authorized to seize and impound such dangerous animal. An animal so seized shall be impounded for a period of seven days. If, at the end of the impoundment period, the individual or entity against whom the decision and order of the city council was issued has not petitioned the county district court for a review of the order, the city manager or his or her designee shall cause the animal to be destroyed in a humane manner.
- (f) Failure to comply with an order of the city manager or his or her designee issued pursuant to this section and not appealed or of the city council after appeal shall constitute a misdemeanor offense.
- (g) Any animal which is alleged to be dangerous and which is under impoundment or quarantine at the animal shelter shall not be released to the owner, but shall continue to be held at the expense of the owner pending the outcome of the hearing. All costs of such impoundment or quarantine shall be paid by the owner if the animal is determined to be dangerous. If the animal is not determined to be dangerous and was found at large, the owner shall only pay those costs attributable to the initial confinement and any required quarantine. If the animal is not determined to be dangerous and was not at large at the time of confinement, the owner shall only pay those costs attributable to any required quarantine.

(C79, § 7-50; O.10,541; C85, § 7-50; O.11,095; C91, § 7-50; O.13,854, 13,977, 14,462, 14,677)

# Animal Incident Investigation Report

Des Moines, Iowa

\* CONNECT TO 11-35117 \*  
35118

1. ARL case number: <b>C00944859</b>		2. DMPD case number (if applicable): <b>11-35116</b>	
<b>Impounded or bite animal</b>		3. Victim's name (Last, First M.I.): <b>KENNEDY, BONNIE</b> (Human victim or society)	
32. Impounded or bite animal ARL number: Impounded: No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> ARL#: <b>A14372050</b>		4. Race: <b>W</b>	5. Sex: <b>F</b>
33. Animal type: Cat <input type="checkbox"/> Dog <input checked="" type="checkbox"/> Other <input type="checkbox"/> CLOE <b>A144070</b>		6. Age:	7. Date of birth:
34. Animal breed: <b>PITBULL</b>		8. Ethnicity: <b>H</b> <input type="checkbox"/> <b>NH</b> <input checked="" type="checkbox"/>	9. Sobriety: Sob. <input checked="" type="checkbox"/> H.B.D. <input type="checkbox"/>
35. Animal color: <b>BLACK WITH WHITE</b>		10. Residence address: <b>5626 DOUGLAS</b> (City and/or state if not Des Moines or Iowa)	
36. Animal fur length: Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long <input type="checkbox"/> Other <input type="checkbox"/>		11. Residence phone number: <b>326-4978</b>	
37. Animal sex: Female <input checked="" type="checkbox"/> Spayed <input type="checkbox"/> Male <input type="checkbox"/> Neutered <input type="checkbox"/> Unknown <input type="checkbox"/>		12. Business or cellular phone number:	
38. Microchip: No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> (Records Personnel: Enter M/C# as a serial number)  M/C#: <b>0A125A690B</b>		13. Place of employment or school:	
39. Rabies tag: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> R/T#: <b>NOT DISPLAYED</b>		14. Type and location of injury: <b>RIGHT HAND MULTIPLE PUNCTURES</b>	
39A. Date of vaccination:		15. Medical treatment: <b>ADVISED</b>	
39B. Date of vaccination expiration:		16. Reporting person's name (Last, First M.I.): <b>SMITH, GLENALE</b>	
39C. Veterinarian:		17. Race: <b>B</b>	18. Sex: <b>F</b>
40. License: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Lic#: <b>NOT DISPLAYED</b>		19. Age: <b>04/08/1958</b>	20. Date of birth:
41. Other identifiers (Collar, tattoo, etc.): <b>BLUE NYLON</b>		21. Ethnicity: <b>H</b> <input type="checkbox"/> <b>NH</b> <input checked="" type="checkbox"/>	22. Sobriety: Sob. <input checked="" type="checkbox"/> H.B.D. <input type="checkbox"/>
42. Confinement/quarantine location: <b>ARL CCC</b>		23. Residence address: <b>5626 DOUGLAS # 202</b> (City and/or state if not Des Moines or Iowa)	
43. Impounded or bite animal owner's name (Last, First M.I.): <b>KENNEDY, BONNIE OR PRATT, JAMES</b>		24. Residence phone number: <b>278-1601</b>	
44. Residence address: <b>5626 DOUGLAS #216</b> (City and/or state if not Des Moines or Iowa)		25. Business or cellular phone number:	
45. Residence phone number: <b>326-4978</b>		26. Location of incident (address): <b>5626 DOUGLAS</b>	
46. Place of employment or school:		27. Location type: <b>PARKING LOT</b>	
47. Business or cellular phone number:		28. Date and time incident occurred: <b>25 OCT 11 1510</b>	
48. Animal owner notification: No <input type="checkbox"/> Yes <input checked="" type="checkbox"/>		29. Date and time incident reported: <b>25 OCT 11 1523</b>	
48A. Date and time of notification: <b>25 OCT 11 1544</b>		30. Crime/incident type: <b>ANIMAL BITE-DOG</b>	
48B. Person making notification: <b>T. UPDEGROVE AR6</b>		31. Classification:	
48C. Means of notification: <b>IN PERSON/NOTICE</b>		49. Witness' name (Last, first):	
50. Residence address: (City and/or state if not Des Moines or Iowa)		51. Daytime or cellular phone number:	
52. Witness' name (Last, first):		53. Residence address: (City and/or state if not Des Moines or Iowa)	
54. Daytime or cellular phone number:		55. Investigative notifications and/or photographs taken: ARL Supervisor: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Sergeant: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Police Officer: No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Photographs taken by ARL or PO: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/>	
<b>Victim animal</b>		56. Victim animal ARL number: Impounded: No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> ARL#: <b>5626 DOUGLAS #202</b>	
57. Animal type: Cat <input type="checkbox"/> Dog <input checked="" type="checkbox"/> Other <input type="checkbox"/>		58. Animal breed: <b>YORKI</b>	
59. Animal color: <b>BLACK AND RED</b>		60. Animal fur length: Short <input type="checkbox"/> Medium <input type="checkbox"/> Long <input checked="" type="checkbox"/> Other <input type="checkbox"/>	
61. Animal sex: Female <input checked="" type="checkbox"/> Spayed <input type="checkbox"/> Male <input type="checkbox"/> Neutered <input type="checkbox"/> Unknown <input type="checkbox"/>		62. Rabies tag: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> R/T#: <b>NOT DISPLAYED</b>	
63. Microchip: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> M/C#:		62A. Date of vaccination:	
64. License: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Lic#:		62B. Date of vaccination expiration:	
65. Type and location of injury: <b>PUNCTURES TO ABDOMEN</b>		62C. Veterinarian:	
66. Medical treatment: <b>DOA</b>		67. Confinement/quarantine location: <b>ARL CCC</b>	
68. Victim animal owner's name (Last, First M.I.): <b>SMITH, GLENALE</b>		69. Residence address: <b>5626 DOUGLAS #202</b> (City and/or state if not Des Moines or Iowa)	
70. Residence phone number: <b>278-1601</b>		71. Business or cellular phone number:	
72. Reporting official: <b>T. UPDEGROVE AR6</b>		73. Status: <input checked="" type="checkbox"/> Open <input type="checkbox"/> Closed <input type="checkbox"/> Excep. Closed <input type="checkbox"/> Case file <input type="checkbox"/> Suspended <input type="checkbox"/> Unfounded	
74. Copy/copies made by:		75. Referred to: <input checked="" type="checkbox"/> Animal Control <input type="checkbox"/> Detectives <input type="checkbox"/> PIO <input type="checkbox"/> Chief <input type="checkbox"/> OPS <input type="checkbox"/> Other:	
76. Second reporting official:		77. Supervisor approving report: <b>J. Colin AR-1</b>	
78. Reviewed by: <b>AS</b>		79. Date: <b>489</b>	

2011 OCT 26 PM 5:08



79. Page:

2 of 2

## Animal Incident Investigation Report

Des Moines, Iowa

81. Suspect or offender one (1) name (Last, first Middle):82. Arrested:  
No ☐ Yes ☐83. Warrant needed:  
No ☐ Yes ☐84. Charges filed:  
No ☐ Yes ☐

85. Race:

86. Sex:

87. Age:

88. Date of birth:

89. Ethnicity:  
H ☐ NH ☐

90. Height:

91. Weight:

92. Hair color:

93. Eye color:

94. Residence address:

(City and/or state if not Des Moines or Iowa)

95. Residence or alternate phone number:

96. Driver license number or social security number:

96A. State:

97. Sobriety:  
Sob. ☐ H.B.D. ☐

98. Citation number and crime:

99. Citation number and crime:

100. Suspect or offender two (2) name (Last, First Middle):101. Arrested:  
No ☐ Yes ☐102. Warrant needed:  
No ☐ Yes ☐103. Charges filed:  
No ☐ Yes ☐

104. Race:

105. Sex:

106. Age:

107. Date of birth:

108. Ethnicity:  
H ☐ NH ☐

109. Height:

110. Weight:

111. Hair color:

112. Eye color:

113. Residence address:

(City and/or state if not Des Moines or Iowa)

114. Residence or alternate phone number:

115. Driver license number or social security number:

115A. State:

116. Sobriety:  
Sob. ☐ H.B.D. ☐

117. Citation number and crime:

118. Citation number and crime:

119. Narrative:

THIS R/O WAS CALLED TO ASSIST THE POLICE ON A DOG BITE/DOMESTIC DISTURBANCE. WHEN I ARRIVED I MET WITH DMPD OFFICERS LICHT # 5117 & QUANG #5061. IT WAS ADVISED THAT KENNEDY, BONNIE WHO RESIDES IN ROOM # 216 WAS IN THE BACK PARKING AREA OF THE HOTEL WALKING HER DOG CLOE, A FEMALE BLACK WITH WHITE PITBULL. THIS DOG WAS ON A LEASH AT THE TIME OF THE OCCURANCE. WHILE WALKING HER DOG, SMITH, GLENALE WHO RESIDES IN ROOM # 202 WAS ALSO OUTSIDE WALKING HER TWO DOGS OFF LEASH. SMITH'S SMALL YORKI DOG WENT UP TO KENNEDY'S DOG CLOE SNIFFING HER, THAT IS WHEN CLOE TURNED AND ATTACKED THE YORKI. SMITHS DOG WAS KILLED DURNING THE ATTACK, I FOUND THE DOG TO HAVE A POOL OF BLOOD UNDER HER WHEN REMOVING THE BODY. I DID NOT EXAMINE THE BODY ANY FURTHER DUE TO THE ELEVATED SCENE. SMITHS DOG WAS IMPOUNDED AT THAT TIME. KENNEDY STATED WHILE SHE WAS TRYING TO GET CLOE TO RELEASE THE YORKI FROM HER MOUTH THE YORKI BIT KENNEDY ON HER RIGHT HAND CAUSING MULTIPLE PUNCTURES. KENNEDY'S RIGHT HAND WAS COVERED IN BLOOD. SMITH CLAIMS THAT CLOE BIT KENNENDY IN THE ATTACK AND HER DOG DID NOT BIT AS CLOE HAD THE YORKI'S HEAD IN HER MOUTH AND CLOE ALSO BIT TWO ADDITIONAL PEOPLE DURNING THE INCIDENT, SEE CASE # 11-35117 & 11-35118. HOWEVER I ASKED SMITH IF HER DOG HAD A CURRENT RABIES VACCINATION, SHE INDICATED THE DOG DID HOWEVER UNDER A REMICK, ANN'S NAME WITH STARCH ANIMAL CLINIC. I CONTACTED STARCH HOWEVER THEY DO NOT HAVE A YORKI TYPE DOG REGISTERED TO A REMICK OR A SMITH. I ADVISED KENNEDY THAT THE DOG WOULD BE TESTED FOR RABIES AS A RABIES VACCINATION COULD NOT BE PROVEN, SHE WAS ALSO ADVISED TO SEEK MEDICIAL ATTENTION FOR HER HAND.

CLOE JUST GOT OUT OF IMPOUND FOR RABIES Q/T HOWEVER DUE TO THE CIRCUMSTANCES THE DOG WAS IMPOUNDED FOR RABIES Q/T, BOTH DOGS WERE THEN TRANSPORTED TO ARL CCC.

Q/T RELEASE ON 11/04/11

NEED RABIES TESTING ON THE YORKI WITH POSSIBLE NECROPSY

120. Date of this report:  
25 OCT 11

2011 OCT 31 PM 5:37

Accession: 2011034933

8

## Veterinary Diagnostic Laboratory

Iowa State University  
College of Veterinary Medicine  
Ames, Iowa 50011-1250  
Phone: 515-294-1950  
Fax: 515-294-3564

Preliminary Report  
Report Date: 10/31/2011 7:53 AM

Dr. Greg Berry  
Animal Rescue League Care & Control Cntr  
1615 SE 14th St

Owner: Glenale Smith  
5626 Douglas #202  
Des Moines, IA 00000

Des Moines, IA 50313

Reference: 11-35116 CDM-0000019538 (SAVE)

Diagnostician: Darin Madson

BODY)

Client Phone: 1-515-284-6905  
Client Fax: 1-515-284-0008  
Client Account#: 000400241  
Date Received: 10/27/2011  
Sample Taken: 10/25/2011

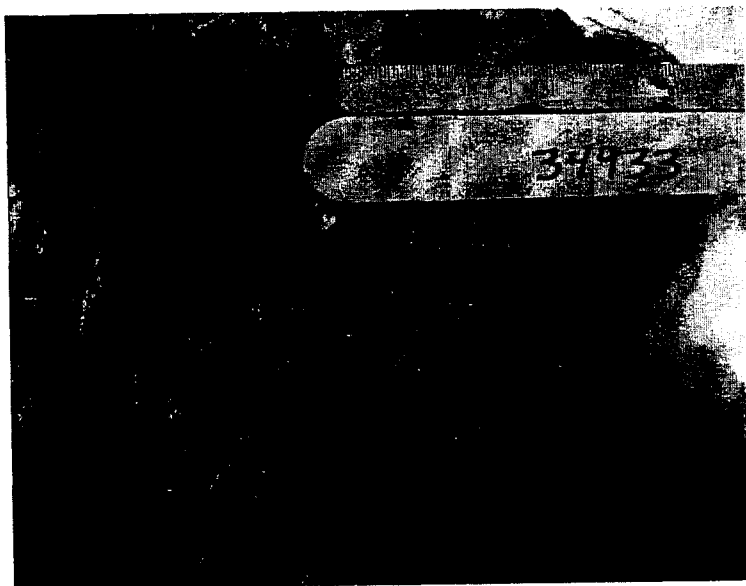
Species: Canine  
Breed: Yorkshire Terrier  
Sex: Female  
Previous Case:  
Preliminary Report: NA

Age: NA  
Weight: 10.5 Pounds  
Received:  
1 dead-Rabies & Other HE

History: adult canine; attacked by another dog

### Gross Lesions:

- Multiple dermal punctures and lacerations were not on the right neck, right should, and dorsal neck.
- Deep punctures of the lateral and ventral right neck region resulted in muscular and jugular laceration with effusive hemorrhage (picture)
- No other gross lesions were apparent.



Histopathology:

Virology: Rabies FA is negative

Diagnosis:

- Trauma; jugular laceration and hemorrhage from multiple bit wounds.

Comments: Please contact the laboratory if questions arise.

