

**San Francisco Police Department
INCIDENT REPORT**

141089226

Report Type: Initial

INCIDENT	Incident Number 141-089-226	Occurrence From Date / Time 12/27/2014 15:45	Occurrence To Date / Time	Reported Date / Time 12/27/2014 16:50	CAD Number 143612275
	Type of incident PRESCRIPTION, FORGE OR ALTER (11368 H&S) 16720				
	Location of Occurrence: 4129 18TH ST				
	At Intersection with/Premise Type COLLINGWOOD ST / DRUG STORE				
	District MISSION				
Confidential Report? <input type="checkbox"/>	Arrest Made? <input type="checkbox"/>	Suspect Known? <input type="checkbox"/>	Suspect Unknown? <input checked="" type="checkbox"/>	Non-Suspect Incident? <input type="checkbox"/>	Domestic Violence? <input type="checkbox"/>
Location Sent / On View: 4129 18TH ST			At Intersection with COLLINGWOOD ST		
Reporting Unit 3D1D			Reporting District MISSION		
Crime and Clearance Status 0	Reported to Bureau	Name	Star	Date/ Time	Elder Victim <input type="checkbox"/>
					Gang Related? <input type="checkbox"/>
					Juvenile Subject? <input type="checkbox"/>
					Prejudice Based? <input type="checkbox"/>

141089226

OFFICIAL CREATION	I declare under penalty of perjury, this report of <u>5</u> pages is true and correct, based on my personal knowledge, or is based on information and belief following an investigation of the events and parties involved.				
	PROP 115 CERTIFIED Post Training				
	Reporting Officer BUSALACCHI, FRANK E	Star 4330	Station Mission Station	Watch 1600-0200	Date 12/28/14 00:01
	Reviewing Officer PENA, NICOLAS A	Star 2361	Station Mission Station	Watch 1500-0100	Date 12/28/14 00:03
	OIC JOHNSON, THOMAS J	Star 603	Station Mission Station	Watch 3	Date 12/28/14 00:06
Related Case -	Related Case -	Re-assigned to Copies to 5N200	Assigned to 5N200 Add'l Copies CO D SIT/1	Assigned by FB 4330	

VICTIM	Code V 1	Name (Last, First Middle) MARON, DAISY	Alias	Email No Email
	Day Phone (510) 247-6300	Type Work	Home Address 19765 BUREN PLACE	City CASTRO VALLEY
	Night Phone (510) 537-8480	Type Cell	Work Address	City State Zip Code
	DOB 10/13/70	Age 44	DOB Unk. <input type="checkbox"/>	or age between and
	Confidential Person <input type="checkbox"/>	Violent Crime Notification <input type="checkbox"/>	293 PC Notification <input type="checkbox"/>	Star 4330
		Follow-up Form YES <input checked="" type="checkbox"/>	Statement YES <input checked="" type="checkbox"/>	Relationship to Subject STRANGER/NONE
School (if Juvenile)		Injury/Treatment	Other Information/If Interpreter Needed Specify Language DR. FOR SUTTER HEALTH MEDICAL GROUP	

R/WITNESSES	Code R/W 1	Name (Last, First Middle) MENDOZA, MARA MELISSA	Alias	Email No Email
	Day Phone (415) 551-7837	Type Work	Home Address	City State Zip Code
	Night Phone	Type	Work Address 4129 18TH ST	City SAN FRANCISCO
	DOB 06/10/86	Age 28	DOB Unk. <input type="checkbox"/>	or age between and
	Confidential Person <input type="checkbox"/>	Violent Crime Notification <input type="checkbox"/>	293 PC Notification <input type="checkbox"/>	Star 4330
		Follow-up Form YES <input checked="" type="checkbox"/>	Statement YES <input checked="" type="checkbox"/>	Relationship to Subject STRANGER/NONE
School (if Juvenile)		Injury/Treatment	Other Information/If Interpreter Needed Specify Language EMPLOYEE AT WALGREEN'S PHARMACY	

