



DECLARATION OF SUSPECTED ELDER FINANCIAL ABUSE

1. My name is: Andrea Higgins

My badge number is: 20

My office address and telephone number(s) are:

400 County Center, 3rd Floor
Redwood City, CA 94063
(650) 363-4796

2. I am a duly sworn peace officer presently employed by the San Mateo County District Attorney's Office, in the County of San Mateo, in the State of California.

3. On [REDACTED], I personally interviewed [REDACTED] at 11:15AM at [REDACTED]. The victim currently resides at that same location, telephone number [REDACTED].

4. There is a probable cause to believe that:

(a) [REDACTED], is substantially unable to manage his financial resources or to resist fraud or undue influence, and

(b) There exists a significant danger the victim will lose all or a portion of his property as a result of fraud or misrepresentations or the mental incapacity of the victim, and

(c) There is a probable cause to believe that a crime is being committed against the victim, and

(d) The crime is connected to the victim's inability to manage his financial resources or to resist fraud or undue influence, and

(e) The victim suffers from that inability as a result of deficits in one or more of the following mental functions:

INSTRUCTIONS TO PEACE OFFICER: CHECK ALL BOXES THAT APPLY:

[A] ALERTNESS AND ATTENTION

1. Levels of arousal. (Lethargic, responds only to vigorous and persistent stimulation, stupor.)

Extremely limited attention span.

2. Orientation.

██████████ was oriented to person, date, time, and location. However he had difficulty understanding the nature of his situation vis a vis his properties. He would focus on the situation briefly but then veer off on a tangent without being able to return to the original conversation.

3. Ability to attend and concentrate.

██████████ was unable to maintain a current train of thought more than about 45 seconds. I was able to re-direct ██████████ back onto the correct topic with significant effort, but he would rapidly lose the topic again.

[B] INFORMATION PROCESSING
Ability to:

1. Remember, i.e., short- and long-term memory, immediate recall.

██████████ was able to remember things from his near and distant past, but was unable to recall being treated at Kaiser in ██████████ at the beginning of ██████████, ██████████. By the end of our 25 minute conversation, ██████████ was unable to recall having asked me for assistance with mobility accommodations at the beginning of our talk.

2. Understand and communicate either verbally or otherwise.

██████████ is generally able to make himself understood, however he found himself frequently searching for the correct words to use when describing incidents in the past.

3. Recognize familiar objects and persons.

██████████ recognized his social worker, who accompanied me to the interview, and he recognized his suspected abuser.

4. Understand and appreciate quantities. **Not tested.**

5. Reason using abstract concepts.

██████████ was unable to comprehend compound sentences or abstract ideas.

6. Plan, organize, and carry out actions (assuming physical ability) in one's own rational self-interest.

██████████ is currently not physically capable of carrying out tasks on his own, nor does he seem to possess the cognition needed to do more than the most rudimentary tasks.

7. Reason logically.

There were several instances where ██████████ spoke logically, however he also spoke significantly of his pervasive paranoid delusions of conspiracies by the State of California, Governor Jerry Brown, and the City of ██████████.

[C] THOUGHT DISORDERS

1. Severely disorganized thinking. (Rambling, nonsensical, incoherent, or nonlinear thinking.)
2. Hallucinations. (Auditory, visual, olfactory.) **None witnessed or reported.**
3. Delusions. (Demonstrably false belief maintained without or against reason or evidence.)
4. Uncontrollable or intrusive thoughts, compulsive behavior.

[D] ABILITY TO MODULATE MOOD AND AFFECT

Pervasive and persistent or recurrent emotional state which appears severely inappropriate in degree to the patient's circumstance. Encircle the inappropriate mood(s).

Anger
Anxiety
Fear
Panic

Euphoria
Depression
Hopelessness
Despair

Helplessness
Apathy
Indifference

The property at risk is identified as, but not limited to, the following:

Real Property located at: [REDACTED]

Real Property located at: [REDACTED]

Real Property located at: [REDACTED]

Real Property located at: [REDACTED]

A criminal investigation will be commenced against:

[REDACTED]

for alleged financial abuse.

BLOCKS 1, 2, AND 3 MUST BE CHECKED IN ORDER FOR THIS DECLARATION TO BE VALID:

- 1. I am a peace officer in the county identified above.
- 2. I have consulted concerning this case with a supervisor in the county's adult protective services agency who has signed below, indicating that he or she concurs that, based on the information I provided to him or her, or based on information he or she obtained independently, this declaration is warranted under the circumstances.
- 3. I have consulted concerning this case with an individual qualified to perform a mental status examination.

Andrew Higgins

Signature of Declarant Peace Officer

Date

Signature of Concurring Adult Protective Services Supervisor

Date