KF  
ACU



Darin Madson, D.V.M., Ph.D., DACVP

**KEY: Tests:** EM = Electron Microscopy, FA = Fluorescent Antibody, IHC = Immunohistochemistry, MLV = Modified Live Virus, ORF = Open Reading Frame, PCR = Polymerase Chain Reaction, RFLP = Restriction Fragment Length Polymorphism, VI = Virus Isolation. **Agents:** BCV = Bovine Coronavirus, BRSV = Bovine Respiratory Syncytial Virus, BVDV = Bovine Viral Diarrhea Virus, IBRV = Infectious Bovine Rhinotracheitis Virus, M hyo = *Mycoplasma hyopneumoniae*, PCV = Porcine Circovirus, PPV = Porcine Parvovirus, PRCV = Porcine Respiratory Coronavirus, PRRSV = Porcine Reproductive & Respiratory Syndrome, PRV = Pseudorabies Virus, SIV = Swine Influenza Virus, TGEV = Transmissible Gastroenteritis Virus.

<u>Test Ordered</u>	<u>Laboratory Result(s)</u>	<u>Current Status</u>	<u>Complete Date</u>
	<u>Order Date</u>	<u>Result Released</u>	<u>10/31/2011</u>
Necropsy (juvenile - adult)	10/28/2011	Result Released	10/31/2011
FA - Rabies virus	10/28/2011	Result Released	10/28/2011
Hematoxylin and Eosin Slides	10/28/2011	Result Released	

**Histopathology****Hematoxylin and Eosin Slides**

<u>Animal ID</u>	<u>Specimen</u>	<u>Slides</u>	<u>Comments</u>
11-35116	Assorted	5	

**Virology**

<u>Test:</u>	FA - Rabies virus
<u>Result:</u>	Negative
<u>Technician:</u>	SFK

**Human Exposure Information:**Exposed Person's Name:Exposed Person's Town:Comments:

2011 OCT 31 PM 5:36

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# Veterinary Diagnostic Laboratory

Iowa State University  
College of Veterinary Medicine  
Ames, Iowa 50011-1250  
Phone: 515-294-1950  
Fax: 515-294-3564

Preliminary Report  
Report Date: 10/31/2011 10:00 AM

Dr. Greg Berry  
Animal Rescue League Care & Control Cntr  
1615 SE 14th St

Owner: Glenale Smith  
5626 Douglas Ave #202  
Des Moines, IA 50310

Des Moines, IA 50313

Reference: 11-35116 CDM-0000019538 (SAVE)

Diagnostician: Darin Madson

BODY)

Client Phone: 1-515-284-6905  
Client Fax: 1-515-284-0008  
Client Account#: 000400241  
Date Received: 10/27/2011  
Sample Taken: 10/25/2011

Species: Canine  
Breed: Yorkshire Terrier  
Sex: Female  
Previous Case:  
Preliminary Report: 10/31/2011, 10/31/2011

Age: NA  
Weight: 10.5 Pounds  
Received:  
1 dead-Rabies & Other HE

## Virology

Test:  
Result:  
Technician:

FA - Rabies virus  
Negative  
SFK

Human Exposure Information:  
Exposed Person's Name:  
Exposed Person's Town:

Bonnie Kennedy  
Des Moines

Comments:

ILF  
ACU

2011 NOV -3 PM 1:40

**Animal Incident Supplemental Report**  
Des Moines, Iowa

1. Human victim or reporting person or animal owner name (Last, First M.I.):

KENNEDY, BONNIE

2. Case number:

11-35116

3. Form used as a continuation of an Animal Incident Investigation Report: ☐

4. Date of this report:

26-Oct-11

5. Date incident occurred:

25-Oct-11

Changed: ☐ Yes

6. Form used to report a follow-up investigation or additional information: ☒

7. Crime/incident type:

ANIMAL BITE-DOG

8. Page: 1 of 1

9. If this report is a continuation of another report then indicate the box number(s) continued below:

ON THIS DATE KENNEDY, BONNIE DID GO TO BROADLAWNS TO HAVE HER BITE LOOKED AT. I SPOKE WITH THE DOCTOR WHO FIRST WANTED TO MAKE SURE THE BITE HAD BEEN REPORTED; SECONDLY I ASKED HIM IF IT APPEARS THE BITE WAS FROM A LARGE OR SMALL DOG. THE DOCTOR INDICATED HE BELIEVED THE BITES ON KENNEDY'S HAND WERE FROM A SMALLER DOG, AS A LARGER DOG WOULD HAVE DONE MORE DAMAGE, MORE CRUSHING TYPE OF INJURIES AS WELL AS PUNCTURES, THERE WAS NO CRUSHING INJURIES TO KENNEDY'S HAND.

10. ARL reporter:

T. UPDEGROVE AR6

I.D. No.

TU

11. Status: ☒ Open ☐ Closed ☐ Excep. Closed

☐ Case file ☐ Suspended ☐ Unfounded

12. Copy/copies made by:

13. Referred to:

☒ Animal Control

☐ Detectives ☐ PIO

☐ Chief ☐ OPS

☐ Other: \_\_\_\_\_

14. Second ARL reporter:

I.D. No.

15. Supervisor approving report:

I.D. No.

16. Reviewed by:

TU

2011 NOV -4 PM 6:34

# Animal Incident Supplemental Report

Des Moines, Iowa

1. Human victim or reporting person or animal owner name (Last, First M.I.):  
KENNEDY, BONNIE

2. Case number:  
11-35116

3. Form used as a continuation of an Animal Incident Investigation Report: ☐

4. Date of this report:

3-Nov-11

5. Date incident occurred:

25-Oct-11

Changed: ☐ Yes

6. Form used to report a follow-up investigation or additional information: ☒

7. Crime/incident type:

ANIMAL BITE-DOG

8. Page: 1 of 1

9. If this report is a continuation of another report then indicate the box number(s) continued below:

TEST RESULTS ON THE YORKIE CAME BACK NEGATIVE FOR RABIES, KENNEDY WAS CONTACTED AND ADVISED OF THIS. I THEN TRIED CONTACTING THE OWNER OF THE DOG, SMITH, GLENALE HOWEVER NO ONE ANSWERD HER HOTEL ROOM. I WAS MADE AWARE BY ROMINE, JODY WHO WORKS THE FRONT DESK FOR ARL CCC THAT SMITH WOULD BE IN ON 04 NOV 11 TO PAY FOR THE REMAINS OF HER DOG, SHE WILL BE ADVISED THEN THAT THE DOGS RABIES RESULTS CAME BACK NEGATIVE.

10. ARL reporter:

T. UPDEGROVE AR6

I.D. No.

11. Status: ☐ Open ☐ Closed ☐ Excep. Closed

☒ Case file ☐ Suspended ☐ Unfounded

12. Copy/copies made by:

13. Referred to:  
☒ Animal Control

☐ Detectives ☐ PIO

☐ Chief ☐ OPS

☐ Other: \_\_\_\_\_

14. Second ARL reporter:

I.D. No.

15. Supervisor approving report:

I.D. No.

16. Reviewed by:

*A. Colin AR-1*

*AS*

Animal Incident Investigation Report  
Des Moines, Iowa

\* CONNECTS TO 11-35116 \*

35118  
11-35116  
13

<b>Impounded or bite animal</b>		1. ARL case number: <b>00944908</b>		2. DMPD case number (if applicable): <b>11-35117</b>	
32. Impounded or bite animal ARL number: Impounded: No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> ARL#: <b>A14146270</b>		3. Victim's name (Last, First M.I.): <b>SMITH, GLENALE</b> (Human victim or society)			
33. Animal type: Cat <input type="checkbox"/> Dog <input checked="" type="checkbox"/> Other <input type="checkbox"/> : <b>CLOE</b>		4. Race: <b>B</b>	5. Sex: <b>F</b>	6. Age:	7. Date of birth: <b>04/08/1958</b>
34. Animal breed: <b>PITBULL</b>		8. Ethnicity: <b>H <input type="checkbox"/> NH <input checked="" type="checkbox"/></b>		9. Sobriety: Sob. <input checked="" type="checkbox"/> H.B.D. <input type="checkbox"/>	
35. Animal color: <b>BLACK WITH WHITE</b>		10. Residence address: <b>5626 DOUGLAS #202</b> (City and/or state if not Des Moines or Iowa)			
36. Animal fur length: Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long <input type="checkbox"/> Other <input type="checkbox"/>		11. Residence phone number: <b>278-1601</b>		12. Business or cellular phone number:	
37. Animal sex: Female <input checked="" type="checkbox"/> Spayed <input type="checkbox"/> Male <input type="checkbox"/> Neutered <input type="checkbox"/> Unknown <input type="checkbox"/>		13. Place of employment or school:			
38. Microchip: No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> (Records Personnel: Enter M/C# as a serial number)  M/C#: <b>0A125A690B</b>		14. Type and location of injury: <b>RIGHT HAND MULTIPLE PUNCTURES</b>			
39. Rabies tag: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> R/T#: <b>NOT DISPLAYED</b>		15. Medical treatment: <b>ADVISED</b>			
39A. Date of vaccination:		16. Reporting person's name (Last, First M.I.): <b>SMITH, GLENALE</b>			
39B. Date of vaccination expiration:		17. Race: <b>B</b>	18. Sex: <b>F</b>	19. Age:	20. Date of birth: <b>04/08/1958</b>
39C. Veterinarian:		21. Ethnicity: <b>H <input type="checkbox"/> NH <input checked="" type="checkbox"/></b>		22. Sobriety: Sob. <input checked="" type="checkbox"/> H.B.D. <input type="checkbox"/>	
40. License: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Lic#: <b>NOT DISPLAYED</b>		23. Residence address: <b>5626 DOUGLAS # 202</b> (City and/or state if not Des Moines or Iowa)			
41. Other identifiers (Collar, tattoo, etc.): <b>BLUE NYLON</b>		24. Residence phone number: <b>278-1601</b>		25. Business or cellular phone number:	
42. Confinement/quarantine location: <b>ARL CCC</b>		26. Location of incident (address): <b>5626 DOUGLAS</b>			
43. Impounded or bite animal owner's name (Last, First M.I.): <b>KENNEDY, BONNIE OR PRATT, JAMES</b>		27. Location type: <b>PARKING LOT</b>			
44. Residence address: <b>5626 DOUGLAS #216</b> (City and/or state if not Des Moines or Iowa)		28. Date and time incident occurred: <b>25 OCT 11 1510</b>		29. Date and time incident reported: <b>25 OCT 11 1523</b>	
45. Residence phone number: <b>326-4978</b>		30. Crime/incident type: <b>ANIMAL BITE-DOG</b>			
46. Place of employment or school:		31. Classification:			
47. Business or cellular phone number:		48. Animal owner notification: No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 48A. Date and time of notification: <b>25 OCT 11 1544</b>			
48. Animal owner notification: No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 48B. Person making notification: <b>T. UPDEGROVE AR6</b>		48C. Means of notification: <b>IN PERSON/NOTICE</b>			
49. Witness' name (Last, first):		50. Residence address: (City and/or state if not Des Moines or Iowa)		51. Daytime or cellular phone number:	
52. Witness' name (Last, First):		53. Residence address: (City and/or state if not Des Moines or Iowa)		54. Daytime or cellular phone number:	
55. Investigative notifications and/or photographs taken: ARL Supervisor: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Sergeant: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Police Officer: No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Photographs taken by ARL or PO: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/>					
<b>Victim animal</b>		56. Victim animal ARL number: Impounded: No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> ARL#:		57. Animal type: Cat <input type="checkbox"/> Dog <input type="checkbox"/> Other <input type="checkbox"/>	
58. Animal breed: <b>YORKI</b>		59. Animal color:		60. Animal fur length: Short <input type="checkbox"/> Medium <input type="checkbox"/> Long <input type="checkbox"/> Other <input type="checkbox"/>	
61. Animal sex: Female <input type="checkbox"/> Spayed <input type="checkbox"/> Male <input type="checkbox"/> Neutered <input type="checkbox"/> Unknown <input type="checkbox"/>		62. Rabies tag: No <input type="checkbox"/> Yes <input type="checkbox"/> R/T#:			
63. Microchip: No <input type="checkbox"/> Yes <input type="checkbox"/> M/C#:		62A. Date of vaccination:		62B. Date of vaccination expiration:	
64. License: No <input type="checkbox"/> Yes <input type="checkbox"/> Lic#:		62C. Veterinarian:			
65. Type and location of injury:		66. Medical treatment:			
67. Confinement/quarantine location:		68. Victim animal owner's name (Last, First M.I.):			
69. Residence address: (City and/or state if not Des Moines or Iowa)		70. Residence phone number:		71. Business or cellular phone number:	
72. Reporting official: <b>T. UPDEGROVE AR6</b>		I.D. No. <b>TU</b>	73. Status: <input checked="" type="checkbox"/> Open <input type="checkbox"/> Closed <input type="checkbox"/> Excep. Closed  <input type="checkbox"/> Case file <input type="checkbox"/> Suspended <input type="checkbox"/> Unfounded	74. Copy/copies made by:	
76. Second reporting official:		I.D. No.	77. Supervisor approving report: <b>Colin AR-1</b>	75. Referred to: <input checked="" type="checkbox"/> Animal Control  <input type="checkbox"/> Detectives <input type="checkbox"/> PIO <input type="checkbox"/> Chief <input type="checkbox"/> OPS <input type="checkbox"/> Other:	
78. Review by:		79. Review by:			

79. Page: 2 of 2		<b>Animal Incident Investigation Report</b> Des Moines, Iowa			80. DMPD case number (if applicable) 11-35117				
81. Suspect or offender <u>one</u> (1) name (Last, first Middle):				82. Arrested: No <input type="checkbox"/> Yes <input type="checkbox"/>		83. Warrant needed: No <input type="checkbox"/> Yes <input type="checkbox"/>		84. Charges filed: No <input type="checkbox"/> Yes <input type="checkbox"/>	
85. Race:	86. Sex:	87. Age:	88. Date of birth:	89. Ethnicity: H <input type="checkbox"/> NH <input type="checkbox"/>	90. Height:	91. Weight:	92. Hair color:	93. Eye color:	
94. Residence address: (City and/or state if not Des Moines or Iowa)									
95. Residence or alternate phone number:				96. Driver license number or social security number:			96A. State:	97. Sobriety: Sob. <input type="checkbox"/> H.B.D. <input type="checkbox"/>	
98. Citation number and crime:				99. Citation number and crime:					
100. Suspect or offender <u>two</u> (2) name (Last, First Middle):				101. Arrested: No <input type="checkbox"/> Yes <input type="checkbox"/>		102. Warrant needed: No <input type="checkbox"/> Yes <input type="checkbox"/>		103. Charges filed: No <input type="checkbox"/> Yes <input type="checkbox"/>	
104. Race:	105. Sex:	106. Age:	107. Date of birth:	108. Ethnicity: H <input type="checkbox"/> NH <input type="checkbox"/>	109. Height:	110. Weight:	111. Hair color:	112. Eye color:	
113. Residence address: (City and/or state if not Des Moines or Iowa)									
114. Residence or alternate phone number:				115. Driver license number or social security number:			115A. State:	116. Sobriety: Sob. <input type="checkbox"/> H.B.D. <input type="checkbox"/>	
117. Citation number and crime:				118. Citation number and crime:					
119. Narrative:									
<p>THIS R/O WAS CALLED TO ASSIST THE POLICE ON A DOG BITE/DOMESTIC DISTURBANCE. WHEN I ARRIVED I MET WITH DMPD OFFICERS LIGHT # 5117 &amp; QUANG #5061. IT WAS ADVISED THAT KENNEDY, BONNIE WHO RESIDES IN ROOM # 216 WAS IN THE BACK PARKING AREA OF THE HOTEL WALKING HER DOG CLOE, A FEMALE BLACK WITH WHITE PITBULL. THIS DOG WAS ON A LEASH AT THE TIME OF THE OCCURANCE.</p> <p>WHILE WALKING HER DOG, SMITH, GLENALE WHO RESIDES IN ROOM # 202 WAS ALSO OUTSIDE WALKING HER TWO DOGS OFF LEASH. SMITH'S SMALL YORKI DOG WENT UP TO KENNEDY'S DOG CLOE SNIFFING HER, THAT IS WHEN CLOE TURNED AND ATTACKED THE YORKI.</p> <p>SMITHS DOG WAS KILLED DURNING THE ATTACK, HOWEVER WHILE TRYING TO ASSIST HER DOG SMITH WAS BITTEN ON HER LEFT KNEE BY CLOE. SMITH STATED THE DOG MOSTLY GOT HER PANT LEG HOWEVER WHEN LOOKING AT HER KNEE SHE DID FIND A TOOTH SCRAPE.</p> <p>I VIEWED THE AREA TO FIND 2 PUNCTURE HOLES ON HER LEFT PANT LEG, UNDER THAT AREA THERE WAS A 1" TOOTH SCRAPE ACROSS HER LEFT KNEE.</p> <p>CLOE WAS IMPOUNDED ( ALSO SEE CASE # 11-35116 &amp; 11-35118) FOR RABIES Q/T. SMITH WAS ADVISED ON MEDICAL CARE SHE WAS ALSO ADVISED THAT CLOE DOES HAVE A CURRENT RABIES VACCINATION.</p> <p>THE DOG WAS THEN TRANSPORTED TO ARL CCC</p> <p>Q/T RELEASE ON 11/04/11</p>									
						120. Date of this report: 25 OCT 11			



