

Checklists, while no substitute for on-the-ground judgment, are an invaluable tool for capturing details about the site, ensuring that no key steps are overlooked, and preserving information that can be used during future operations.

Principal Profile Completed by: Date Completed: Comments:		Route Completed by: Date Completed: Comments:	
Pre-Advance Completed by: Date Completed: Comments:		Hotel Completed by: Date Completed: Comments:	
Destination Risk Completed by: Date Completed: Comments:	Profile	Restaurant Completed by: Date Completed: Comments:	
Detail and Comm Completed by: Date Completed: Comments:	and Post	Emergency Medical Care Completed by: Date Completed: Comments:	
Commercial Air T Completed by: Date Completed: Comments:	ravel	Notes	
Private Air Trave Completed by: Date Completed: Comments:	l 		
Luggage Completed by: Date Completed: Comments:			
Ground Transpor Completed by: Date Completed: Comments:	tation		



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Executive Protection Principal Profile

Name of Principal	Primary Physician		
Company Name	Phone		
Position	Dentist		
Company Address	Phone		
Phone	Pharmacy		
Mobile Phone	Phone		
	Address		
Administrative Ast.			
Phone	Medications		
Mobile Phone			
Spouse Name	Previous Medical		
Phone			
Mobile Phone			
Residence Address	Children's Names		
Passport Country			
Number			
Expiration Date		Yes	No
	Photo of Principal		
Drivers License State	Photo of Spouse		
Number	Photo of Children		
Expiration Date	Photo of Residence		
	DNA Kit		
Physical Description M F	Handwriting Sample		
Sex	Fingerprints		
Height	Video of Principal		
Weight	Medical Power of Attorney		
Eye Color	N .		
Hair Color	Notes		1
Distinguishing Features			
Scars			
Marks			
Tattoo			
Blood Type			
DOB			
Place of Birth			



Executive Protection Pre-Advance Checklist

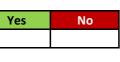
This task does not require travel; it can be done with a telephone and computer. Gather key facts, make initial contacts, and consult files from previous trips to the location. Use judgment: if more or different information is needed, get it and note it at the end or attach it

Trip Basics							
Date / Time EP Notified of Trip					_	Historical Trip Review	
Point of Contact / Position					_		
Primary Phone					-	Case File Number	
Principal Name						Trip Date	
Title					_	EP Specialist	
Office Phone							
Mobile Phone							
Home Phone					-	Notes	
Destination					_		
Departure Date							
Return Date					-		
Trip Coordinator							
Title							
Office Phone							
E-mail							
EP Detail							
Number of EP Specialist Assigned							
Positions (check each assigned)	Supervisor	Driver	Advance	Close-in			
Support Detail					_		
EP Specialist Number 1 (Supervisor)							
Name							
Office Phone							
Mobile Phone							
E-mail					-		
EP Specialist Number 2							
Name					-		
Position					_		
Office Phone					-		
Mobile Phone					-		
E-mail							
EP Specialist Number 3							
Name							
Position					-		
Office Phone					-		
Mobile Phone					-		
E-mail					-		
L-man					-		



Trip Activities

Itinerary Attached



Purpose of Trip

Other Members of Party

Name	Name	
Title	Title	
Affiliation	Affiliation	
Special Activites		
Location	Location	
Dates	Dates	

Special Gear or Clothing Required for Principal

Transportation

Air Travel	
Commercial Airports	
Airline	
Phone	
Reservation Number	
Seat Number / Type	

Map of Airport Terminal	
Map of Lounge Area	
Baggage Claim Area	
Pick-Up / Drop-Off Area	
Parking Garage / Area	

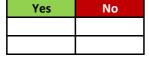
Yes	No

Private Airprort

Aircraft Tail Number Aircraft Call Sign **Chief Pilot Name Co-Pilot Name**

Need Ramp Steps Hanger Available

Yes	No	



Ground Transportation

Vendor Address	
Phone E-mail	

Yes

No

Obtaind Route Maps

Princi	inal	Vehicle
I I IIIU	par.	VEIILLE

- Make
- Model
- Year
- **Tag Number**
- Seat Configuration
- Driver Name
- Phone

Photo of Driver **Background Complete**





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Executive Protection Pre-Advance Checklist

