

~~Report~~ - Oct. 18

<b>Missing Women Commission of Inquiry</b>	
<b>EXHIBIT</b> No: <b>7</b>	
<b>Date:</b>	October 18, 2011
	<b>Registrar</b>

**SEX TRADE WORKERS INVESTIGATION QUESTIONNAIRE**

The following information is being collected by the Vancouver Police Department in an effort to gain information about what may have happened to the missing sex trade workers from your community. We would like you to give us as much information as you can recall and we will not use it for anything aside from this investigation. You may remain confidential if you wish, but we would prefer it if you were willing to talk with us.

NAME \_\_\_\_\_

STREET NAME(S) \_\_\_\_\_

PHONE/PAGER/CELL \_\_\_\_\_

**WOULD YOU BE WILLING TO TALK TO US?**

YES \_\_\_\_\_

NO \_\_\_\_\_

**ARE YOU REGISTERED WITH THE SEX TRADE WORKERS IDENTIFICATION PROJECT? YES \_\_\_ NO \_\_\_**

**WHAT AREAS DO YOU WORK?** \_\_\_\_\_  
\_\_\_\_\_

**WHAT TIMES OF THE DAY/NIGHT DO YOU WORK? PICK AS MANY AS APPLY.**

500 AM - NOON \_\_\_\_\_

NOON - 600 PM \_\_\_\_\_

600 PM - MIDNIGHT \_\_\_\_\_

MIDNIGHT - 500 AM \_\_\_\_\_

**DO YOU HAVE A SPOTTER?**

ALWAYS \_\_\_\_\_

SOMETIMES \_\_\_\_\_

NEVER \_\_\_\_\_

**DOES YOUR SPOTTER TAKE DOWN LICENSE PLATES?**

ALWAYS\_\_\_\_  
SOMETIMES\_\_\_\_  
NEVER\_\_\_\_

**WILL YOU WORK IN RETURN FOR DRUGS?**

ALWAYS\_\_\_\_  
SOMETIMES\_\_\_\_  
NEVER\_\_\_\_

**WHAT SEXUAL ACTS DO YOU REFUSE TO DO?**

\_\_\_\_\_  
\_\_\_\_\_

**IF A LOT OF MONEY WAS OFFERED TO YOU, WOULD THIS CHANGE?**

YES\_\_\_\_  
NO\_\_\_\_

**IF A LOT OF MONEY IS OFFERED TO YOU, DOES IT MAKE YOU SUSPICIOUS?**

YES\_\_\_\_  
NO\_\_\_\_

**WHAT DO YOU FEEL IS A LOT OF MONEY?**

\$\_\_\_\_

**DO YOU PERSONALLY KNOW ANY OF THE MISSING WOMEN? YES\_\_\_\_**

NO\_\_\_\_

**IF YES, PLEASE NAME  
THEM**

\_\_\_\_\_  
\_\_\_\_\_

**DO YOU EVER GO TO WORK ON CRUISE SHIPS OR FREIGHTERS?**

YES\_\_\_\_  
NO\_\_\_\_

**WILL YOU LET A JOHN TAKE YOU OUT OF THE CITY OF VANCOUVER?**

YES\_\_\_\_  
NO\_\_\_\_

**DEPENDS - PLEASE SAY ON WHAT**

\_\_\_\_\_  
\_\_\_\_\_

HAVE ANY JOHNS WANTED TO TAKE PHOTOS OF YOU?

YES \_\_\_\_\_

NO \_\_\_\_\_

IF YES, CAN YOU NAME OR DESCRIBE THEM?

\_\_\_\_\_  
\_\_\_\_\_

WHAT MAKES YOU FEEL SAFE WITH A JOHN?

\_\_\_\_\_  
\_\_\_\_\_

WHY? \_\_\_\_\_

WHAT MAKES YOU FEEL AFRAID WITH A JOHN? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

WHY? \_\_\_\_\_

HAVE YOU HAD JOHNS OFFER TO TAKE YOU TO THEIR HOMES FOR DRUGS?

YES \_\_\_\_\_

NO \_\_\_\_\_

IF YES, PLEASE NAME THEM AND/OR DESCRIBE THEM AND/OR THEIR VEHICLES/HOMES \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

IF YES TO ABOVE, DID YOU GO?

YES \_\_\_\_\_

NO \_\_\_\_\_

IF YES, WHAT HAPPENED? IF NO, WHY NOT?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**HAVE YOU ALWAYS REPORTED YOUR VIOLENT DATES TO DEYAS?**

YES \_\_\_\_\_

NO \_\_\_\_\_

**IF NO, PLEASE DETAIL ANY VIOLENT DATES YOU HAVE HAD AND DID NOT REPORT** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**HAVE YOU EVER FELT YOUR LIFE WAS IN DANGER ON A DATE?**

YES \_\_\_\_\_

NO \_\_\_\_\_

**IF YES, WHAT HAPPENED?** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARE THERE ANY PLACES/HOTELS/ROOMING HOUSES YOU AVOID OR ARE AFRAID TO GO INTO IN VANCOUVER?** \_\_\_\_\_

\_\_\_\_\_

**WHAT DO YOU THINK HAS HAPPENED TO THESE WOMEN?** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

IF THEY HAVE MET WITH FOUL PLAY, WHO DO YOU THINK IS RESPONSIBLE? \_\_\_\_\_

IF THERE IS SOMEONE RESPONSIBLE, WHAT DO YOU THINK SHOULD HAPPEN TO THIS PERSON? \_\_\_\_\_

DO YOU KNOW IF ANY OF THESE WOMEN HAD DRUG DEBTS?

YES \_\_\_\_\_

NO \_\_\_\_\_

IF YES, WHY DO YOU THINK THIS? \_\_\_\_\_

IS THERE ANYTHING ELSE YOU WOULD LIKE US TO KNOW? \_\_\_\_\_

Multiple horizontal lines for handwritten responses.

EXHIBIT stamp with mirrored text and a date field.