Animal Incident Supplemental Report  
Des Moines, Iowa

2011 NOV -3 PM 11:40

1. Human victim or reporting person or animal owner name (Last, First M.I.):

SMITH, GLENALE

2. Case number:

11-35117

15

3. Form used as a continuation of an Animal Incident Investigation Report: ☐

4. Date of this report:

2-Nov-11

5. Date incident occurred:

25-Oct-11

Changed: ☐ Yes

6. Form used to report a follow-up investigation or additional information: ☒

7. Crime/incident type:

ANIMAL BITE-DOG

8. Page: 1 of 1

9. If this report is a continuation of another report then indicate the box number(s) continued below:

TO CLERIFY IN THIS CASE.  
SMITHS INJURY TO HER KNEE AND PANT TEARS ARE CONSISTANT WITH A LARGE DOG.  
ALSO SMITHS INJURY IS TO HER KNEE AND NOT TO HER HAND AS INDICATED ON THE FIRST  
PAGE OF THE ORIGINAL AIIR.

10. ARL reporter:

T. UPDEGROVE AR6

I.D. No.

TU

11. Status: ☒ Open ☐ Closed ☐ Excep. Closed

☐ Case file ☐ Suspended ☐ Unfounded

12. Copy/copies made by:

13. Referred to:

☒ Animal Control

☐ Detectives ☐ PIO

☐ Chief ☐ OPS

☐ Other: \_\_\_\_\_

14. Second ARL reporter:

I.D. No.

15. Supervisor approving report:

I.D. No.

16. Reviewed by:

JP

**Animal Incident Supplemental Report**  
Des Moines, Iowa

1. Human victim or reporting person or animal owner name (Last, First M.I.):

KENNEDY, BONNIE

2. Case number:

11-35117

3. Form used as a continuation of an Animal Incident Investigation Report: ☐

4. Date of this report:

4-Nov-11

5. Date incident occurred:

25-Oct-11

Changed: ☐ Yes

6. Form used to report a follow-up investigation or additional information: ☒

7. Crime/incident type:

ANIMAL BITE-DOG

8. Page: 1 of 1

9. If this report is a continuation of another report then indicate the box number(s) continued below:

R.O VIEWED THE DOG IN THIS CASE A FEMALE BLACK WITH WHITE PITBULL NAMED CLOE. THIS DOG APPEARED HEALTHY AND FREE OF DISEASE AND WAS RELEASED FROM Q/T. VICTIM IN THIS MATTER SMITH WAS ADVISED IN PERSON AT THE SHELTER THAT THE DOG WAS HEALTHY AND THE Q/T WAS NOW OVER. KENNEDY WAS ALSO MADE AWARE OF THIS WHILE SHE WAS AT THE SHELTER.

I NEED TO NOTE THAT IN THIS CASE I RECALL SMITH TELLING ME THAT KENNEDY WAS PUNCHING CLOE IN THE HEAD TO GET HER TO STOP ATTACKING HER DOG. I SPOKE TO KENNEDY ABOUT THIS AT THE SCENE HOWEVER I DID NOT RECALL THIS UNTIL TODAY SPEAKING WITH SMITH AGAIN.

AT THE SCENE KENNEDY ALSO SAID SHE WAS DOING TRYING TO GET CLOE OFF THE LITTLE DOG AND SHE DID STATE SHE WAS PUNCHING CLOE IN THE HEAD.

10. ARL reporter:

T. UPDEGROVE AR6

I.D. No.

11. Status: ☐ Open ☐ Closed ☐ Excep. Closed

☐ Case file ☐ Suspended ☐ Unfounded

12. Copy/copies made by:

13. Referred to:  
☐ Animal Control

☐ Detectives ☐ PIO

☐ Chief ☐ OPS

☐ Other: \_\_\_\_\_

14. Second ARL reporter:

I.D. No.

15. Supervisor approving report:

I.D. No.

16. Reviewed by:

# Animal Incident Investigation Report

Des Moines, Iowa

CONNECTS TO 11-35116! 35117 K

1. ARL case number: <b>110944872</b>		2. DMPD case number (if applicable): <b>11-35118</b>	
3. Victim's name (Last, First M.I.): <b>BENNETT, SCOTT</b> (Human victim or society)			
32. Impounded or bite animal ARL number: Impounded: No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> ARL#: <b>A14146270</b>		4. Race: <b>W</b>	5. Sex: <b>M</b>
33. Animal type: Cat <input type="checkbox"/> Dog <input checked="" type="checkbox"/> Other <input type="checkbox"/> : <b>CLOE</b>		6. Age:	7. Date of birth: <b>03/11/1959</b>
34. Animal breed: <b>PITBULL</b>		8. Ethnicity: <b>H</b> <input type="checkbox"/> <b>NH</b> <input checked="" type="checkbox"/>	9. Sobriety: Sob. <input checked="" type="checkbox"/> H.B.D. <input type="checkbox"/>
35. Animal color: <b>BLACK WITH WHITE</b>		10. Residence address: <b>3710 56 ST</b> (City and/or state if not Des Moines or Iowa)	
36. Animal fur length: Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long <input type="checkbox"/> Other <input type="checkbox"/>		11. Residence phone number: <b>975-0734</b>	
37. Animal sex: Female <input checked="" type="checkbox"/> Spayed <input type="checkbox"/> Male <input type="checkbox"/> Neutered <input type="checkbox"/> Unknown <input type="checkbox"/>		12. Business or cellular phone number:	
38. Microchip: No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> (Records Personnel: Enter M/C# as a serial number)  M/C#: <b>0A125A690B</b>		13. Place of employment or school:	
39. Rabies tag: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> R/T#: <b>NOT DISPLAYED</b>		14. Type and location of injury: <b>RIGHT FINGER</b>	
39A. Date of vaccination:		15. Medical treatment: <b>ADVISED</b>	
39B. Date of vaccination expiration:		16. Reporting person's name (Last, First M.I.): <b>DMPD</b>	
39C. Veterinarian:		17. Race:	18. Sex:
40. License: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Lic#: <b>NOT DISPLAYED</b>		19. Age:	20. Date of birth:
41. Other identifiers (Collar, tattoo, etc.): <b>BLUE NYLON</b>		21. Ethnicity: <b>H</b> <input type="checkbox"/> <b>NH</b> <input checked="" type="checkbox"/>	22. Sobriety: Sob. <input type="checkbox"/> H.B.D. <input type="checkbox"/>
42. Confinement/quarantine location: <b>ARL CCC</b>		23. Residence address: (City and/or state if not Des Moines or Iowa)	
43. Impounded or bite animal owner's name (Last, First M.I.): <b>KENNEDY, BONNIE OR PRATT, JAMES</b>		24. Residence phone number:	
44. Residence address: <b>5626 DOUGLAS #216</b> (City and/or state if not Des Moines or Iowa)		25. Business or cellular phone number:	
45. Residence phone number: <b>326-4978</b>		26. Location of incident (address): <b>5626 DOUGLAS</b>	
46. Place of employment or school:		27. Location type: <b>PARKING LOT</b>	
47. Business or cellular phone number:		28. Date and time incident occurred: <b>25 OCT 11 1510</b>	
48. Animal owner notification: No <input type="checkbox"/> Yes <input checked="" type="checkbox"/>		29. Date and time incident reported: <b>25 OCT 11 1523</b>	
48A. Date and time of notification: <b>25 OCT 11 1544</b>		30. Crime/incident type: <b>ANIMAL BITE-DOG</b>	
48B. Person making notification: <b>T. UPDEGROVE AR6</b>		31. Classification:	
48C. Means of notification: <b>IN PERSON/NOTICE</b>		49. Witness' name (Last, first):	
50. Residence address: (City and/or state if not Des Moines or Iowa)		51. Daytime or cellular phone number:	
52. Witness' name (Last, First):		53. Residence address: (City and/or state if not Des Moines or Iowa)	
54. Daytime or cellular phone number:		55. Investigative notifications and/or photographs taken: ARL Supervisor: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Sergeant: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Police Officer: No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Photographs taken by ARL or PO: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/>	
56. Victim animal ARL number: Impounded: No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> ARL#: <b>110944872</b>		57. Animal type: Cat <input type="checkbox"/> Dog <input type="checkbox"/> Other <input type="checkbox"/>	
58. Animal breed: <b>YORKI</b>		59. Animal color:	
60. Animal fur length: Short <input type="checkbox"/> Medium <input type="checkbox"/> Long <input type="checkbox"/> Other <input type="checkbox"/>		61. Animal sex: Female <input type="checkbox"/> Spayed <input type="checkbox"/> Male <input type="checkbox"/> Neutered <input type="checkbox"/> Unknown <input type="checkbox"/>	
62. Rabies tag: No <input type="checkbox"/> Yes <input type="checkbox"/> R/T#:		62A. Date of vaccination:	
62B. Date of vaccination expiration:		62C. Veterinarian:	
63. Microchip: No <input type="checkbox"/> Yes <input type="checkbox"/> M/C#:		64. License: No <input type="checkbox"/> Yes <input type="checkbox"/> Lic#:	
65. Type and location of injury:		66. Medical treatment:	
67. Confinement/quarantine location:		68. Victim animal owner's name (Last, First M.I.):	
69. Residence address: (City and/or state if not Des Moines or Iowa)		70. Residence phone number:	
71. Business or cellular phone number:		72. Reporting official: <b>T. UPDEGROVE AR6</b> <b>TL</b>	
73. Status: <input type="checkbox"/> Open <input type="checkbox"/> Closed <input type="checkbox"/> Excep. Closed <input type="checkbox"/> Case file <input type="checkbox"/> Suspended <input type="checkbox"/> Unfounded		74. Copy/copies made by:	
75. Referred to: <input checked="" type="checkbox"/> Animal Control <input type="checkbox"/> Detectives <input type="checkbox"/> PIO <input type="checkbox"/> Chief <input type="checkbox"/> OPS <input type="checkbox"/> Other:		76. Second reporting official:	
77. Supervisor approving report: <b>J. Collier AB-1</b>		78. Reviewed by: <b>AB</b>	

2011 OCT 26 PM 5:08

79. Page: <b>2</b> of <b>2</b>		<b>Animal Incident Investigation Report</b> Des Moines, Iowa			80. DMPD case number (If applicable) <b>11-35118</b>	
81. Suspect or offender <u>one</u> (1) name (Last, first Middle):				82. Arrested: No <input type="checkbox"/> Yes <input type="checkbox"/>	83. Warrant needed: No <input type="checkbox"/> Yes <input type="checkbox"/>	84. Charges filed: No <input type="checkbox"/> Yes <input type="checkbox"/>
85. Race:	86. Sex:	87. Age:	88. Date of birth:	89. Ethnicity: H <input type="checkbox"/> NH <input type="checkbox"/>	90. Height:	91. Weight:
				92. Hair color:	93. Eye color:	
94. Residence address: (City and/or state if not Des Moines or Iowa)						
95. Residence or alternate phone number:			96. Driver license number or social security number:		96A. State:	97. Sobriety: Sob. <input type="checkbox"/> H.B.D. <input type="checkbox"/>
98. Citation number and crime:				99. Citation number and crime:		
100. Suspect or offender <u>two</u> (2) name (Last, First Middle):				101. Arrested: No <input type="checkbox"/> Yes <input type="checkbox"/>	102. Warrant needed: No <input type="checkbox"/> Yes <input type="checkbox"/>	103. Charges filed: No <input type="checkbox"/> Yes <input type="checkbox"/>
104. Race:	105. Sex:	106. Age:	107. Date of birth:	108. Ethnicity: H <input type="checkbox"/> NH <input type="checkbox"/>	109. Height:	110. Weight:
				111. Hair color:	112. Eye color:	
113. Residence address: (City and/or state if not Des Moines or Iowa)						
114. Residence or alternate phone number:			115. Driver license number or social security number:		115A. State:	116. Sobriety: Sob. <input type="checkbox"/> H.B.D. <input type="checkbox"/>
117. Citation number and crime:				118. Citation number and crime:		
<p>119. Narrative:</p> <p><b>THIS R/O WAS CALLED TO ASSIST THE POLICE ON A DOG BITE/DOMESTIC DISTURBANCE. WHEN I ARRIVED I MET WITH DMPD OFFICERS LIGHT # 5117 &amp; QUANG #5061. IT WAS ADVISED THAT KENNEDY, BONNIE WHO RESIDES IN ROOM # 216 WAS IN THE BACK PARKING AREA OF THE HOTEL WALKING HER DOG CLOE, A FEMALE BLACK WITH WHITE PITBULL. THIS DOG WAS ON A LEASH AT THE TIME OF THE OCCURANCE. WHILE WALKING HER DOG, SMITH, GLENALÉ WHO RESIDES IN ROOM # 202 WAS ALSO OUTSIDE WALKING HER TWO DOGS OFF LEASH. SMITH'S SMALL YORKI DOG WENT UP TO KENNEDY'S DOG CLOE SNIFFING HER, THAT IS WHEN CLOE TURNED AND ATTACKED THE YORKI. SMITH AND KENNEDY WERE YELLING AND SCREAMING WHICH CAUGHT THE ATTENTION OF BENNETT, SCOTT WHO LIVES BEHIND THE MOTEL AT 3710 56 ST. BENNETT STATED HE LOOKED THROUGH THE WOODEN FENCE WHICH SEPERATES THE PROPERTIES TO SEE THE LADIES TRYING TO BREAK UP THE DOGS FIGHTING, BENNETT STATED HE JUMPED THE FENCE AND WENT TO ASSIST. BENNETT STATED HE WAS TRYING TO PRY THE BLACK PITBULLS MOUTH OPEN WHEN THE DOGS TOOTH CAUGHT HIS FINGER CAUSING HIS SKING TO TEAR. I VIEWED THE AREA TO FIND THE RING FINGER ON HIS RIGHT HAND HAVING A TEAR AND BLEEDING. R.O ADVISED ON MEDICAL ATTENTION AND ALSO ADVISED BENNETT THAT THE DOG IN QUESTION DOES HAVE A CURRENT RABIES VACCINATION HOWEVER THE DOG WAS IMPOUNDED AND HE WOULD BE CONTACTED AT THE END OF THE 10 DAY Q/T PERIOD.</b></p> <p><b>CLOE WAS IMPOUNDED ( ALSO SEE CASE # 11-35116 &amp; 35117) THE DOG WAS THEN TRANSPORTED TO ARL CCC.</b></p> <p><b>Q/T RELEASE ON 11/04/11</b></p>						
					120. Date of this report: <b>25 OCT 11</b>	