None

No

& ASSOCIATES	Pro	e-Advan
Helicopter	Support Vehicle	
Aircraft Tail Number	Make	No
Aircraft Call Sign	Model	
Chief Pilot Name	Year	
Co-Pilot Name	Tag Number	
	Driver Name	
	Phone	
International Travel Concerns	Lodging for Principal	
Customs Yes No	Hotel Name	
Imigration Visa is Valid	Address	
Vacinations Complete	Phone	
Language Interpreters Required	Reservation Name	
	Room Type	
US Embassy or Consulate	Confirmation Number	
Phone	General Manager Name	
Contact Person	Phone	
Address	Security Director Name	
	Phone	
	Concierge Phone	
Yes No	Housekeeping Sup. Name	
Routes Established	Phone	
Nacasha Madiad Casa	Lodging for EP Staff	Yes
Nearby Medical Care Hospital Name	Same as Principal If No	
Address	Hotel Name	
	Address	
EMS Service	Phone	
Phone Number	Reservation Name	
	Local Law Enforcement Contacts	
Med. Evac Company Name	Agency Name	
Phone Number	Contact Person	
24 Hour Hotline	Phone	
	Address	
Expected Local Conditions During Visit	Likely Respnse Time	
Crime Concerns		
Yes No	Private Security Contacts	
Political Turmoil	Organization	
Social Turmoil	Contact Person	
Strikes	Phone	
Riots	Address	
	Capabilities if Needed	
Holidays During Trip		
Projected Weather		

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Though most of the items below apply to both domestic and international travel, a few apply only to international travel.

Source Consult	Yes	No	
EP Specialist			EP Specialist who have worked on this type of trip or at the location in the past
Previous Checklists			Work off previous reports generated during past trips
Previous Reports			
OSAC			Overseas Security Advisory Committee
State Department			
World Wide Web			
Travel Intelligence Provider			ljet, Direct Travel, Etc
Intelligence Source (dest)			Low Law enforcement, Security, Car Services, Interpreters, etc
US Embassy			

Characteristics of Trip

Purpose of Trip

Business	Pleasure
Det	ails

Main Activities Planned for Trip

Unusual, Potentially Risk Activities

Expected Exposure to Possible Threats

Other Relevant Findings

Preliminary Risk Ratings

Low	Medium	High

EP Supervisor / Manager Name				Command	Post		
Mobile Phone				Location			
E-mail				Hours of Op	eration		
Advance Name				Command P	ost Swept		
Mobile Phone						Yes	No
E-mail				-			
EP Specialist 1 Name				All EPS Brief	ed on Risk A	ssessment	
Mobile Phone						Yes	No
E-mail				-			
EP Specialist 2 Name				All EPS Inspe	ected for Cor	npliance	
Mobile Phone				-		Yes	No
E-mail				-			
EP Specialist 3 Name				EPS Equip	nent Log (A	ssignment)
Mobile Phone				•			· · · · · · · · · · · · · · · · · · ·
E-mail					Radio #	Issued	Returned
				EPS 1			
Mill ED Staff ha Armand	Yes	No		EPS 2			
Will EP Staff be Armed				EPS 3			
Carry Permits Confirmed				EPS 4			
For each EPS check Corporate	Employee or Co	ontractor	Additiona	l Equipment	t Assigned		
	Corporate	Contractor					
EP Supervisor / Manager							
Advance EP Specialist							
EP Specialist 1							
EP Specialist 2							
EP Specialist 3 (driver)							
Detail Dress Code							
Equipment Requirements	Yes	No	Command	Post Requi	rements	Yes	No
Communications			Suitable Ro	om w/ Tables	& Chairs		
Navigation			Chalk / Dry	erase Board			
Tracking	Local Phone Book						
Photography	Spare Batteries						
Information Gathering	Flashlights						
Alarm System	Portable Alarms						
Emergency Response		1	Surveillance	e Equipment			
		-	Maps				
			Fire Escape	Routes			

Radios & Chargers

First Aid Supplies (AED)

Diagrams of Hotels / Locations

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Executive Protection Commercial Air Travel

Departure Location Airport Name Address		TSA Checkpoint Waiting Time E	stimate from TSA.gov
Web Address		Customs/Immigration facilitatio	n arrangements made
Airline			
Terminal Flight Number		Medical Assistance Ava	ilable on-site
Class / Seat Number Airline Phone Number			
Customer Service Number		Other Amenities available at airport	
Security Director Name			Yes No
Mobile Phone		Business Center	
Airport Police		Baggage Assistance	
Phone Number		Newsstand / Bookstore	
		Convenience Store	
		Gift Shop	
	Yes No	ATM	
Map of Airport		Currency Exchange	
		Shoe Shine	
Drop Off Location		Restaurants (sit down , carry-out)	
		Is the airport under TSA "notice of de	eficient security"
	Yes No		Yes No
Have Passports			
Cash for Curb-Side/Misc		Advance checklist completed for des	stination airport
Luggage check-in location	n identified		Yes No
	Yes No		
		Notes	
Carry-on luggage free of	Yes No		
Boarding Pass Pre-Printe	d or available at check-in Yes No		
VIP Lounge Location			
Restroom Location			



