

VOLUSIA COUNTY SHERIFF'S OFFICE

INCIDENT REPORT

EVENT DATA	<input type="checkbox"/> Juvenile <input type="checkbox"/> Hate Crime <input type="checkbox"/> Gang <input type="checkbox"/> Elderly Abuse / Exploitation <input type="checkbox"/> Domestic Violence VOR _____ <input type="checkbox"/> Endangered / Other _____		Agency Report Number 190018185		
	Agency ORI Number FL0640000		Zone # 35	Telephone Handled 1. Yes 2. No 2	
	Reported: Day Friday	Date 08-23-2019	Time (mil.) 1211	Time Dispatched (mil.) 1212	Time Arrived (mil.) 1227
	Time Completed (mil.) 1357		Nature of Call (Report Type) ESCAPE Escaped Prisoner		
Incident Type: 1. Felony 2. Traffic Felony		3. Misdemeanor 4. Traffic Misdemeanor	5. Ordinance 9. Other	Incident: Day From Friday	
Date 08-23-2019		Time (mil.) 0645	TO	Day Friday	
Date 08-23-2019		Time (mil.) 0701	Occurred During: D - Day U - Unknown N - Night D		
Offense #1 1	Type 1	Statute Violation Number 944.40	Description Prisoner Escape		
Offense #2	Type	Statute Violation Number	Description		
Incident Location (Street, Apt. Number) 1300 RED JOHN DRIVE		City DAYTONA BEACH			
Business Name / Area Identifier		# Prem. Entered	Drug Related 0. N/A 1. Yes 2. No 2	Alcohol Related 0. N/A 1. Yes 2. No 2	
Location Type 19		Location Type Codes 01. Residence-Single 05. Convenience Store 09. Supermarket 13. Bank/Financial Inst. 17. Gov't/Public Bldg. 21. Airport 25. Parking Lot/Garage 29. Motor Vehicle 02. Apartment/Condo 06. Gas Station 10. Dept/Discount Store 14. Commercial/Office Bldg. 18. School/University 22. Bus/Rail Terminal 26. Highway/Roadway 30. Other Mobile 03. Residence/Other 07. Liquor Sales 11. Specialty Store 15. Industrial/Mfg. 19. Jail/Prison 23. Construction Site 27. Park/Woodlands/Field 88. Unknown 04. Hotel/Motel 08. Bar/Nightclub 12. Drug Store/Hospital 16. Storage 20. Religious Bldg. 24. Other Structure 28. Lake/Waterway 99. Other	Forced Entry 1. Yes 3. Attempted 2. No	Arson-Inhabited 1. Occupied 3. Abandoned 2. Unoccupied	
V/W Code V-Victim N-Next of Kin W-Witness O-Other R-Reporting Person		Victim/Subject Type 0. N/A 1. Juvenile 2. L.E. Officer 3. Adult	Address/Phone Type B. Business/Work C. Cell H. Home	Race W-White O-Oriental/Asian B-Black U-Unknown I-American Indian	
Means of Attack F-Firearm O-Other Dangerous K-Knife/Cutting Inst. H-Hands, Fists, Feet, Etc.		Extent of Injury 00. N/A 03. Laceration 06. Poss. Internal Injury 09. Abrasions/Bruises 01. Gunshot 04. Unconscious 07. Loss of Teeth 10. No Visible Injury 02. Stabbed 05. Poss. Broken Bones 08. Burns 99. Other Serious Injury	Domestic Violence 1. Yes 2. No	Victim Relationship to Offender S-Spouse B-Sibling Z-Other P-Parent O-Other Family C-Child H-Co-Habitant	
Offense Indicator 1. #1 3. Both 2. #2		V/W Code 1 R	# 1	V. Type 2	
Nature of Call (for Victim, if different from Incident)		Name (Last/Business) (First) (Middle) RIVERS			
Address (Street, Apt. Number)		City DAYTONA BEACH FL	State FL	Zip 32117	
Business/School/Other Address (Street, Apt. Number)		City DAYTONA BEACH FL	State FL	Zip 32117	
Other Contact Info (Time Available, Interpreter, etc.)		Synopsis of Involvement SERGEANT AT VCBJ			
If Victim Type 1, 2, or 3	Race W	Sex M	Date of Birth	Age	
Ethnicity N		Res. Type	Res. Status	Means of Attack	
Extent of Injury		Domestic Violence	Relationship		

INCIDENT REPORT (CONT.)