# Animal Incident Investigation Report

Des Moines, Iowa

1. ARL case number:		2. DMPD case number (if applicable): 11-31528					
3. Victim's name (Last, First M.I.): wing, dustin		(Human victim or society)					
32. Impounded or bite animal ARL number: Impounded: No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> ARL#: <u>A14146270</u>		4. Race: w	5. Sex: m	6. Age: 30	7. Date of birth:	8. Ethnicity: H <input type="checkbox"/> NH <input checked="" type="checkbox"/>	9. Sobriety: Sob. <input checked="" type="checkbox"/> H.B.D. <input type="checkbox"/>
33. Animal type: Cat <input type="checkbox"/> Dog <input checked="" type="checkbox"/> Other <input type="checkbox"/>		10. Residence address: (City and/or state if not Des Moines or Iowa) d.m.p.d					
34. Animal breed: pit		11. Residence phone number: 202-8242			12. Business or cellular phone number:		
35. Animal color: black white		13. Place of employment or school: d.m.p.d					
36. Animal fur length: Short <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Long <input type="checkbox"/> Other <input type="checkbox"/>		14. Type and location of injury: left inner thigh 1 puncher and tooth scrapes					
37. Animal sex: Female <input type="checkbox"/> Spayed <input type="checkbox"/> Male <input type="checkbox"/> Neutered <input type="checkbox"/> Unknown <input type="checkbox"/>		15. Medical treatment: none					
38. Microchip: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> (Records Personnel: Enter M/C# as a serial number)  M/C#:		16. Reporting person's name (Last, First M.I.): d.m.p.d					
39. Rabies tag: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> R/T#:		17. Race:	18. Sex:	19. Age:	20. Date of birth:	21. Ethnicity: H <input type="checkbox"/> NH <input type="checkbox"/>	22. Sobriety: Sob. <input type="checkbox"/> H.B.D. <input type="checkbox"/>
39A. Date of vaccination:		23. Residence address: (City and/or state if not Des Moines or Iowa)					
39B. Date of vaccination expiration:		24. Residence phone number:			25. Business or cellular phone number:		
39C. Veterinarian:		26. Location of incident (address): 5626 douglas #216					
40. License: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Lic#:		27. Location type: hotel room					
41. Other identifiers (Collar, tattoo, etc.): none		28. Date and time incident occurred: 26 sept 11 0010			29. Date and time incident reported: 26 sept 11 0045		
42. Confinement/quarantine location: arl accc		30. Crime/incident type: animal bite dog					31. Classification:
43. Impounded or bite animal owner's name (Last, First M.I.): pratt, james		44. Residence address: (City and/or state if not Des Moines or Iowa) 5626 douglas #216					
45. Residence phone number: 318-4697		46. Place of employment or school:			47. Business or cellular phone number:		
48. Animal owner notification: No <input type="checkbox"/> Yes <input checked="" type="checkbox"/>		48A. Date and time of notification: 26 sept 11 0045		48B. Person making notification: kris wilder ar3		48C. Means of notification: inperson	
49. Witness' name (Last, first):		50. Residence address: (City and/or state if not Des Moines or Iowa)			51. Daytime or cellular phone number:		
52. Witness' name (Last, First):		53. Residence address: (City and/or state if not Des Moines or Iowa)			54. Daytime or cellular phone number:		
55. Investigative notifications and/or photographs taken: ARL Supervisor: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Sergeant: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Police Officer: No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Photographs taken by ARL or PO: No <input checked="" type="checkbox"/> Yes <input type="checkbox"/>							
Victim animal		56. Victim animal ARL number: Impounded: No <input type="checkbox"/> Yes <input type="checkbox"/> ARL#:				57. Animal type: Cat <input type="checkbox"/> Dog <input type="checkbox"/> Other <input type="checkbox"/>	
58. Animal breed:		59. Animal color:		60. Animal fur length: Short <input type="checkbox"/> Medium <input type="checkbox"/> Long <input type="checkbox"/> Other <input type="checkbox"/>			
61. Animal sex: Female <input type="checkbox"/> Spayed <input type="checkbox"/> Male <input type="checkbox"/> Neutered <input type="checkbox"/> Unknown <input type="checkbox"/>		62. Rabies tag: No <input type="checkbox"/> Yes <input type="checkbox"/> R/T#:					
63. Microchip: No <input type="checkbox"/> Yes <input type="checkbox"/> M/C#:		62A. Date of vaccination:			62B. Date of vaccination expiration:		
64. License: No <input type="checkbox"/> Yes <input type="checkbox"/> Lic#:		62C. Veterinarian:					
65. Type and location of injury:		66. Medical treatment:					
67. Confinement/quarantine location:		68. Victim animal owner's name (Last, First M.I.):					
69. Residence address: (City and/or state if not Des Moines or Iowa)		70. Residence phone number:			71. Business or cellular phone number:		
72. Reporting official: kris wilder <i>Yum</i>		I.D. No. ar3	73. Status: <input checked="" type="checkbox"/> Open <input type="checkbox"/> Closed <input type="checkbox"/> Excep. Closed <input type="checkbox"/> Case file <input type="checkbox"/> Suspended <input type="checkbox"/> Unfounded		74. Copy/copies made by:		75. Referred to: <input checked="" type="checkbox"/> Animal Control <input type="checkbox"/> Detectives <input type="checkbox"/> PIO <input type="checkbox"/> Chief <input type="checkbox"/> OPS <input type="checkbox"/> Other:
76. Second reporting official:		I.D. No.	77. Supervisor approving report: <i>J. Colin AR-1</i>		78. Reviewed by: <i>WA</i>		

80. DMPD case number (if applicable):  
11-31528

79. Page: 2 of 2

# Animal Incident Investigation Report

Des Moines, Iowa

81. Suspect or offender <u>one</u> (1) name (Last, first Middle):				82. Arrested: No <input type="checkbox"/> Yes <input type="checkbox"/>		83. Warrant needed: No <input type="checkbox"/> Yes <input type="checkbox"/>		84. Charges filed: No <input type="checkbox"/> Yes <input type="checkbox"/>	
85. Race:	86. Sex:	87. Age:	88. Date of birth:	89. Ethnicity: H <input type="checkbox"/> NH <input type="checkbox"/>	90. Height:	91. Weight:	92. Hair color:	93. Eye color:	
94. Residence address: (City and/or state if not Des Moines or Iowa)									
95. Residence or alternate phone number:				96. Driver license number or social security number:			96A. State:	97. Sobriety: Sob. <input type="checkbox"/> H.B.D. <input type="checkbox"/>	
98. Citation number and crime:					99. Citation number and crime:				
100. Suspect or offender <u>two</u> (2) name (Last, First Middle):				101. Arrested: No <input type="checkbox"/> Yes <input type="checkbox"/>		102. Warrant needed: No <input type="checkbox"/> Yes <input type="checkbox"/>		103. Charges filed: No <input type="checkbox"/> Yes <input type="checkbox"/>	
104. Race:	105. Sex:	106. Age:	107. Date of birth:	108. Ethnicity: H <input type="checkbox"/> NH <input type="checkbox"/>	109. Height:	110. Weight:	111. Hair color:	112. Eye color:	
113. Residence address: (City and/or state if not Des Moines or Iowa)									
114. Residence or alternate phone number:				115. Driver license number or social security number:			115A. State:	116. Sobriety: Sob. <input type="checkbox"/> H.B.D. <input type="checkbox"/>	
117. Citation number and crime:					118. Citation number and crime:				

119. Narrative:

I was sent out on a dog bite. I spoke to the police officer that got bit. He stated he was at the room for another problem and the person that was holding the dog didn't have a good grip on the dog and the dog ran over and bit him on the leg. I arrived and spoke to the dog owner he stated he wasn't with the dog when the incident occurred and the dog was supposed to be locked up in the room. I explained due to the dog biting the dog would have to be at the shelter for the 10 day qt and would be released after that. I impounded the dog and gave the dog owner a door hanger where the dog will be at. I transported the dog to the animal care center. Follow up on the 6 oct 2011 after 0010 to release the bite dog and call the victim and the dog owner and let them know of qt release.

120. Date of this report:  
26 sept 11

2011 SEP 26 PM 3:40

**CASE INVESTIGATION REPORT**  
DES MOINES, IOWA POLICE DEPARTMENT

\* SUPP CIR \*

20

DOMESTIC ABUSE <input type="checkbox"/> HATE/BIAS <input type="checkbox"/> LEOKA <input type="checkbox"/>			1. NAME (LAST, FIRST, MIDDLE) WING, DUSTIN 5053		2. CASE NUMBER 1131528
17. DISTRICT 1	18. BEAT 1	19. REP. AREA	3. ADDRESS 25 E 1 <sup>ST</sup> ST		4. RES. PHONE N/A
20. OCCUPATION N/A	21. HOURS OF EMPLOY.	22. SOBRIETY	5. PLACE OF EMPLOYMENT OR SCHOOL DMPD		6. BUS. PHONE N/A
23. DESCRIBE LOCATION OF OFFENSE OR TYPE OF PREMISE MOTEL			7. R/S/A - D.O.B. - ETHNIC NM30 H <input type="checkbox"/> NH <input checked="" type="checkbox"/>	8. LOCATION OF OFFENSE (ADDRESS) 5626 DOUGLAS	
24. VEHICLE USED BY SUSPECTS LICENSE NO. STATE YEAR N/A			9. REPORTING PERSON DMPD		10. RES. PHONE
COLOR YEAR MAKE BODY MODEL			11. REPORTING PERSON'S ADDRESS OBSERVED		12. BUS. PHONE
IDENTIFYING CHARACTERISTICS OF VEHICLE A			13. DATE AND TIME OCCURRED 26 SEP 11 / 0010		14. DATE AND TIME REPORTED 26 SEP 11 / 0010
CODE: V-VICTIM (OTHER THAN IN BLOCK #1) AND SHOW SEX RACE, AGE, W-WITNESS; P-PARENT OR GUARDIAN.			15. CRIME INJURED OFFICER		16. CLASSIFICATION
25. NAME PRATT, JAMES 8/12/81			CODE G	RESIDENCE ADDRESS 5626 DOUGLAS #216	CITY DSM RES. PHONE 318-4697
26. MARTINEZ, ASHLEY 12/1/84			G	3211 30 <sup>TH</sup> E 20	DSM 3264978
27.					
28. NOTIFICATIONS: INVESTIGATOR'S <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IDENTIFICATION UNIT <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO PHOTOGRAPHS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO CAR VIDEO <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO UNIT #					
PROPERTY & INJURIES	29. TOOL OR WEAPON USED DOG		30. METHOD USED BITE		31. POINT OF ENTRY N/A
	33. TYPE PROPERTY TAKEN ITEM 63		34. TOTAL VALUE ITEM 63		35. LOCATION OF VICTIM'S PROPERTY
	37. TYPE OF INJURY AND LOCATION ON BODY POUNCTURE TO LEFT LEG		38. HOSPITAL CITY CLINIC		39. TRANSPORTED BY
WORTHLESS DOCUMENTS	40. COLOR OF DOC. N		41. TYPE OF DOC.	42. DATE OF DOC.	43. DOCUMENT NO.
	45. NAME AND NO OF BANK		46. MADE PAYABLE TO		47. SIGNATURE ON FACE
	48. REASON NOT HONORED		49. TYPE OF PROPERTY OR SERVICES OBTAINED		50. AMOUNT OF DOCUMENT
DOMESTIC ABUSE	51. DO YOU HAVE A CURRENT NO CONTACT ORDER? YES <input type="checkbox"/> NO <input type="checkbox"/> A		52. HAS THE SUSPECT BEEN CHARGED WITH DOMESTIC ASSAULT ON THE VICTIM OR OTHERS IN THE PAST? YES <input type="checkbox"/> NO <input type="checkbox"/>		53. NOTICE OF ABUSED PERSON RIGHTS GIVEN? YES <input type="checkbox"/> NO <input type="checkbox"/> I REQUEST A NO CONTACT ORDER:  SIGNATURE OF VICTIM
	<p>WHILE ON A DOMESTIC WING WAS BIT ON HIS INNER LEFT THIGH, BREAKING THE SKIN, THAT WAS OWNED BY PRATT AND UNDER THE CONTROL OF MARTINEZ. THE DOG WAS ON A LEASH AND INSTRUCTED TO BE KEPT AWAY FROM US. ALL WAS CALLED AND TOOK CONTROL OF THE DOG. PHOTOS WERE TAKEN OF WINGS INJURIES</p>				
54. REPORTING OFFICER BLAESS, D NO. 5072			55. STATUS (CHECK ONE) <input type="checkbox"/> SUSPENDED <input type="checkbox"/> EX. CLD. <input type="checkbox"/> OPEN <input type="checkbox"/> CLOSED		57. REPRODUCED BY NO.
56. SUPERVISOR APPROVING J. M. D. Hoffman NO. 4899			58. REVIEWER		59. UCR DISPOSITION
2ND OFFICER					60. UNIT REFERRED TO: <input checked="" type="checkbox"/> CIB <input type="checkbox"/> VNCU <input type="checkbox"/> IA <input type="checkbox"/> CO. ATT. <input type="checkbox"/> PIO <input type="checkbox"/> SO <input checked="" type="checkbox"/> CHIEF <input type="checkbox"/> OTHER

ACADEMY

**SUSPECT/PROPERTY INFORMATION**  
**DES MOINES, IOWA POLICE DEPARTMENT**

61. CASE NUMBER  
11-31528

**62.**

**NOTE SUSPECT PECULIARITIES**

NOTE SUSPECT PECULIARITIES						
HAIR/STYLE, LENGHT; FACIAL FEATURES; SCARS, MARKS, TATTOOS; BUILD/MUSCULAR, SHORT, TALL THIN, FAT, ETC.						
	R/S/A	D.O.B.	HT.	WT.	HAIR	

HAIR/STYLE, LENGTH; FACIAL FEATURES; SCARS, MARKS, TATTOOS, BILDMARKS, ETC.											
SUS 1	NAME/ALIAS					R/S/A	D.O.B.	HT.	WT.	HAIR	EYES
	PIT BULL					2	UNK	N/A			
	ADDRESS					PHONE NO.		ARRESTED? YES <input type="checkbox"/> NO <input type="checkbox"/> WARRANT NEEDED? YES <input type="checkbox"/> NO <input type="checkbox"/> CHARGES FILED? YES <input type="checkbox"/> NO <input type="checkbox"/>			
						ETHNIC H <input type="checkbox"/> NH <input type="checkbox"/>					
SUS 2	NAME/ALIAS					R/S/A	D.O.B.	HT.	WT.	HAIR	EYES
	ADDRESS					PHONE NO.		ARRESTED? YES <input type="checkbox"/> NO <input type="checkbox"/> WARRANT NEEDED? YES <input type="checkbox"/> NO <input type="checkbox"/> CHARGES FILED? YES <input type="checkbox"/> NO <input type="checkbox"/>			
						ETHNIC H <input type="checkbox"/> NH <input type="checkbox"/>					
SUS 3	NAME/ALIAS					R/S/A	D.O.B.	HT.	WT.	HAIR	EYES
	ADDRESS					PHONE NO.		ARRESTED? YES <input type="checkbox"/> NO <input type="checkbox"/> WARRANT NEEDED? YES <input type="checkbox"/> NO <input type="checkbox"/> CHARGES FILED? YES <input type="checkbox"/> NO <input type="checkbox"/>			
						ETHNIC H <input type="checkbox"/> NH <input type="checkbox"/>					
SUS 4	NAME/ALIAS					R/S/A	D.O.B.	HT.	WT.	HAIR	EYES
	ADDRESS					PHONE NO.		ARRESTED? YES <input type="checkbox"/> NO <input type="checkbox"/> WARRANT NEEDED? YES <input type="checkbox"/> NO <input type="checkbox"/> CHARGES FILED? YES <input type="checkbox"/> NO <input type="checkbox"/>			
						ETHNIC H <input type="checkbox"/> NH <input type="checkbox"/>					

**63.**

### PROPERTY DESCRIPTION

QTY	ARTICLE	BRAND	MODEL	SERIAL NO.	MISC. DESCRIPTION: COLOR, SIZE, INSCRIPTIONS, CALIBRE, ETC.	VALUE
2						
	A					

63.