Departure Location Airport Name Address Web Address Web Address Security Contact Office Phone Mobile Phone	Aircraft Information (cont.) Passenger Capacity Luggage Capacity Number of Flight Staff Chief Pilot Name Mobile Phone Copilot Name Mobile Phone
Airport Police	Yes No
Phone Number	Principal Medical Info Available
Contact Person	EP Staff Transporting Firearms
FBO	Expected Arrival Time
Address	Airport Name
Contact Person	Address
Hours of Operation	Runway Length
Police Jurisdiction	Restriction (night landing)
Phone Number	Airport Phone Number
EMS Service	
Phone Number	Alternate FBO
	Airport Name
Nearest Hospital	Address
Address	
	Runway Length
	Restriction (night landing)
Yes No	Airport Phone Number
Trauma Center	Distance from Primary
Trauma Center Level	
	Ground Transportation from those sites
Yes No	
Map of Airport	
FBO Security Appear Adequate	
FBO Access Control	Yes No
Secure Waiting Area Need / Have Transportation	Advance of all FBO's
Luggage Free of Restricted Items	Notes
Allowed to Drive onto Ramp	
Best Drop Off Location	
Aircraft Information	
Aircraft Type	
Year	
Tail Number	
Operator	
Hours of Flight Time	

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Fuel Range



All Travel

Place color-coded tags (without any names) on all the luggage. For example, use blue for the principal and red for the second executive. Colors will be changed periodically.

After flight, all name tags wil be removed from luggage but color-coded tags will remain in place. Once at the hotel, the EPS will instruct the bellhop "take the bags with the blue tags to room 123 and the bags with the red tags to room 456. This prevents the need from having to identify the principal by name in the lobby of curbside.

Ensure all carry-on luggage is free of restricted items. Confirm allowable items via www.TSA.gov

Ensure all checkes luggage is free of restricted items. Confirm allowable items via www.TSA.gov

Commercial Air Travel

Encourage light packing. Fewer bags = less time waiting at crowded baggage carousel area.

Checked bagage is subject to search do ensure not sensative documents or materials are placed in these bags.

Use luggage tags without principals name. Use EPS name and business address rathe than home addresses.

Private Air Travel

Use color-coded luggage tag system to ensure only the correct luggage is loaded onto the aircraft

Do not allow unknown luggage or contents to be loaded onto aircraft

If risk level warrants, conduct a secondary serach of all items being loaded onto aircraft

Complete the Following Table

			Search C	ompleted
Traveler	Luggage Tag Color	Number of Pieces	Yes	No

Notes

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Executive Protection Ground Transportation

Vehicles

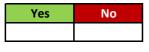
Armored Car to be Used

Yes	No

Vehicle Information

	Make	Model	Color	Tag Number
Vehicle 1				
Vehicle 2				
Vehicle 3				

Secure Parking Arranged



No

Yes

Will Detail Use Lead Car

Preferred Seating	Location in Vehicle		
Principal			
Guest			
Guest			
EPS			
		Yes	No
Vehicle Maintenance up to Date			
Gas Tank Full			
Vehicle Clean Inside & Out			
Vehicle Security Check Conducted			

Notes

Equipment

Bomb Mirror
Spare Tire & Jack
Flashlight
Flares and Reflectors
Umbrella
Basic Tools
GPS
Cash / Credit Card for Fuel
Fire Extinguisher
Jumper Cables
Advance First Aid Kit
AED
Maps
Registration and Proof of Insurance
Toll Pass
Cell Phone Charger

Yes	No

Drivers

Has EP Supervisor briefed the drivers on potential threats e.g. kidnap attempts, being run off the road, carjacking, assassination attempts.

Security measures including keeping doors locked, not leaving car unattended, keeping motor running as principal enters and exits the vehicle.

Courtesies should be outlined including expected dress requirements, demeanor, use of radio, keeping mobile phones on but on silent or vibrate.

Ensure the driver has cash to tip valets so vehicle can be staged close to hotel entrance, restaurant entrance, etc..

This Table must be completed

Driver Name	DL Number	ТХ



Executive Protection Rout Survey

Date of Movement	 Check for the
Scheduled Departure time	
Starting Address	 Possible Traff
	Road Closures
	Special Events
Destination Address	 Bridges
	 Overpasses
	Railroad Track
Contact Person (dest)	 School Zones
Phone Number	 Toll Plazas
	Construction
Distance	
Expected Travel Time	 Has the route day and week
	uay and week
Principal Name	
Number in Party	
Number of Vehicles	 Identify Safe I
Number of Venicies	 identity Sale i
Primary Route	

Check for the following conditions, chokepoints, concerns

Possible Traffic Problems Road Closures Special Events in the Area Bridges Overpasses Railroad Tracks School Zones Toll Plazas Construction Zones