Busalacchi Exhibit

No. 4

9/28/2021 It

CCSF v. Purdue Pharma,
et al. 3:18-CV-7591

WAG-MDL-02844

Admitted: 06/17/2022

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HIGHLY CONFIDENTIAL

SF-Opioids02314004
WAG-MDL-02844.00001

San Francisco Police Department

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R / 2 W I T N E S S	Code R/W 2	Name (Last, First Middle) MACDONALD, ANDREW				Alias				Email andrew.macdonald@walgreens.com				
	Day Phone (415) 551-7837		Type Work	Home Address				City		State		Zip Code		
	Night Phone		Type	Work Address 4129 18TH ST				City SAN FRANCISCO		State CA		Zip Code 94114-		
	DOB 01/30/81	/ Age 33	DOB Unk. <input type="checkbox"/>	or age between and		Race W	Sex M	Height 5'9	Weight 155	Hair Color RED	Eye Color BRO	ID Type DL CA	Jurisd. D6266122	ID No.
	Confidential Person <input type="checkbox"/>	Violent Crime Notification <input type="checkbox"/>	293 PC Notification <input type="checkbox"/>		Star 4330		Follow-up Form YES <input checked="" type="checkbox"/>		Statement YES <input checked="" type="checkbox"/>		Relationship to Subject STRANGER/NONE			
	School (if Juvenile)			Injury/Treatment				Other Information/If Interpreter Needed Specify Language MANAGER AT WALGREEN'S PHARMACY						

S U S P E C T	Code S 1	Name (Last, First Middle) NEAL, RYAN				Alias				Email			
	Day Phone (000) 000-0000		Type Unknown	Home Address				City		State		Zip Code	
	Night Phone		Type	Work Address				City		State		Zip Code	
	DOB Unknown <input type="checkbox"/>	Date of Birth 07/13/90	Age 24	or age between and		Race B	Sex M	Height 5'5	Weight 150	Hair Color UNK	Eye Color UNK		
	SFNO	J/D# (if Juvi)		ID Type/Jurisdiction/Number			ID Type/Jurisdiction/Number			ID Type/Jurisdiction/Number			
	Booking Charge(s)						Booking Location						
	Warrant #		Court#		Action#		Dept#		Enroute to				
	Warrant Violation(s)								Bail (\$)				
	Citation#		Violation(s)				Appear Date/time		Location of Appearance				
	<input type="checkbox"/> CA Form Booked Copy Attached		Mirandized: Star <input type="checkbox"/>		Date Time		CWB Check		Star				
	Book/Cite Approval		Star		Mass Arrest Code		M X-Rays <input type="checkbox"/>		School (if Juvenile)		Statement <input type="checkbox"/>		
	Other Information: Citation/Warrant/Booking Charge(s)/Missing Person-Subject Description; Scars, Marks, Tattoos LSW: RED HOODIE, DARK JEANS												

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141089226

S U S P E C T	Code S 2	Name (Last, First Middle) UNKNOWN, UNKNOWN		Alias		Email			
	Day Phone (510) 359-1460		Type Cell	Home Address		City		State	Zip Code
	Night Phone		Type	Work Address		City		State	Zip Code
	DOB Unknown <input checked="" type="checkbox"/>	Date of Birth	Age	or age between and		Race U	Sex F	Height	Weight
	Hair Color UNK		Eye Color UNK						
	SFNO	J/D# (if Juv)	ID Type/Jurisdiction/Number		ID Type/Jurisdiction/Number		ID Type/Jurisdiction/Number		
	Booking Charge(s)					Booking Location			
	Warrant #	Court#	Action#	Dept#		Enroute to			
	Warrant Violation(s)					Bail (\$)			
	Citation#	Violation(s)			Appear Date/time		Location of Appearance		
<input type="checkbox"/> CA Form Booked Copy Attached		Mirandized: Star <input type="checkbox"/>		Date Time		CWB Check		Star	
Book/Cite Approval	Star	Mass Arrest Code		<input type="checkbox"/> M X-Rays		School (if Juvenile)		Statement <input type="checkbox"/>	
Other Information: Citation/Warrant/Booking Charge(s)/Missing Person-Subject Description; Scars, Marks, Tattoos PERSON WHO ANSWERED PHONE AND CLAIMED TO BE VICTIM.									

P R O P E R T Y	Code/No EVD 1	Item Description COPIES OF PRESCRIPTIONS			Brand		Model	
	Serial No.	Gun Make	Caliber	Color WHI	Narcotics Lab No.	Quantity 3	Value TBD	
	Seized by (Star) 4330		From Where SCENE					
	Additional Description/Identifying Numbers Prescriptions for Hydrocodone/Acetaminophen, Alprazolam, and Amoxicillin.							

P R O P E R T Y	Code/No EVD 2	Item Description COPY OF WALGREEN'S COMPUTER QUERY			Brand		Model	
	Serial No.	Gun Make	Caliber	Color WHI	Narcotics Lab No.	Quantity 1	Value TBD	
	Seized by (Star) 4330		From Where SCENE					
	Additional Description/Identifying Numbers Walgreen's computer query printout verifying Dr. Maron's information.							

P R O P E R T Y	Code/No EVD 3	Item Description PROPERTY RECEIPT			Brand		Model	
	Serial No.	Gun Make	Caliber	Color WHI	Narcotics Lab No.	Quantity 1	Value TBD	
	Seized by (Star) 4330		From Where SCENE					
	Additional Description/Identifying Numbers Property Receipt for Walgreen's computer query copy and copies of prescriptions.							