## CASE SCREENING

YES	NO	
<input type="checkbox"/>	<input type="checkbox"/>	1. DOES THE NATURE OF THE OFFENSE POSE A SERIOUS THREAT OF HARM OR INJURY TO AN INDIVIDUAL OR TO THE COMMUNITY? (ITEM 15)
<input type="checkbox"/>	<input type="checkbox"/>	2. WAS THE VICTIM SERIOUSLY INJURED? (ITEM 36)
<input type="checkbox"/>	<input type="checkbox"/>	3. WAS THERE A WITNESS TO THE OFFENSE? (ITEM 25)
<input type="checkbox"/>	<input type="checkbox"/>	4. CAN A SUSPECT EITHER BE NAMED, LOCATED, IDENTIFIED, OR AN IDENTIFIABLE DESCRIPTION BE PROVIDED? (ITEM 62)
<input type="checkbox"/>	<input type="checkbox"/>	5. CAN A SUSPECT VEHICLE EITHER BE IDENTIFIED, OR AN IDENTIFIABLE DESCRIPTION BE PROVIDED? (ITEM 24 OR 32)
<input type="checkbox"/>	<input type="checkbox"/>	6. IS THERE A REASONABLE EXPECTATION THAT PHYSICAL EVIDENCE CAN BE OBTAINED? (ITEM 28)
<input type="checkbox"/>	<input type="checkbox"/>	7. WAS IDENTIFIABLE PROPERTY TAKEN? (ITEM 63)
<input type="checkbox"/>	<input type="checkbox"/>	8. WAS THERE A SUBSTANTIAL LOSS OF PROPERTY? (ITEM 63)
<input type="checkbox"/>	<input type="checkbox"/>	9. WERE CERTAIN EVENTS OR ACTIONS IN THE OFFENSE DISTINCTIVE OR UNUSUAL AND/OR RELATED TO OTHER OFFENSES? (ITEMS 29, 30 AND 31)
<input type="checkbox"/>	<input type="checkbox"/>	10. IS THERE REASON TO BELIEVE THAT THE CRIME IS SUCH THAT PUBLIC INTEREST AND SUPPORT OR FUTHER INVESTIGATION MAY PRODUCE MORE INVESTIGATIVE LEADS, AND MAY RESULT IN SOLVING THE CRIME?
<input type="checkbox"/>	<input type="checkbox"/>	11. WAS THE OFFENSE, OTHER THAN DOMESTIC ABUSE, A SIMPLE MISDEMEANOR THAT OCCURRED IN THE OFFICER'S PRESENCE? (ITEM 15)

**IF ALL OF THESE ITEMS ARE ANSWERED NO, THE REPORTING OFFICER WILL SUSPEND THE CASE**

THE VICTIM WILL BE INFORMED BY THE REPORTING OFFICER THAT THE CASE IS BEING SUSPENDED AND NO FUTURE ACTION WILL BE TAKEN UNLESS FURTHER LEADS ARE PRODUCED.

REPORTING OFFICER BLAESS, D	IDENT. NO. 5072	DATE 26 SEP 11	SUSPENDED YES <input type="checkbox"/> NO <input type="checkbox"/>
--------------------------------	--------------------	-------------------	--------------------------------------------------------------------



Boone Veterinary Hospital  
2128 4th Street  
Boone, IA 50036  
(515) 432-4601

27

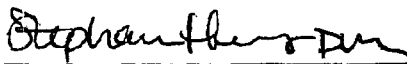
### Rabies Certificate

Client ID: 5295  
Client Name: James Pratt  
Address: 5626 Douglass Ave  
Des Moines, IA 50313  
Phone: (515)249-0769

Patient ID: 12258  
Patient Name: Chloe  
Species: Canine  
Breed: Pitbull  
Sex: Female  
Color: Black  
Markings: White patch on chest  
Birthday: 05/25/2009  
Weight:

Tag Number: 5994  
Lot Number: S067095A  
RABIES CANINE 1 YEAR BOOSTER  
Producer: Pfizer  
K / MLV / R: Killed Virus

Vaccination Date: 5/25/2011  
Expiration Date: 5/25/2012

Staff Name: Dr. Stephanie A. Henry  
License Number: 

2011 SEP 28 PM 6:25

"Chloe"

CITY OF DES MOINES  
ANIMAL CONTROL UNIT

Pratt, James  
APL A1446270

23

DATE: 9-27-11

REFERENCE: ANIMAL HISTORY REPORT # 11-31528

TO WHOM IT MAY CONCERN:

I have examined this dog and found it to have the predominant characteristics of the American Staffordshire Terrier breed. This decision is based on the following physical features of the dog:

HEAD: ☒ MEDIUM LENGTH  
☒ DEEP TROUGH  
☒ BROAD SKULL  
☒ PRONOUNCED CHEEK MUSCLES

MUZZLE: ☒ MEDIUM LENGTH  
☒ JAWS WELL DEFINED  
☒ BLACK NOSE

BACK: ☒ FAIRLY SHORT  
☒ SLIGHT SLOPING FROM  
WITHERS TO RUMP

BODY: ☒ WELL SPRUNG RIBS  
☒ FORELEGS SET RATHER  
FAR APART  
☒ CHEST DEEP AND BROAD

LEGS: ☒ STRAIGHT FRONT LEGS  
☒ HINDQUARTERS WELL MUSCLED  
☒ MODERATE SIZE FEET

COLOR: black with white

COMMENTS: female  
over 6 mos old

SHOULDERS: ☒ STRONG  
☒ MUSCULAR

NECK: ☒ HEAVY  
☒ SLIGHTLY ARCHED  
☒ TAPERS FROM BACK OF  
SKULL TO SHOULDERS

TAIL: ☒ LOW SET  
☒ TAPERS TO FINE POINT  
☒ NOT CURLED OVER BACK

COAT: ☒ SHORT  
☒ CLOSE  
☒ GLOSSY

EYES: ☒ DARK AND ROUND  
☒ LOW DOWN IN SKULL  
☒ SET FAR APART

SIZE: 21 INCHES AT SHOULDERS  
49 LBS.

Angus Benj. Dray

Predominant "Pit Bull" physical characteristics

2011 SEP 28 PM 6:23

**Vicious Dog Breed Declaration Letter**  
(Over Six Months Old)



9-27-2011  
(Date)

JAMES PRATT  
(Dog owner's name)

5020 DOUGLAS #210  
(Owner's address)

DSM, IOWA  
(City, state & zip code)

Your dog was impounded and is at the animal shelter. Your dog was evaluated and determined to be over six months old and a vicious dog breed, defined by city ordinance 18-41 as a Staffordshire Terrier, an American Pit Bull Terrier, an American Staffordshire Terrier or any dog which has the appearance and characteristics of being predominately of the breeds of Staffordshire Terrier, American Pit Bull Terrier or an American Staffordshire Terrier.

**Because of that determination your dog is being declared to be a "Vicious Dog."**

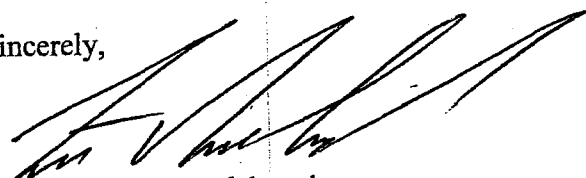
You may reclaim your dog by properly licensing it as a vicious dog with the City Clerk's Office and properly confining/leashing it as a vicious dog. If your dog is found unlicensed as a vicious dog in the City of Des Moines twice you will NOT be able to reclaim it and it may be destroyed in a humane manner, in accordance with city ordinance 18-58. Also if your dog is found not properly confined/leashed more than twice you will NOT be able to reclaim it and it may be destroyed in a humane manner, in accordance with city ordinance 18-57.

You may appeal this declaration by filing a written appeal within three (3) business days with the City Clerk's Office in City Hall at 400 Robert D. Ray Drive in Des Moines, Iowa, however, during an appeal your dog will remain in impound at the animal shelter.

**If you do nothing your dog may be destroyed in a humane manner.**

If you have any questions please call me at (515) 248-6052 or the animal shelter at (515) 284-6905 or the City Clerk's Office at (515) 283-4209.

Sincerely,

  
Sergeant Scott Raudabaugh,  
Chief Humane Officer

cc: City Clerk's Office

Case number:

Dog's name:

Dog's color(s):

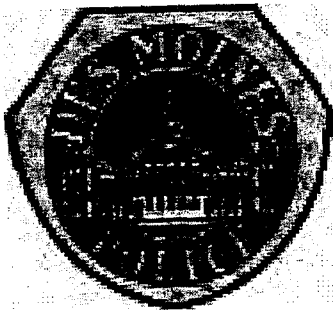
Dog's sex: female

male

ARL number:

2011-31528  
CHLOE  
BLACK  
+ WHITE  
X  
A14146270

2011 SEP 30 PM 5:08



## Chief Humane Officer

7h

### DOCUMENT SERVICE

DMPD Case number: 2011-31528  
ARL number (if known): A14140270  
Animal owner's name: JAMES PRATT  
Address: 5020 DOUGLAS #210  
Location of service: SAME  
Date and time served: 30 SEP 11 0849  
Official serving document (print name):  
SGT. RANA A. BAUGH  
Official's identification number: 4770  
Type of document served: ☒ Vicious dog letter ☐ Dangerous  
animal letter ☐ Illegal animal letter ☐ Hearing ruling letter  
☐ City Council decision letter ☐ Other: \_\_\_\_\_

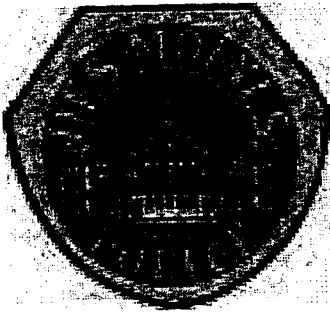
Name of person receiving document (they print their name):

SLID UNDER DOOR

Their signature: X

KF ACU

2011 SEP 30 PM 5:08



## Chief Humane Officer

### DOCUMENT SERVICE

DMPD Case number: 2011-31528  
ARL number (if known): A14140270  
Animal owner's name: JAMES PRATT  
Address: 5026 DOUGLAS #210  
Location of service: ANIMAL SHELTER  
Date and time served: 10/12/2011 1:00 pm

Official serving document (print name):

Megan Wilkens

Official's identification number: \_\_\_\_\_

Type of document served: ☒ Vicious dog letter ☐ Dangerous

animal letter ☐ Illegal animal letter ☐ Hearing ruling letter

☐ City Council decision letter ☐ Other: \_\_\_\_\_

Name of person receiving document (they print their name):

James Pratt

Their signature: X

James Pratt  
KF ACU

## Regulations regarding Animals defined as Vicious under City of Des Moines Municipal Code:

## Licensing Procedure

1. Provide current rabies certificate.
2. Provide written proof of spaying/neutering, if applicable, to qualify for a reduced fee.
3. Provide certificate of insurance, policy declaration or current homeowner's/renter's policy page, providing personal liability insurance coverage, with a minimum liability amount of \$100,000 per occurrence. If a certificate of insurance or policy is not immediately available, a binder indicating the above coverage may be accepted for up to thirty days.
4. Provide a letter from the applicant's insurance agent, on the agency's letterhead, stating that the insured's vicious dog, by name, is specifically covered by the policy in force; unless otherwise verified with the insurance agent by the City Clerk's Office.

## Compliance Form

I, James Pratt 5626 Douglas Ave, am the owner of the  
 Name of Owner and Address

dog(s) listed below and agree to license my dog(s), in accordance with City of Des Moines Municipal Code.

Khloe Pitbull terrier  
 Name of Dog(s) and Breed

2011 OCT 12 PM 12:16  
 CITY CLERK  
 DES MOINES, IA

FILED

2011 OCT 12 PM 3:23

In complying with the Ordinance I agree to: (Please read and initial each of the following items)

JP A. Keep my dog in the house at all times unless the dog is securely leashed with a leash no longer than six (6) feet in length and under the actual physical control of a person eighteen (18) years of age or older.

JP B. Keep my dog securely enclosed and locked in a pen or kennel having secure sides and a secure top attached to the sides, or in lieu of a top, walls at least six feet in height and at least six feet taller than any internal structure. All pens or kennels must have a secure bottom, floor or foundation attached to the sides of the pen or the sides of the pen must be embedded in the ground no less than two feet.

JP C. Keep \$100,000 liability coverage protecting against animal bites in effect at all times, and I understand that failure to do so will result in the license being suspended and the animal being impounded.

1. Name of insurance agency: State Farm  
 2. Name of agent: Scott Richardson Agent's Phone: 515-232-0030

JP D. Display the current City license and rabies tag on the dog at all times.

These requirements are subject to inspection by Des Moines Animal Control Officers.

James Pratt  
 Owner's Signature

10-12-11

Date

2011 OCT -7 PM 5:26

**Animal Incident Supplemental Report**  
Des Moines, Iowa

1. Human victim or reporting person or animal owner name (Last, First M.I.): wing, dustin	2. Case number: 11-31528
----------------------------------------------------------------------------------------------	-----------------------------

3. Form used as a continuation of an Animal Incident Investigation Report: <input type="checkbox"/>	4. Date of this report: 6-Oct-11	5. Date incident occurred: 26-Sep-11
-----------------------------------------------------------------------------------------------------	-------------------------------------	-----------------------------------------

6. Form used to report a follow-up investigation or additional information: <input checked="" type="checkbox"/>	7. Crime/incident type: animal bite dog	Changed: <input type="checkbox"/> Yes
-----------------------------------------------------------------------------------------------------------------	--------------------------------------------	---------------------------------------

8. Page: 1 of 1	9. If this report is a continuation of another report then indicate the box number(s) continued below:
-----------------	--------------------------------------------------------------------------------------------------------

I viewed the bite dog it was healthy and released from qt. I called the dog owner and the victim and adviced them of the qt release. No follow up needed

10. ARL reporter: kris wilder <i>[Signature]</i>	I.D. No. ar3	11. Status: <input type="checkbox"/> Open <input type="checkbox"/> Closed <input type="checkbox"/> Excep. Closed <input checked="" type="checkbox"/> Case file <input type="checkbox"/> Suspended <input type="checkbox"/> Unfounded	12. Copy/copies made by:	13. Referred to: <input checked="" type="checkbox"/> Animal Control <input type="checkbox"/> Detectives <input type="checkbox"/> PIO <input type="checkbox"/> Chief <input type="checkbox"/> OPS <input type="checkbox"/> Other: _____
14. Second ARL reporter:	I.D. No.	15. Supervisor approving report: <i>[Signature]</i> AR4	I.D. No.	16. Reviewed by: <i>[Signature]</i>

**Sec. 18-41. - Definitions.**

The following words, terms and phrases, when used in this article, shall have the meanings ascribed to them in this section, except where the context clearly indicates a different meaning:

*Chief of police* means the legally designated chief of the police department or a designated representative.