Yes	No

Has the route been driven by an EPS during the same time or day and week as the scheduled transport

Yes	No

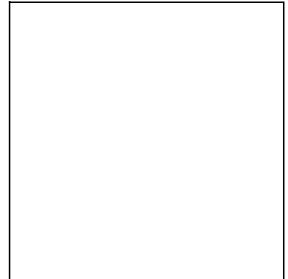
Identify Safe Havens along the Route

	Yes	No
Hospital		
Police Station		
Fire Station		

Will Countersurviellance be used during transport of principal

Yes	No

Notes



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Secondary Route

Tertiary Route



If possible, conduct advance at same time of day principal will arrive. That is the best way to see what the conditions will be like when the principal arrives and to meet hotel staff who will be working during the visit.

Hotel Name	Has check-in been arranged so that principal can walk directly
Reservation Number	to his/her room and bypass the front desk
Reservation Name	Yes No
Address	
Phone Number	Will the Principals mobile phone work throughout the hotel.
Web Address	Yes No
General Manager	
Phone Number	
Security Manager	Will the EP teams mobile phones work throughout the hotel.
Phone Number	Yes No
Mobile Number	
Arrival Date	Will the EP teams comm equip. work throughout the hotel.
Departure Date	Yes No
Room Type	
Room Location	
Room Number	What amenities are available in the hotel
Room Phone Number	Yes No
	Broadband Internet (Wi-Fi)
Concierge Name	Massage / Spa
Phone Number	Pool
Bell Captain	Fitness Center
Phone Number	Barber / Beautician
Housekeeping Manager	Laundry / Dry Cleaning Service
Phone Number	Retail Stores
Food Service Manager	Business Center
Phone Number	Restaurants
Valet Manager	Room Service
Phone Number	
	No Police Agency
Vehicle Kept Near Entrance	Phone Number
Obtained Map of Hotel	Fire Department
EP Team Familiar w/ Hotel Layout	Phone Number
Evacuation Routes Identified	
Location of Fire Extinguishers	Closest Hospital
	Address
Total	
Number of Doors Principal room to exit	Distance & Time
Number of Doors EP rooms to exit	
	Yes No
	Level 1 or 2 Trauma Center
Best Entrance for Principal to Arrive	
Second Entrance for Principal to Arrive	
Tertiary Entrance for Principal to Arrive	
Yes	No
Are Arrival Points Covered	

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Executive Protection Restaurant Survey

Restaurant Name	Alternate Restaurant (in case of problem with primary)
Phone Number	Restaurant NameAddress
Cuisine	
Web Address	Phone Number
Managers Name	Cuisine Web Address
Phone Number	
	Managers Name
Yes No Contacted about special requirement Image: Contacted about special requirement	Phone Number
	Yes No
Maître d's Name Phone Number	Contacted about special requirements
	Maître d's Name
Yes No	Phone Number
Contacted about special requirement	
	Yes No
Vehicle Consideration	Contacted about special requirement
Where can EP vehicle be staged during the meal	
	Notes
Primary Entrance	
Secondary Entrance	
Tertiary Entrance	
Primary Exit	
Secondary Exit	
Tertiary Exit	
Restroom Location	
Dress Code	
Manager made aware of seating requirements for principal Yes	No Reservation Time
and EP specialists (e.g., private room, away from window.	Reservation Name
	Party Size (Principal Table)
Is there reason to believe that the restaurants fire suppression Yes system in inadequate	No Party Size (EP Table)
,	
Will the principals mobile phone work inside the facility Yes	No
Will the EP staff's mobile phones and other communication Yes devices work inside the facility	No
Responding Police Agency	
Responding Fire Department	
Closest Hospital	



Executive Protection Emergency Medical Care

Hospital Information Name Address Phone	Will the Hospital allow EP staff to remain at all times Yes No
ER Contact Peron Phone	Primary Care Physician Name Address Phone
Level of Care Provided by HospitalYesNoLevel 1 or 2 Trauma Center	Other Specialist the Principal may need based on histor Name Address Phone
If outside the US is Principal Eligible to use Hospital Yes No	Previous Medical Condition Diagnoses Date Treatment
Does the Hospital have a Suitable Blood Supply Yes No	
English Speaking Doctors or Translators Yes No	Name Dosage Taken
Is the Principals Insurance Accepted at the Hospital Yes No	
Procedures in Place to Evac Principal back to US Yes No	Known Allergies Name Reaction
What type of Specialist does the Hospital have on staff	
Time from Hotel Time from Restaurant Time from Meeting Location	Principal Blood Type Prosthetics
Location of nearest 24 hour Pharmacy Name Address Phone Web Site	Notes
Is the Principals choice of Clergy Available if needed Yes No	
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