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HIGHLY CONFIDENTIAL

SF-Opioids02314006
WAG-MDL-02844.00003

NARRATIVE

On Saturday, 12/27/2014, at approximately 1651 hours, I responded to the Walgreen's pharmacy located at 4129 18th Street in regards to someone trying to use a fraudulent prescription.

Upon arrival, I met with (RW1) Mendoza who told me the following:

Mendoza told me on Saturday, 12/27/2014, at approximately 1545 hours, (S1) Ryan Neal came into Walgreen's and provided her with (E1) three prescriptions to fill. Mendoza told Neal he could use insurance or he would have to pay \$136.00 for the prescriptions. Neal said he did not have insurance but would pay cash. Mendoza said Neal asked her if she had Promethazine with Codeine and specifically asked for the brand name "High Tech." Mendoza told Neal she was not sure so he did not leave a fourth prescription with her. Mendoza asked Neal for his identification to verify he matched the name on the prescription. Neal provided Mendoza with a California driver's license (license #D5911009) which matched the name on the prescription. (Neal, Ryan Dob: 07/13/1990) Neal said he would return to pick up the prescriptions and left Walgreen's.

Mendoza informed (RW2) Macdonald, the Walgreen's manager, that she would verify the prescription with the prescribing doctor, (V1) Dr. Maron, who was listed on the prescription. Mendoza said Macdonald ran a computer query through the Walgreen's database to verify Dr. Maron's information and the phone number listed on the prescriptions. The phone number listed on the prescriptions did not match the actual phone numbers listed for Dr. Maron in the Walgreen's database. Mendoza phoned the telephone number at the top of the prescriptions ((510) 359-1460) given to her by Neal and a (S2) female voice answered the phone. Mendoza said it was "weird" that someone answered the phone because doctors don't usually answer the phone on Saturday. Mendoza said the female on the phone claimed to be Dr. Maron but, "seemed suspicious" because she did not answer Mendoza's questions. Mendoza said the female hung the phone up and Mendoza was unable to contact her again when she called back. Mendoza said Macdonald informed her not to fill the prescriptions because he believed they were fraudulent.

Mendoza said Neal returned to Walgreen's at approximately 1630 hours and she informed him that she would not fill his prescriptions because the prescription was believed to be fraudulent. Mendoza said Neal left Walgreen's on foot in an unknown direction.

I spoke with Macdonald who told me the following:

Macdonald told me he observed the prescriptions that Neal left with Mendoza. Macdonald said he noticed the prescriptions did not have any serial numbers on them which are required to be on prescriptions. Macdonald said prescriptions usually have fax numbers on them but these did not. Macdonald told Mendoza to phone the number on the prescription in order to verify Neal's prescription with Dr. Maron while he conducted a computer query to verify Dr. Maron's information through the Walgreen's data base. Macdonald observed there was a note in the Walgreen's computer database which stated that the phone number on the prescription was not a legitimate phone number for Dr. Maron. Macdonald printed a (E2) copy of the Walgreen's computer query results and called the police.

I phoned the number listed for Dr. Maron ((510) 247-6300) to try and contact her but no one answered because the business was closed. The recording stated it was part of the Sutter healthcare group which did not match the prescription which showed East Bay Physicians Medical Group. I conducted an Acurint query of Dr. Maron and obtained a cell phone number listed for her.

I contacted Dr. Maron who verified that she did not have a patient listed as Ryan Neal. Dr. Maron told me she had been informed by CVS that her name had been fraudulently used a few months earlier by the same suspect. Dr. Maron said the director of the Medical board filed a report for those incidents already. I provided Dr. Maron with a case number, follow up telephone numbers, my name, and badge number.

Macdonald told me he was unable to provide me with a copy of the video surveillance at that time, but he would notify loss prevention to make a copy. Macdonald said he would maintain a copy for a follow up investigator.

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I seized a copies of the prescriptions and Walgreen's computer query from Macdonald and provided him with an (E3) property receipt.

I conducted a computer query on the name Ryan Neal, DOB: 07/13/1990 which yielded driver's license #E2327963 and listed an address of 3311 California St, Berkeley 94703. I conducted a computer query of the driver's license number provided to Mendoza which showed the driver's license number belonged to a Robert Lenoir Bates III, DOB: 04/12/1989, and lived at 64 Dedman Court, San Francisco, 94124.

I conducted an Acurint query of the phone (510)359-1460 which revealed the phone number was registered to Sony Em. There are two addresses listed for Sony Em. The addresses are 1253 50th Avenue, Oakland, 94601 and 1445 50th Avenue #6, Oakland, 94601.