*Director of public health* means the county health center director or a designated representative acting in behalf of the city.

*Dog* means and includes both male and female animals of the canine species.

*Owner* means any person owning, keeping or harboring a dog.

*Service dog or service animal* means a dog that is individually trained to do work or perform tasks for the benefit of a person with a disability, including a physical, sensory, psychiatric, intellectual, or other mental disability. The crime deterrent effects of an animal's presence and the provision of emotional support, well-being or companionship do not constitute work or tasks for the purposes of this definition.

*Vicious dog* means:

- (1) Any dog which has attacked a human being or domestic animal one or more times, without provocation;
- (2) Any dog with a history, tendency or disposition to attack, to cause injury or to otherwise endanger the safety of human beings or domestic animals;
- (3) Any dog that snaps, bites, or manifests a disposition to snap or bite;
- (4) Any dog that has been trained for dog fighting, animal fighting or animal baiting or is owned or kept for such purposes;
- (5) Any dog trained to attack human beings, upon command or spontaneously in response to human activities, except dogs owned by and under the control of the police department, a law enforcement agency of the state or of the United States or a branch of the armed forces of the United States;
- (6) Staffordshire terrier breed of dog;
- (7) The American pit bull terrier breed of dog;
- (8) The American Staffordshire terrier breed of dog; or
- (9) Any dog which has the appearance and characteristics of being predominately of the breeds of Staffordshire terrier, American pit bull terrier, American Staffordshire terrier.

(C42, §§ 114-6, 114-9; O.5385, 5506; C54, § 5-19; O.6002; C62, § 5-19; C75, § 7-13; O.9097; C79, § 7-13; O.9828; C85, § 7-13; O.11,095; C91, § 7-13; O.11,914, 15,001)

Cross reference— Definitions generally, § 1-2.



### Sec. 18-59. - Seizure, impoundment and disposition of vicious dogs.

- (a) The chief humane officer or his or her designee, in his or her discretion or upon receipt of a complaint alleging that a particular dog is a vicious dog as defined in this article, may declare such dog a vicious dog by delivering a written notice of declaration to the owner. The notice shall include a description of the dog and the basis for the declaration of viciousness. The notice shall also set forth that the owner shall be required to license and confine the dog as required by this article. The notice shall be served upon any adult residing at the premises where the animal is located or may be posted on those premises if no adult is present to accept service.
- (b) The person owning, keeping, sheltering, or harboring the dog in question may contest the declaration of viciousness by filing a written request with the city clerk within three business days of the receipt of the chief humane officer's declaration. If at this time the owner agrees to confine the dog pursuant to section 18-56 of this chapter and submits to the clerk proof of insurance as described in section 18-44, the dog shall not be impounded pending appeal. Failure to file a request for hearing shall constitute a waiver of any right to contest the declaration of the chief humane officer, and the chief humane officer or his or her designee shall be authorized to seize and impound the dog. A dog so seized shall be impounded for a period of seven days. If, at the end of the impoundment period, the owner has not licensed and shown ability to confine the dog as required by this article the chief humane officer or his or her designee shall cause the dog to be destroyed except as provided in section 18-66 of this chapter.
- (c) The person owning, keeping, sheltering, or harboring the dog in question shall be given not less than 72 hours' written notice of the time and place of the hearing. The notice shall set forth the description of the dog in question and the basis for the allegation of viciousness. The notice shall also set forth that, if the determination of the chief humane officer is upheld, the owner shall be required to license and confine the dog as required by this article. The notice shall be served in the same manner as the declaration notice.
- (d) If, after hearing, the city manager or his or her designee upholds the determination of the chief humane officer that the dog is a vicious dog or is a vicious dog held in violation of this article, as set out in the notice of hearing, the city manager or his or her designee shall order the person owning, sheltering, harboring or keeping the animal to permanently license and confine the dog as required by this article. The order shall immediately be served upon the individual or entity against whom issued in the same manner as the notice of hearing. If the order is not complied with within three days of its issuance, the city manager or his or her designee is authorized to seize and impound the dog. A dog so seized shall be impounded for a period of seven days. If, at the end of the impoundment period, the individual or entity against whom the order of the city manager or his or her designee was issued has not appealed such order to the city council or has not complied with the order, the city manager or his or her designee shall cause the dog to be destroyed except as provided in section 18-66 of this chapter.
- (e) The order to license and confine a vicious dog issued by the city manager or his or her designee may be appealed to the city council. In order to appeal such order, written notice of appeal must be filed with the city clerk within three days after receipt of the order. Failure to file such written notice of appeal shall constitute a waiver of the right to appeal the order of the city manager or his or her designee.
- (f) The notice of appeal shall state the grounds for such appeal and shall be delivered personally or by certified mail to the city clerk. The hearing of such appeal shall be scheduled within 20 days of the receipt of notice of appeal. The hearing may be continued for good cause. After such hearing the city council may affirm or reverse the order of the city manager or his or her designee. Such determination shall be contained in a written decision and shall be filed with the city clerk within three days after the hearing or any continued session thereof. The hearing shall be confined to the record made before the city manager or his or her designee, the arguments of the parties or their representatives, any additional evidence which was not available at the time of the hearing before the city manager or his or her designee, and any other information the city council deems necessary.
- (g) If the city council affirms the action of the city manager or his or her designee, the city council shall order in its written decision that the individual or entity owning, sheltering, harboring, or keeping such vicious dog shall license and confine the dog as required by this article. The decision and order shall immediately be served upon the person against whom rendered in the same manner as the notice set out in subsection (a) of this section. If the original order of the city manager or his or her designee is not appealed and is not complied with within three days or the order of the city council after appeal is not complied with within three days of its issuance, the chief humane officer or his or her designee is authorized to seize and impound such vicious dog. A dog so seized shall be impounded for a period of seven days. If, at the end of the impoundment period, the individual or entity against whom the decision and order of the city manager or his or her designee or the city council was issued has not petitioned the county district court for a review of the order or has not complied with the order, the city manager or his or her designee shall cause the dog to be destroyed in a humane manner except as provided in section 18-66 of this chapter.
- (h) Failure to comply with an order of the city manager or his or her designee issued pursuant to this section and not appealed or of the city council after appeal is a misdemeanor.
- (i)

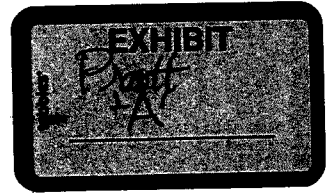
Any dog that is alleged to be vicious and that is under impoundment or quarantine at the animal shelter shall not be released to the owner, but shall continue to be held at the expense of the owner pending the outcome of the hearing. All costs of such impoundment or quarantine shall be paid by the owner if the dog is determined to be vicious. If the dog is not determined to be vicious, the owner shall only pay those costs attributable to initial confinement prior to notice or costs of any required quarantine.

- (j) All vicious dogs shall have an identification microchip implant placed under the dogs skin. Prior to the release of a vicious dog from the animal shelter the owner shall pay the fee in the amount set in the schedule of fees adopted by the city council by resolution for the microchip identification procedure. If a contractor microchips a dog pursuant to this section, the contractor shall retain the fee.

(C85, § 7-27.04; O.11,095, 11,401; C91, § 7-27.04; O.13,320, 13,854, 14,462, 14,677, 14,951)

**EXHIBIT B**

PRATT'S Ex. 13  
1-8





**THESE ARE DAYS  
WE WILL NEVER  
FORGET**



Patient: KENNEDY, BONNIE J  
ED Provider: COPPOLA, RYAN P DO  
Room: ED05

Age/Sex: 48/F

Acct No: F00057759409  
Unit No: MR05059969  
DOB: 08/24/1963

**You were seen today for:**

Animal bite wound  
Dog bite - wound

**Staff**

Your caregivers today were:

Physician	COPPOLA, RYAN P DO
Nurse	BPJ

**Patient Instructions Reviewed**

ANIMAL BITE  
received 10/27/11 1645

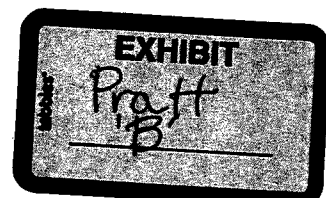
**Activity Restrictions or Additional Instructions**

Provoked dog bite.  
Rabies testing pending.

Medication as directed  
Wound care as directed  
Followup for recheck in 2 days.  
Return sooner if any concerns.  
Will await testing per Animal Control.

**Medication Dose and Instructions**

Amoxicillin/Clavulanate K (Augmentin) 875 MG, ORAL TWICE A DAY, #20  
Hydrocodone Bit/Acetaminophen (Vicodin 5/500MG) 1 TAB, ORAL EVERY 6 HOURS AS NEEDED, #20



Patient: KENNEDY, BONNIE J  
ED Provider: COPPOLA, RYAN P DO  
Room: ED05

Age/Sex: 48/F

Acct No: F00057759409  
Unit No: MR05059969  
DOB: 08/24/1963

#### ANIMAL BITE

##### Animal Bite

An animal bite can be caused by a cat, dog, squirrel, raccoon, rodent or many other animals. Animal bites can easily become infected. Some wild animals (bat, skunk, fox) carry the risk of rabies.

##### Treatment:

- \*If prescribed, take all medications as directed. IMPORTANT: DO NOT STOP taking the medication just because you feel better. If you stop too early, you may not cure the infection completely.
- \*If it is an animal bite, tame or wild, call Animal Control. The animal may need to be caught and impounded, if possible, so it can be checked for rabies immediately. If the animal is dead, it should still be checked.
- \*Keep the area of the bite clean. Wash the bite with soap and water three (3) times a day.
- \*Inspect the area frequently for signs of infection.

Return to the emergency department if any of the following occur:

- \*Fever (greater than 101F by mouth) or shaking chills begin or worsen.
- \*You have numbness or tingling in the area of the bite.
- \*You have signs of infection, such as redness, red streaking, pus, warmth or swelling.
- \*Tender lumps appear in the groin or under the arms.
- \*You have difficulty talking, walking or breathing.
- \*You have difficulty swallowing and/or your jaw and neck are stiff.
- \*You have difficulty moving the injured area.
- \*You have difficulty taking your medicines, if prescribed.



DATE: 10/27/11 @ 1645  
USER: JONESBO

Broadlawns Medical Center AOM \*LIVE\*  
LIST PATIENT'S ACTIVE MEDICATIONS

PAGE 1

PATIENT KENNEDY, BONNIE J F/48 UNIT NUMBER MR192771

PROVIDER CORNELDER, DAVID S DO

MED	LOCATION	ISSUED	FAX
Amoxicillin/Clavulanate K Augmentin 1 Ea Tab	EMERGENCY ROOM	10/27/11	0
SOURCE:			

875 MG ORAL TWICE A DAY , #20 TAB REF 0

Hydrocodone Bit/Acetaminophen Vicodin 5/500MG 1 Ea Tab	EMERGENCY ROOM	10/27/11	0
SOURCE:			

1 TAB ORAL EVERY 6 HOURS AS NEEDED , #20 TAB REF 0

PROVIDER DICKEL, TRACY A ARNP

MED	LOCATION	ISSUED	FAX
Ibuprofen Motrin 800 Mg Tablet	BMC Phys Group - Primary Care	08/27/11	0
SOURCE:			

800 MG ORAL TAKE 3 TIME EACH DAY AS NEEDED , #90 TABLET REF 2

Metaxalone Skelaxin 800 Mg Tablet	BMC Phys Group - Primary Care	08/27/11	0
SOURCE:			

800 MG ORAL TAKE 3 TIME EACH DAY AS NEEDED , #90 TABLET REF 2

Rosuvastatin Calcium Crestor 5 Mg Tablet	BMC Phys Group - Primary Care	08/27/11	0
SOURCE:			

5 MG ORAL DAILY , #30 TABLET REF 2

Albuterol Sulfate Albuterol Sulfate Hfa 8.5 Gm Hfa.aer.ad	BMC Phys Group - Primary Care	06/15/11	0
SOURCE:			

8.5 GM INHALATION AS NEEDED , #30 HFA.AER.AD REF 3

Ergocalciferol Vitamin D 50000 Unit Capsule	BMC Phys Group - Primary Care	06/07/11	0
SOURCE:			

50000 UNIT ORAL WEEKLY , #4 CAPSULE REF 2

DATE: 10/27/11 @ 1645  
USER: JONESBO

Broadlawns Medical Center AOM \*LIVE\*  
LIST PATIENT'S ACTIVE MEDICATIONS

PAGE 2

PATIENT KENNEDY, BONNIE J F/48 UNIT NUMBER MR192771

Hydrocodone Bit/Acetaminophen BMC Phys Group - Primary Care 01/12/11 0  
Vicodin 5/500MG 1 Ea Tab  
SOURCE:

1 EA ORAL BEDTIME As needed , #7 TAB REF 0

PROVIDER PETERSON, CYNTHIA W ARNP

MED	LOCATION	ISSUED	FAX
Metformin Hcl	BMC Phys Group - Primary Care	10/24/11	0
Metformin Hcl 500 Mg Tablet			

SOURCE:

500 MG ORAL TWICE A DAY , #60 TABLET REF 1  
INSTRUCTIONS needs appt

Hydrochlorothiazide	BMC Phys Group - Primary Care	10/24/11	0
Hydrochlorothiazide 25 Mg Tablet			

SOURCE:

25 MG ORAL DAILY , #30 TABLET REF 1  
INSTRUCTIONS needs appt

Cyclobenzaprine Hcl	BMC Phys Group - Primary Care	10/24/11	0
Flexeril 5 Mg Tablet			

SOURCE:

5 MG ORAL BEDTIME As needed , #30 TABLET REF 1

Ranitidine Hcl	BMC Phys Group - Primary Care	09/22/11	0
Ranitidine 150 Mg Tablet			

SOURCE:

150 MG ORAL TWICE A DAY , #60 TABLET REF 5

Losartan Potassium	BMC Phys Group - Primary Care	09/22/11	0
Cozaar 50 Mg Tablet			

SOURCE:

50 MG ORAL DAILY , #30 TABLET REF 5

PROVIDER [Reported Med]