SUBJECT / MISSING SECTION
Offense Indicator: 1. #1, 3. Both, 2. #2; Subject Code: S-Suspect, V-Victim, D-Defendant (Missing Person); Code # 1, 3; Name (Last) REDDING, (First) MICHAEL, (Middle) L; Race W, Sex M, Ethnicity N; Date of Birth 11-10-1977; Age 41; Height 5' 08; Weight 185; Eye Color HAZ; Hair Color BRO; Maiden Name; Nickname / Street Name; Place of Birth - City OSTEEN, County FL, State; Employer/Other/School; Occupation; Last Known Address (Street, Apt. Number) 190 11TH AVE, City OSTEEN, State FL, Zip 32764, Address Type H, Phone; Other Address (Street, Apt. Number); Driver's License State/Number FL, R-352-552-77-410-0; Social Security Number; Other ID Number; ID Type; Clothing (Describe) BLACK / SHIRT; Scars/Marks/Tattoos (Type/Describe); Scars/Marks/Tattoos (Type/Describe); Hair Length /Style; Skin; Build; Facial Features; Speech/Voice; Deformity; Glasses; If Subject: Demeanor, Mask, Weapon Type; If Arrested: Subject Was Already in Custody? 1. Yes, 2. No 1; Warrant From: 1. This Agency, 2. Other Agency; Date of Last Contact; Date of Emancipation; Caution; Caution Reason; Personal Habits (Drugs / Alcohol); May Be With: Physical Condition; Mental Condition; Doctor Name; Dentist Name; Incident Type: 1. Runaway, 2. Parents, 3. Involuntary, 4. Disabled, 5. Endangered, 6. Disaster Victim, 7. Voluntary Adult, 8. Unknown; Foul Play Suspected? 1. Yes, 2. No, 8. Unknown; Missing Before? 1. Yes, 2. No, 8. Unknown; Fingerprints Available? 1. Yes, 2. No; Photo Available? 1. Yes, 2. No; Dental Record Available? 1. Yes, 2. No; I, (Printed) (Signature) certify that I have reported the above person as a missing person; and this agency has my permission to enter this person in a statewide alert.

SUBJECT / MISSING SECTION
Offense Indicator: 1. #1, 3. Both, 2. #2; Subject Code: S-Suspect, V-Victim, D-Defendant (Missing Person); Code # 1, 3; Name (Last) (First) (Middle); Race; Sex; Ethnicity; Date of Birth; Age; To Age; Height; To Height; Weight; To Weight; Eye Color; Hair Color; Maiden Name; Nickname / Street Name; Place of Birth - City; County; State; Employer/Other/School; Occupation; Last Known Address (Street, Apt. Number); City; State; Zip; Address Type; Phone; Phone Type; Other Address (Street, Apt. Number); City; State; Zip; Address Type; Phone; Phone Type; Driver's License State/Number; Social Security Number; Other ID Number; ID Type; Clothing (Describe); Scars/Marks/Tattoos (Type/Describe); Scars/Marks/Tattoos (Type/Describe); Hair Length /Style; Skin; Build; Facial Features; Speech/Voice; Deformity; Glasses; If Subject: Demeanor; Mask; Weapon Type; If Arrested: Subject Was Already in Custody? 1. Yes, 2. No; Warrant From: 1. This Agency, 2. Other Agency; Date of Last Contact; Date of Emancipation; Caution; Caution Reason; Personal Habits (Drugs / Alcohol); May Be With: Physical Condition; Mental Condition; Doctor Name; Dentist Name; Incident Type: 1. Runaway, 2. Parents, 3. Involuntary, 4. Disabled, 5. Endangered, 6. Disaster Victim, 7. Voluntary Adult, 8. Unknown; Foul Play Suspected? 1. Yes, 2. No, 8. Unknown; Missing Before? 1. Yes, 2. No, 8. Unknown; Fingerprints Available? 1. Yes, 2. No; Photo Available? 1. Yes, 2. No; Dental Record Available? 1. Yes, 2. No; I, (Printed) (Signature) certify that I have reported the above person as a missing person; and this agency has my permission to enter this person in a statewide alert.

