



FORMER SECRET SERVICE AGENT - PRESIDENTIAL PROTECTION, THE WHITE HOUSE
YOUR SINGLE GLOBAL SOURCE FOR SECURITY CONSULTING, PRIVATE INVESTIGATIONS,
TECHNICAL SURVEILLANCE COUNTER-MEASURES, EXECUTIVE PROTECTION &
PRACTICAL TRAINING SOLUTIONS FOR TODAY'S WORLD
(888) 831-0809 info@Lasorsa.com www.Lasorsa.com

VENDOR PROTOCOLS & AGREEMENT

All investigators must be equipped with:

- Hard drive camera 12+ Megapixel with 5x+ optical zoom capability
- Covert camera (Mobile Device or other)
- Computer with MS Word capabilities
- Software that allows the video to be uploaded
- Internet access in order to email video

◇ Vendor must acknowledge receipt of case via email within 24 hours to the case manager.

◇ Vendor must provide the case schedule within 48 hours of receipt of the assignment.

If the scheduled dates change, you must notify case manager immediately.

◇ Vendor must provide a text (email or SMS) update to the case manager, after 4 hours of surveillance during each surveillance day.

◇ Hours of Field Surveillance are dictated by client I.E. 8 hr day, 4 hr day etc.

All surveillance starts as a 4 hr day unless otherwise indicated

- Confirm the claimant is at home within the first four (4) hours. Conduct only (4) hours of surveillance **unless the claimant is active**. If active, stay on Subject until no longer active, place at home for no more than an hour if over 8 hour day. If we are to go over hours allocated, an update must immediately be placed to the case manager for approval from the client.
- Start time for surveillance first time out is 6:00am unless case assignment dictates otherwise. Future times will be adjusted based on 1st days observations.
- Documentation Video must be obtained. Video in every 30 minutes to document location beginning at the time you arrive on site, surveillance position, activities, etc. At that time you must use your satellite time on your cell phone in the video frame with the camera shot to confirm the time on the camera.
- 20 seconds of video must be obtained at the beginning and at the end of the surveillance to document the residence, vehicles in the driveway and any other points of interest in the area.
- A covert camera must be used if the claimant is active and followed into a public area I.E. mall, grocery store, home improvement stores etc.
- Good documentation of the claimant's movements must be noted. Injured area must be visible in video I.E. foot, knee, hand etc. Be sure that the video correlates with the investigator's notes. Also, be sure that the notes detail the activities observed.



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- All video submitted must have **date and time stamp documented on video.**
- A good description of the claimant's house, a detailed description of the claimant and if the claimant is active, a clear picture of the claimant's face.
- An update must be sent via email each day surveillance is worked including: start time, end time, whether you got active video or only doc video, if the claimant's vehicle was present, how the claimant was placed at home, briefly what activity the claimant conducted, and if you had a stationary surveillance period or drive bys were conducted. This update is to be provided on our template.
- A synopsis must be sent via email each day the surveillance is worked on the appropriate template.
- Vendor must upload original video evidence each night the file is worked.

◇ Vendor must email their invoice to the case manager within 1 business day from the last day worked.

◇ Vendor must provide snippets of the residence in the report for each day that there is no claimant activity observed and / or documented.

◇ Vendor should positively identify claimant by end of tour.

◇ ***Note:** A copy of all video evidence must be kept at vendor's office.

By signing below, as Authorized Agent of _____,
I agree to the parameters set forth above.

Signed: _____ Date: _____



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VENDOR AGREEMENT

- Compensation
 - A fee of \$250 per 8 hr day and \$175 per 4 hr day
 - Any fees above and beyond must be agreed upon in writing by LaSorsa & Associates.
- Licenses and documentation to be provided to LaSorsa & Associates
 - Copy of vendor's current private investigator license.
 - Vendor's certificate of insurance if applicable.
 - Signed Vendor agreement and Vendor Protocols form
 - Signed W-9 Form

By signing below, I agree not to sub contract any of LaSorsa & Associates' case files out to another vendor without the prior written authorization of LaSorsa & Associates.

By signing below, as Authorized Agent of _____,
I agree to the parameters set forth above.

Signed: _____

Date: _____

Date received: _____