REPORTED MED	LOCATION	ISSUED	FAX
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DATE: 10/27/11 @ 1645 USER: JONESBO		Broadlawns Medical Center AOM *LIVE* LIST PATIENT'S ACTIVE MEDICATIONS		PAGE 3
<b>PATIENT</b> KENNEDY, BONNIE J		F/48	<b>UNIT NUMBER</b> MR192771	
Clonazepam Clonazepam 0.5 Mg Tablet <b>SOURCE:</b>  0.5 MG ORAL THREE TIMES A DAY		BMC Phys Group - Primary Care		0
<b>PROVIDER</b> <NONE>				
<b>REPORTED MED</b>	<b>LOCATION</b>	<b>ISSUED</b>	<b>FAX</b>	
Temazepam	EMERGENCY ROOM		0	
Restoril 15 Mg Capsule <b>SOURCE:</b>  15 MG ORAL BEDTIME				
Citalopram Hydrobromide Citalopram Hbr 40 Mg Tablet <b>SOURCE:</b>  40 MG ORAL tkl& 1/2 tabs AM	EMERGENCY ROOM		0	
Buspirone Hcl Buspar 10 Mg Tab <b>SOURCE:</b>  10 MG ORAL TWICE A DAY	EMERGENCY ROOM		0	
Albuterol Sulfate Albuterol Sulfate Hfa 8.5 Gm Hfa.aer.ad <b>SOURCE:</b>  8.5 GM INHALATION AS NEEDED	EMERGENCY ROOM		0	
Cyclobenzaprine Hcl Flexeril 5 Mg Tablet <b>SOURCE:</b>  5 MG ORAL THREE TIMES A DAY	EMERGENCY ROOM		0	
Ergocalciferol Vitamin D 50000 Unit Capsule <b>SOURCE:</b>  50000 UNIT ORAL WEEKLY	EMERGENCY ROOM		0	
Hydrocodone Bit/Acetaminophen Vicodin 5/500MG 1 Ea Tab <b>SOURCE:</b>  1 TAB ORAL EVERY 4-6 HOURS AS NEEDED	EMERGENCY ROOM		0	

**EXHIBIT C**

11/18/11

City of Des Moines Mail - Fwd: Appeal on Khloe a black and white pitbul's case

Ex. C



Herzberg, Karen <kmherzberg@dmgov.org>

## Fwd: Appeal on Khloe a black and white pitbul's case

1 message

Thu, Nov 17, 2011 at 4:47 PM

Rauh, Diane <dirauh@dmgov.org>

To: "Herzberg, Karen M." <KMHerzberg@dmgov.org>, Scott Raudabaugh <saraudabaugh@dmgov.org>, Gena Roby <gmroby@dmgov.org>, Doug Philip <dpphiliph@dmgov.org>

----- Forwarded message -----

From: **Katelyne W** <ksw1992@live.com>

Date: Thu, Nov 17, 2011 at 4:45 PM

Subject: Appeal on Khloe a black and white pitbul's case

To: [dirauh@dmgov.org](mailto:dirauh@dmgov.org)

11/17/11 4:45 pm

I James Gregory Pratt had a hearing on November 7th at 10 am regarding my black and white 2 year old female pitbull Khloe. I would like to Appeal that desicion.

James Gregory Pratt

—  
Diane Rauh  
City Clerk  
City of Des Moines  
[515-283-4209](tel:515-283-4209)

2011 NOV 18 AM 8:33  
CITY OF DES MOINES  
CLERK

**EXHIBIT D**

Ex. D



November 18, 2011

James Pratt  
10 Maple, #240  
Nevada, IA 50201

RE: Appeal of Dangerous Animal Declaration

This is to acknowledge your appeal of the Hearing Officer's decision regarding declaration of Kloe as a "dangerous animal."

Your hearing before the City Council has been scheduled for Monday, December 5, 2011. The meeting starts at 4:30 p.m. **Failure to appear at the scheduled hearing will be deemed as a waiver of your rights to a hearing.** Parking is available on the streets surrounding City Hall. A copy of the Administrative Hearing transcript is enclosed.

If you have any questions regarding this matter, please contact me at 283-4209.

Sincerely,

A handwritten signature in cursive script that reads "Diane Rauh".

Diane Rauh  
City Clerk

DR:kh  
Enc.

cc: Assistant City Attorney  
Sgt Raudabaugh

**EXHIBIT E**



## ADMINISTRATIVE HEARING TRANSCRIPT

November 7, 2011

City v. Pratt

Dangerous Animal

HEARING OFFICER CAMILLE VALLEY: Good morning. It is approximately 10:00 a.m. on Monday, November 7, 2011 and my name is Camille Valley and I'm the Administrative Hearing Officer. We're conducting this hearing this morning at the request of the Des Moines Police Department regarding its declaration of a dangerous dog belonging to a James Pratt. Would the City representative please come to the microphone? Clearly state your name and the title of your position with the City of Des Moines.

SERGEANT SCOTT RAUDABAUGH: Sergeant Scott Raudabaugh. I'm assigned to Animal Control Unit and in the position I'm in I serve as the Chief Humane Officer for the City of Des Moines, Iowa.

HEARING OFFICER CAMILLE VALLEY: Okay. Would you please raise your right hand? Do you solemnly swear or affirm that the testimony you are about to give is the truth, the whole truth and nothing but the truth?

SERGEANT SCOTT RAUDABAUGH: Yes.

HEARING OFFICER CAMILLE VALLEY: Okay. You may proceed.

SERGEANT SCOTT RAUDABAUGH: I'd like to start out by submitting some documents for your review.

HEARING OFFICER CAMILLE VALLEY: Okay. Thank you.

SERGEANT SCOTT RAUDABAUGH: This set of documents, uh, Mr. Pratt arrived a little bit early and asked if he could see the reports. I had a set of copies that he could look at. He'll certainly need to return those to me when we're done, but he was given the opportunity to look through what you are going to look through as well and what I'm going to speak about. I'd like to start out by just kind of going through the documents and just very briefly describing what they are. I've numbered all of the pages at the top, 1 through whatever. There is one supplemental that is not numbered. I got that kind of last minute and so you'll see that when we get to it. Page number 1 is a dangerous animal declaration letter. Page 2 is a document service form in which the document was served on the known residence of Mr. Pratt. Document 3 is also a document service letter in which Mr. Pratt was served personally by myself at the animal shelter. Document 4 is a copy of a definition of a dangerous animal by City Ordinance 18-196. Document 5 is the City Ordinance 18-202 which talks about the procedural practices when a dangerous animal is impounded. Document 6 is, 6, 7, 6 and 7 are the animal incident investigation report in regards to an animal bite that occurred on October 25, 2011. And that's Des Moines Case No. 11-35116. Document 8 and 9 are necropsy reports from Iowa State University that talk about the necropsy and the cause of death of the victim dog. Document 10 is

just basically a document from Iowa State University that talks about a rabies test that was conducted on the deceased dog. Document 11 is a supplemental to 11-35116 and just supplemental information. Likewise, document 12 is the same. Document 13 and 14 are animal incident investigation reports documenting information under Des Moines Case 35117. Likewise, 15 is a supplemental to the 35117. The supplemental right behind that is not numbered. For lack of a better description I will label it 15A. Like I said that was somewhat last minute and I'm adding it to the....

HEARING OFFICER CAMILLE VALLEY: I'm going to physically mark mine at 15A.

SERGEANT SCOTT RAUDABAUGH: Thank you ma'am. Can I proceed?

HEARING OFFICER CAMILLE VALLEY: Yeah, oh yeah.

SERGEANT SCOTT RAUDABAUGH: Sixteen, 17, 18 and 19 are an animal incident investigation report documenting a bite that occurred and is documented under Des Moines Case 11-35118. Document 20 and 21 is what is referred to as a supplemental CIR. It basically documents something in addition to the original report. In this case it is an injured police officer report. Document 22 is a rabies certificate from Mr. Pratt for his dog named Kloe. Document 23 is a breed evaluation sheet that's hooked with or associated with that 11-31528 in which the first time Mr. Pratt's dog was encountered and brought to the City animal shelter and evaluated by the veterinarian and determined to be predominant Pit Bull. Document 24 is a vicious dog breed declaration letter that was served to Mr. Pratt and documented that service was on documents 25 and 26. One it was at his residence and the second one was to him personally at the animal shelter. Document 27 is a document that is completed at the City Clerk's Office in regards to a vicious dog whether by breed or by behavior and that's to license a dog that has been declared vicious. Document 28 is supplemental to that 11-31528. What I'd like to do is just basically go through my vicious, sorry, my dangerous animal declaration letter and which provides a summary of all of these incidences if I could.

HEARING OFFICER CAMILLE VALLEY: Okay.

SERGEANT SCOTT RAUDABAUGH: On October 25, 2011 in an apartment parking lot, complex parking lot, Mr. Pratt's black and white colored female Pit Bull breed dog named Kloe bit and killed another dog when the dog went up to Mr. Pratt's dog sniffing. Mr. Pratt's dog was on a leash held by the person I believe is his mother or mother-in-law. I think she is here and she can clarify that. The other dog was running at large, came up to Mr. Pratt's dog and sniffed Mr. Pratt's dog. I don't believe that to be provocation for Mr. Pratt's dog to bite and pick up and kill the other dog. That was the first incident. Mr. Pratt's dog was impounded for quarantine at the City shelter after that incident. Also on October 25<sup>th</sup> during that bite incident, uh, the owner of the other dog, the dog that was killed, was trying to assist her dog and was bit by Mr. Pratt's dog. Also during that incident a good Samaritan, a neighbor, came over and tried to help and while he was trying to pry the mouth open of Mr. Pratt's dog he ended up catching his finger on one of Mr. Pratt's dog's teeth and tore the skin on his finger. On October 26, 2011, the police were at the apartment complex and somebody holding Mr. Pratt's dog at the time, the dog pulled away from that person and then went over and bit a police officer. All of these things together caused

me to have concern that what's going to happen in the future and I believe that this dog is showing a vicious propensity and has a nature to bite. I think a dog walking up to another dog is not provocation to cause an immediate attack. And in this case we've got another dog that was killed by Mr. Pratt's dog. We've got the dog biting the other owner when he's trying to rescue that person's dog. We've got it biting a police officer when pulling away from somebody and biting a police officer when they are there on a prior incident. I think we've got, this is a dog that shows a pattern or a propensity to bite and I certainly don't enjoy having to do this but it is necessary to protect future human victims and animal victims from Mr. Pratt's dog.

HEARING OFFICER CAMILLE VALLEY: Thank you. Mr. Pratt, would you please come to the microphone and clearly state your name for the record?

JAMES GREGORY PRATT: James Gregory Pratt.

HEARING OFFICER CAMILLE VALLEY: And would you please raise your right hand? Do you solemnly swear or affirm the testimony you are about to give is the truth, the whole truth and nothing but the truth?

JAMES GREGORY PRATT: Yes ma'am.

HEARING OFFICER CAMILLE VALLEY: Okay. You may proceed and share with me what you think is relevant.

JAMES GREGORY PRATT: Okay. What is relevant, uhm, on this incident on the 25<sup>th</sup>, my dog Kloe was being taken outside to go the bathroom by my mom, Bonnie and she is right there. Previously when I got it out of quarantine I had to sign the initial papers that I would abide by all the City ordinances in the code while having her because she was deemed a dangerous dog or vicious dog.

HEARING OFFICER CAMILLE VALLEY: Okay. Now just, I know nothing about these cases until I hear them so I'm presuming you are talking about the City's Exhibit 27?

JAMES GREGORY PRATT: When I licensed her here at City Hall, they made me sign a piece of paper and I'll show you, I'll tell you.

HEARING OFFICER CAMILLE VALLEY: Number 27 looks like it may be a...

JAMES GREGORY PRATT: It has my initialing on it.

HEARING OFFICER CAMILLE VALLEY: Do you have a copy of the City's exhibits?

JAMES GREGORY PRATT: Uhm, I have everything that he just read off, he showed me. It would be 27.

HEARING OFFICER CAMILLE VALLEY: Okay.

JAMES GREGORY PRATT: I have to, she has to be on a six-foot leash at all times outside of my place. She has to be with an adult. She has to be securely locked up in a kennel and I have to have liability coverage on her. I have all those. My mom was doing all that when this incident happened. Now I ran, a dog walking up and sniffing another dog doesn't, shouldn't provoke violence, but that's not what happened. My dog was on a leash and the other lady's dog was the aggressor. That dog was very aggressive and it tried biting me multiple times. And when that dog came up and it was taunting my dog the owner of the dog kicked her dog. That's where she got the bite from. She kicked her own dog.

HEARING OFFICER CAMILLE VALLEY: Were you there at the time also?

JAMES GREGORY PRATT: No ma'am.

HEARING OFFICER CAMILLE VALLEY: Okay so can I have you testify as to the facts that you know rather than what you've heard from others?

JAMES GREGORY PRATT: Okay. Uhm, the incident when the police officer was bit, uhm, I was not in my room. I was not at my place. My dog was there. The cops were called there under a false report. I was not in the room and the police officers banged on my door, kicked my door open and when they went in my dog bit the officer. I mean it wasn't like she was outside or she would just randomly bite someone. She was inside of her home and they had no reason or probable cause to be in my room or in my place with no warrant.

HEARING OFFICER CAMILLE VALLEY: Okay. So you're saying they kicked your door in and then your dog was only responding to that incident.

JAMES GREGORY PRATT: They went in there unlawfully without a warrant, under false pretenses under a false report and that's the incident that happened.

HEARING OFFICER CAMILLE VALLEY: Were you there at that time also?

JAMES GREGORY PRATT: I came walking up the steps just as this went on.

HEARING OFFICER CAMILLE VALLEY: So you saw that all transpire?

JAMES GREGORY PRATT: Right. And the officers stopped, the other officers, there was three officers there. The one stopped me and he cuffed me and searched me. And I'm like what are you guys doing in my room? What the heck is going on? What are you guys doing? We are waiting for animal rescue league. Why? Why are you in my room to begin with? What, what, you know. I didn't know what was going on and they just took my dog and left. They didn't take anything. What they were looking for wasn't there. They didn't have a warrant or anything. They just took my dog and left. I do have insurance, liability, \$300,000 liability insurance for her.

HEARING OFFICER CAMILLE VALLEY: Okay from what I'm hearing though is, Officer Raudabaugh didn't raise the issue that it wasn't that you didn't have insurance. I mean I did not

hear that as being one of the complaints that has brought this about. From what I heard it's more not having the dog under control and its propensity to bite.

JAMES GREGORY PRATT: Well honestly ma'am, uhm, I can only honestly say that I know about the October 25<sup>th</sup> incident cause I was there for that one. I wasn't there, excuse me, I wasn't there for the October 25<sup>th</sup>, I was there for the September 26<sup>th</sup>. So my mom can speak with you more because she was the one that was there in that incident. So I guess that's all, but I do have, I brought pictures with me to show you.

HEARING OFFICER CAMILLE VALLEY: You can offer anything you'd like me to consider. Like I say I know nothing about these cases until I hear them.

JAMES GREGORY PRATT: She is not a vicious dog. She's just...

HEARING OFFICER CAMILLE VALLEY: Okay, the only thing, we tape these so if you'd go back over to the microphone to talk I'd sure appreciate it. Thank you. Okay, Mr. Pratt has just handed me three sheets of paper and on it we have a total of eight pictures. I'm going to enter these into the record as Pratt Exhibit A.

JAMES GREGORY PRATT: And as you can see in some of the, that's not all the pictures I have of her. It's all the ones I could get, I mean, on such short notice. She is a very well family oriented dog. And my daughter is 17 months old and she'll sit on her back and pull her ears until she whines and she'll turn around and lick her face. I mean, she has never bit, snipped any of us never one time. She's very loving, very personable. She's like my child and for someone to say she's a vicious dog is kind of offensive really.

HEARING OFFICER CAMILLE VALLEY: Anything else you'd like to say?

JAMES GREGORY PRATT: No.

HEARING OFFICER CAMILLE VALLEY: Okay. So if your mother would like to come up and state her name for the record if she's like to testify.

BONNIE KENNEDY: Bonnie Kennedy.

HEARING OFFICER CAMILLE VALLEY: Bonnie Kennedy, okay.

BONNIE KENNEDY: Uhm,

HEARING OFFICER CAMILLE VALLEY: Just a minute. I'm just writing down your name.