I booked all evidence at Mission station accordingly.

I digitally attached all evidence to this report.

Retrieved by A21445 on 4/26/2021 at 1:09 PM
Do Not Duplicate

PROPERTY RECEIPT FORM
San Francisco Police Department

RECEIVED FROM BUSALACCHI #4330	DATE 12/27/14	CASE NUMBER 141 060 226
ITEM(S)		
2. (3) COPIES OF PRESCRIPTIONS (fake)		
3. (1) COPY WALGREEN'S PRINTOUT		
4.		
5.		
6.		
7.		
8.		
9. Walgreens #04318 4129 18th Street San Francisco, CA 94114 415-651-7837		
10.		
11.		
OFFICER ACCEPTING PROPERTY (SIGNATURE) <i>Frank Brando</i>	WITNESS (SIGNATURE) <i>[Signature]</i>	RECEIVED FROM (SIGNATURE) <i>[Signature]</i>

SFPD-315 (REV.06/99)

East Bay Physicians Medical Group
401 29th St. Ste 201 Oakland CA 94609 (510)359-1460

- ☒ Daisy Maron M.D: NPI:1275565954 DEA: BM7441140 CA Lic: A88109
☐ Tianli Pan MD: NPI:1578783791 DEA:BP9309130 CA Lic: A91025
☐ Sindhu Radhakrishnan MD: NPI:1497833073 DEA:BR9467499 CA Lic: A92624

Prescription

Patient: Neal, Ryan Sex: M DOB: 07/13/1990 Age: 24
Address: 3311 California St. Berkeley, CA 94703

Rx

D5911069 4/12/2020

HYDROCODONE/ACETAMINOPHEN 10/325mg

Sig: Take 1 TAB BID PP

Refills: 0

Generic substitute: OK

Qty Disp: 90

Comment: No Comment

Assoc. Diag: None

Allergies: (No Known Allergies)

Date Reviewed: 12/26/2014

Quantity:

- ☐ 1-24
☐ 25-49
☐ 50-74
☒ 75-100
☐ 101-150 & Over

Units: 90

Circle number of drugs prescribed:

Prescription is void if the number of drugs is not noted

1 2 3 4

Refills:

0 1 2 3 4

No Refills allowed to Schedule II

Signature:

Ma

Date

12/26/14

East Bay Physicians Medical Group
401 29th St. Ste 201 Oakland CA 94609 (510) 359-1460

- ☒ Daisy Maron M.D: NPI:1275565954 DEA: BM7441140 CA Lic: A88109
☐ Tianli Pan MD: NPI:1578783791 DEA:BP9309130 CA Lic: A91025
☐ Sindhu Radhakrishnan MD: NPI:1497833073 DEA:BR9467499 CA Lic: A92624

Prescription

Patient: Neal, Ryan Sex: M DOB: 07/13/1990 Age: 24
Address: 3311 California St. Berkeley, CA 94703

Rx

ALPRAZOLAM 2MG

Sig: Take 1 TAB BID PRN for anxiety

Refills: 0

Generic substitute: OK

Qty Disp: 90

Comment: No Comment

Assoc. Diag: None

Allergies: (No Known Allergies)

Date Reviewed: 12/26/2014

Quantity:

- ☐ 1-24
☐ 25-49
☐ 50-74
☒ 75-100
☐ 101-150 & Over

Units: 90

Circle number of drugs prescribed:

Prescription is void if the number of drugs is not noted

1 2 3 4

Refills:

0 1 2 3 4

No Refills allowed to Schedule II

Signature:

Ma

Date

12/26/14

East Bay Physicians Medical Group
401 29th St. Ste 201 Oakland CA 94609 (510)359-1460

- ☒ Daisy Maron M.D: NPI:1275565954 DEA: BM7441140 CA Lic: A88109
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☐ Sindhu Radhakrishnan MD: NPI:1497833073 DEA:BR9467499 CA Lic: A92624

Prescription

Patient: Neal, Ryan Sex: M DOB: 07/13/1990 Age: 24
Address: 3311 California St. Berkeley, CA 94703

Rx

Amoxicillin 500mg Cap

Sig: Take 1 CAP QID FOR 7 DAYS

Refills: 0

Generic substitute: OK

Qty Disp: 28

Comment: No Comment

Assoc. Diag: None

Allergies: (No Known Allergies)

Date Reviewed: 12/26/2014

Quantity:

- ☐ 1-24
☒ 25-49
☐ 50-74
☐ 75-100
☐ 101-150 & Over

Units: 28

Circle number of drugs prescribed:

Prescription is void if the number of drugs is not noted

1 2 3 4

Refills:

0 1 2 3 4

No Refills allowed -o Schedule II

Signature:

Date 12/26/14