BONNIE KENNEDY: Okay.

HEARING OFFICER CAMILLE VALLEY: Okay. If you'd raise your right hand. Do you solemnly swear or affirm the testimony you are about to give is the truth, the whole truth and nothing but the truth?

BONNIE KENNEDY: I do.

HEARING OFFICER CAMILLE VALLEY: Okay. You may proceed.

BONNIE KENNEDY: Uhm, I was there on the incident of, it would have been October 25<sup>th</sup>. Approximately 3:00 I had taken Kloe out to go to the restroom. We had walked around the building and to the front side, while the side of the building so she could go to the bathroom. Walking back the lady that had the two dogs come running around the corner and there is a very strong stipulation at that motel that every animal that is in that motel which a lot of people have a lot of animals there—dogs, cats, whatever it may be. They have to be on leashes. I don't care if you've lived there 10 years, 5 years. Every animal, and Rick had also stated that to one of the officers, yes all animals have to be on leashes. The one dog came up to smell Kloe and I said come on Kloe. And she kinda turned around like she didn't want the dog to touch her. And we went to walk away and the dog come up to her again. Uhm, at that point the dog's owner kicked her, her own dog, which at that point I got bit by her dog. Uhm, I feel that Kloe was provoked at that point because of the fact that if this owner of the other dog would have just walked over, picked her dog up and turned around and walked away, we would not be here today at all. And Kloe is not an aggressive dog. She has territorial issues. Her room that they lived in. Her home is her territorial issue. She is not territorial outside. She plays with my grandson. She plays with kids and she's never bit no children period. He has uprooted, my son has uprooted Polk County and moved back to the Nevada area because of this. And I don't agree with the fact that they list her just because she is a Pit Bull. That she falls in the same category as other dogs that has been named dangerous and vicious. I mean when I'm guessing that at the time when the officer walked into James' room that is her territory. I mean if you are going to come into that door without knocking and the dog doesn't know you, you will get bit. It doesn't matter if she's a Pit Bull or not. That's with any homeowner dog, to protect their home. It doesn't have to be a Pit Bull. It could be a, like the lady's dogs. Those dogs don't know me. If I was to walk into this lady's room, I'm bound to get bit. It doesn't, she just didn't bite him because she's a Pit Bull. She's protecting her room. That was her home. Yes I do feel sorry for how it ended up with the owner of the other dog. That got out of control. And as far as I was to understand, she did not receive a bite from Kloe. It's a scratch and it wasn't from Kloe. I mean if, uhm, you want to look at the report where the officer got bit he had a puncture wound. I got bit by a dog. I have a puncture wound. Now she's got a scrape. That's not a bite. There's no evidence in her that's come to my attention that she has any medical records of going to the hospital like I do. I've been to the ER twice because of this animal bite.

HEARING OFFICER CAMILLE VALLEY: Are your medical records in here I didn't remember. Do you want to enter those into the record?

BONNIE KENNEDY: Inaudible.

HEARING OFFICER CAMILLE VALLEY: Wait till you, please wait until you get back to the microphone.

BONNIE KENNEDY: In fact the doctor has listed it as a provoked dog bite.

HEARING OFFICER CAMILLE VALLEY: You're saying your bite was, your puncture wound was caused by the victim dog, is that...

BONNIE KENNEDY: Yes. You will find this...

HEARING OFFICER CAMILLE VALLEY: If you'll wait to talk when you're back at the microphone I'd appreciate it. So if you want to give it to me or if you want to hang onto it until you finish testifying. Okay, you just handed me five pages it looks like, regarding Bonnie J. Kennedy as a patient of Ryan Coppola, D.O. regarding an animal bite on October 27<sup>th</sup>. Okay now if you'd want to, did you want to add additional information?

BONNIE KENNEDY: According to somewhere in these documents there is a doctor's report, can you tell is it this one?

HEARING OFFICER CAMILLE VALLEY: In the City's exhibits? Are you referring to the City's exhibits?

BONNIE KENNEDY: Yeah.

UNIDENTIFIED PERSON: Inaudible.

HEARING OFFICER CAMILLE VALLEY: Okay. We record so only one person can testify at a time.

BONNIE KENNEDY: I'm trying to find what he's talking about.

HEARING OFFICER CAMILLE VALLEY: But are you referring to an exhibit in the City's exhibits?

BONNIE KENNEDY: Yeah, well, can I read this? It's on exhibit 11. It says on this date Kennedy, Bonnie, did go to Broadlawns to have her bite looked at. I spoke to the doctor who first wanted to make sure the bite had been reported. Secondly I asked him if it appears the bite was from a large or small dog. The doctor indicated he believed the bites on Kennedy's hands were from a smaller dog as a larger dog would have done more damage, more crushing type of injuries as well as punctures. There are no crushing injuries to Kennedy's hands.

HEARING OFFICER CAMILLE VALLEY: What was, I guess I'm not, what was the victim? What kind of dog was the victim dog? Was it a....

BONNIE KENNEDY: I would say it was a small, it looked like not a Yorkie but it probably stood about this tall.

HEARING OFFICER CAMILLE VALLEY: About a foot tall at most.

BONNIE KENNEDY: Well, it says, I guess it is a Yorkie cause it says that test results of a Yorkie came back negative for rabies. Kennedy was contacted and advised of this.

HEARING OFFICER CAMILLE VALLEY: Okay.

BONNIE KENNEDY: I tried then to contact the owner of the dog. Smith's Glendale homeowner. No one answered her motel room. I was made aware by Romine, Jody who works at the front desk for ARL to see that Smith would be in on 04/11 to pay for the remains of her dog and to be advised that the dog rabies results came back negative. At the point when the ARL came and the officers were there, uhm, I was asked did Kloe have her rabies. Yes she had her tags on. She had all of her paperwork. Glen had been asked, the other owner, had your dog had rabies shots. At that point she proceeded to tell them she had gotten the dog from somebody else, but yes she had, but she showed no proof.

HEARING OFFICER CAMILLE VALLEY: Okay but you are going onto the victim's dog.

BONNIE KENNEDY: Right.

HEARING OFFICER CAMILLE VALLEY: Today our issue is strictly looking at the City's declaration of Mr. Pratt's dog as a dangerous animal. So what I'm looking at today is, you know, whether or not there is, so if we can stay on point.

BONNIE KENNEDY: Uhm, like I said, uhm, I've been around Kloe for the last year and one-half since James has had her. I've, she's never bit anybody that, ever, unless, like I said, came into the motel room, ya know. All dogs are different. Okay, like I said before, a Sheppard, a Poodle. You enter somebody's home unattended and not be welcome there. It's a guard dog. It could be any dog that got bit that day. It wasn't necessarily because she's a Pit Bull.

HEARING OFFICER CAMILLE VALLEY: Have you ever known the dog to bite before?

BONNIE KENNEDY: No. No.

HEARING OFFICER CAMILLE VALLEY: Alright. Thank you. Mr. Pratt, did you want to add anything further? You've got to come to the microphone if you do. Does she want to speak? Okay. Come to the microphone and clearly state your name for the record.

TERI PRATT: I'm Teri Pratt. I'm James' wife.

HEARING OFFICER CAMILLE VALLEY: "Terri" or...

TERI PRATT: "Teri."

HEARING OFFICER CAMILLE VALLEY: Okay. Would you please raise your right hand? Do you solemnly swear or affirm the testimony you are about to give is the truth, the whole truth and nothing but the truth?



TERI PRATT: I do.

HEARING OFFICER CAMILLE VALLEY: Okay. You may proceed.

TERI PRATT: I'd just like to say we've had this dog since she was six months old. She is our family dog. We've taken her to parades and she's been around huge amounts of people and she's not an aggressive dog. She's not a mean dog. She's a protective dog and a family dog. We have a baby girl and we have a Maltese dog that weights 5-1/2 pounds and that's her best friend. I've never once been concerned that this dog would hurt my child or my other dog. I don't really have too much more to say than that. I'm just trying to show that this is a good animal. This is not an animal that needs to be destroyed.

HEARING OFFICER CAMILLE VALLEY: Okay. Thank you. Hi. State your name for the record.

CRAIG COLLINS: Hi. My name is Craig Collins.

HEARING OFFICER CAMILLE VALLEY: Craig Collins?

CRAIG COLLINS: Yes ma'am.

HEARING OFFICER CAMILLE VALLEY: "C" or "K"?

CRAIG COLLINS: "C".

HEARING OFFICER CAMILLE VALLEY: "raig".

CRAIG COLLINS: Correct.

HEARING OFFICER CAMILLE VALLEY: "Collins"?

CRAIG COLLINS: Correct.

HEARING OFFICER CAMILLE VALLEY: And your relationship?

CRAIG COLLINS: I am a cousin of the family.

HEARING OFFICER CAMILLE VALLEY: You are a cousin of Mr. Pratt?

CRAIG COLLINS: Yes.

HEARING OFFICER CAMILLE VALLEY: Okay. Please raise your right hand. Do you solemnly swear or affirm the testimony you are about to give is the truth, the whole truth and nothing but the truth?

CRAIG COLLINS: I do.

HEARING OFFICER CAMILLE VALLEY: Okay. Thank you.

CRAIG COLLINS: I wasn't there or around for either of these incidences. I can't speak about that, but what I can speak on is the dog's character and personality traits. I gave him the dog. I bred it from some other dogs I had. Pit Bulls obviously. It is a Pit Bull dog. Their temperaments as well as this dog and any other dog that came from those litters were, they're all family dogs. They are all placed in families. That dog was perfect. Like they said they have a daughter and little dogs. It has never bit or nipped or shown any aggressive thing like that. I think this is just a fluke incident with that other dog maybe being aggressive or something. I wasn't there for that so I can't speak on that but as for its temperament and family dealings the dog is a great dog as well as all the other dogs that were with it.

HEARING OFFICER CAMILLE VALLEY: Does the City have anything further they want to add?

SERGEANT SCOTT RAUDABAUGH: I just want to submit another document. A copy of City Ordinance 18-41 and 18-59 which talk about the next level below dangerous. It's called the vicious dog. Mr. Pratt made mention of vicious dog throughout this proceeding and so for the record I'd like to submit a copy of that ordinance and then give him a copy as well that he could look at.

HEARING OFFICER CAMILLE VALLEY: Has the dog been declared a vicious animal or vicious dog?

SERGEANT SCOTT RAUDABAUGH: On the first incident it was declared vicious by breed which it met the criteria. Yes it already was. He's made mention of kind of going back and forth being dangerous and vicious and just for the record I would like to submit copies of that ordinance as well and let him look at a copy.

HEARING OFFICER CAMILLE VALLEY: Okay. Alright. Okay, I'm going to add this in and mark it as City's Exhibit 29.

SERGEANT SCOTT RAUDABAUGH: I was just going to mention that I didn't number it. It was kinda after the fact in case that issue was mentioned during the hearing. Thank you.

HEARING OFFICER CAMILLE VALLEY: So did you have any other rebuttals you wanted to make at all?

SERGEANT SCOTT RAUDABAUGH: No ma'am. I think the reports will speak for themselves. I think they address many of the comments that were made by Mr. Pratt and his family today, certainly contradicting in some cases. I think the reports will speak for themselves.

HEARING OFFICER CAMILLE VALLEY: Okay. Thank you. I forgot to make note for the record that Ms. Kennedy's hospital documents I am going to enter those as Pratt Exhibit B. Also as I mentioned earlier, I know nothing about these cases until I hear them so I will deliberate on

the testimony I've heard and the evidence I've received and develop a final written ruling which I will submit to the City Clerk's Office. Then she'll make sure you get a copy, or I guess it is delivered by the Police Department in the same manner as the notice.

JAMES GREGORY PRATT: Inaudible.

HEARING OFFICER CAMILLE VALLEY: This is Mr. Pratt again for the record.

JAMES GREGORY PRATT: Ma'am. It says the definitions of, to prove this dog vicious or dangerous and it has a list of nine...

HEARING OFFICER CAMILLE VALLEY: Are you referring to the exhibit that the officer just presented that I've labels at 29?

JAMES GREGORY PRATT: Yes ma'am. Yes. It is the definitions.

HEARING OFFICER CAMILLE VALLEY: Okay.

JAMES GREGORY PRATT: And it says any dog which has attacked a human being or domestic animal one or more times, without provocation. My honest opinion is, I mean if someone beats down your door, whether it's a police officer or burglar, I think that a dog is going to protect their home. Two, it says down here, the Pit Bull breed, the American Staffordshire terrier, American Pit Bull. They're just naturally, these are automatically deemed vicious and dangerous because of their breed. I don't believe my dog should be put to sleep just because of the kind of dog she is. She is, in the City ordinance code on the first report that he gave you, there is a list of reasons why your dog should be deemed vicious or dangerous and she doesn't meet any of them. I mean, the report, she was on a leash when this happened. She was provoked by another dog that was being aggressive.

HEARING OFFICER CAMILLE VALLEY: Okay. Are you referring to something that Officer Raudabaugh had submitted into evidence earlier?

JAMES GREGORY PRATT: His first, the first report on the second or third page.

HEARING OFFICER CAMILLE VALLEY: The definitions exhibit 4, is that what you are referring to?

JAMES GREGORY PRATT: Yes.

HEARING OFFICER CAMILLE VALLEY: Okay and so now what were you saying in regards to that?

JAMES GREGORY PRATT: Uhm, it says any dog that is off a leash and unprovoked. I think that was the only one that really came close to this situation. She was on her leash and in her home and she was provoked. Her door was kicked down and the other one was an aggressive dog that bit my mom. So I believe that's provoked.

HEARING OFFICER CAMILLE VALLEY: Okay. Well that's when I deliberate on everything I look at what the law states and go through and make sure all the elements are there and rule accordingly. So I do give a lot of thought to what is said and make sure....

JAMES GREGORY PRATT: Okay. Will you do that today?

HEARING OFFICER CAMILLE VALLEY: No. I take, I give it thought. I mean it is not something to be rushed. It is a very serious declaration that the City's made and we don't want to take it lightly.

JAMES GREGORY PRATT: Thank you ma'am.

HEARING OFFICER CAMILLE VALLEY: I will deliberate on everything I've heard and everything that's been entered into the record before I make my decision. So I will develop that written ruling. It should be written within the week and served to you.

JAMES GREGORY PRATT: You know I live in Story County now.

HEARING OFFICER CAMILLE VALLEY: Oh you do? Okay.

JAMES GREGORY PRATT: Yes.

HEARING OFFICER CAMILLE VALLEY: I know the code specifies, Officer Raudabaugh do you want to comment?

SERGEANT SCOTT RAUDABAUGH: No, what I'll do in that regards ma'am is get Mr. Pratt's current address and we'll get it served one way or another. But we'll get it served to him or at his property, one or the other. I'll get that after the hearing, his current address. I just wanted to add one more comment about the vicious dog question. Just for the record the first incident when his dog was declared vicious he had the opportunity to file an appeal if he chose to but he did not so that is not, should not be an issue to be addressed at this point. It is rather it is dangerous or not. I just want to make mention of that for the record from my perspective. Thank you.

HEARING OFFICER CAMILLE VALLEY: Okay. Thank you. Okay so like I said I will submit my ruling to the City Clerk's Office and then they will pass it over to the Police Department so they can make sure and get it to you as soon as possible. I thank you very much for your time and testimony this morning. This case is adjourned.

I, Renae Lampkin, certify that I transcribed the minutes of the November 7, 2011 Administrative Hearing pertaining to a dangerous dog owned by James Gregory Pratt.

Renae Lampkin