NARRATIVE
1 On 08/23/2019 at 1212 hours, Deputies responded to 1300 Red John Drive, Daytona Beach, in reference to a reported escaped prisoner. Upon
2 arrival Deputy Marsan made contact with Corrections Sergeant Rivers who advised he was processing inmates to be released.
3
4 While processing the inmates at approximately 0645 hours on 08/23/2019, Rivers observed a face sheet for Michael Redding (S1) who had a
5 Seimnole county warrant and writ of bodily attachment and to be extridex to Seminole County but not to be released. Rivers contacted the Officer
6 in charge of the unit Redding was supposed to be in and was advised he was still in the unit but was accidentally brought down to the inmate
7 release holding cell without Rivers having knowledge.
8
9 Rivers called each inmate up one by one to positively confirm their ID, provide them with their property and cut their wrist bands off. Rivers had
10 knowledge Redding was supposed to be held over for Seminole County in reference to unrelated charges and placed Redding's face sheet to the

ADMINISTRATIVE
Final Case Status: Status Codes: 1.Arrest/Adult 2.Arrest/Juv. 3.Exceptional/Adult 4.Exceptional/Juv. 5.Closed 6.Unfounded; Victim Advocate; Triad; SA Referral; DCF Hotline; CAC; Spoke With: Date: Time: FCIC / NCIC Entry; T.T. BOLO; FCIC / NCIC Cancel; Connecting Report Number; Agency; Additional Forms Attached: Narrative, SA 707, Persons, Property, Veh./Tow Sheet, Other Describe:; Officer Reporting - Printed: Necole, Marsan; Officer Reporting - Signature; ID. Number: 8866; Unit: 1D33; Date: 08-23-2019; Officer Reviewing - Printed (If Applicable); Officer Reviewing - Signature (If Applicable); ID. Number; Unit; Date

VOLUSIA COUNTY SHERIFF'S OFFICE

NARRATIVE / SUPPLEMENT

EVNT	Report Date	Report Time	Orig. Reported Date	Nature of Call (for Incident)	Agency Report Number	1.Original	2.Supplement
	08-23-2019	1211	08-23-2019	ESCAPE	190018185		1

NARRATIVE / CONTINUATION

11 side. Rivers did not call Redding into the office due to the information he was provided and having knowledge he was to be held.

12

13 After confirming their ID's the inmates were to change into their civilian clothing in the inmate release holding cell prior to being released. Rivers

14 advised he placed each of the inmates property, including Redding's, in the holding cell they were in. Rivers further advised he did not realize

15 Redding's property bag was with the rest of the inmates. Due to being transported to Seminole County, Redding changed into his civilian clothing

16 and remained in the holding cell until directed by corrections officers to exit the holding cell and moved to the inmate release port with the other

17 inmates.

18

19 At 0701 hours, the inmates were released from the inmate release port including Redding who had knowledge he was not to be released.

20

21 At approximately 1000 hours Seminole County Corrections arrived at 1300 Red John Drive, Daytona Beach, to transport Redding to Seminole

22 County. At that time Rivers was unable to locate Redding along with his bag of clothes. Rivers confirmed with the Correctional Officer in charge of

23 Reddings unit he was not there.

24

25 All inmates, with the exception of Redding, entered the property room to obtain a bus pass, obtain their property and have their wrist bands cut off.

26 Correctional staff viewed surveillance footage which revealed Redding waiting in the holding cell with other inmates in his civilian clothing and

27 concealing his wrist band with a camo visor on his right hand. Surveillance further revealed Redding waiting in line with the other inmates until they

28 were released. During the footage Corrections officers and Deputies observed Redding holding the visor over his right wrist to conceal the wrist

29 band until he exited the Branch Jail and no longer in view of the security cameras.

30

31 Video Surveillance further revealed a group of the inmates entering the Votran bus but due to low quality Deputies were unable to observe if

32 Redding was with the group of inmates and entered the bus or not.

33

34 Correctional staff advised Redding was made aware he was not to be released due to being held over for Seminole County, providing knowledge

35 he was not to be released due to his warrant from Seminole County, on unrelated charges.

36

37 Furthermore, on 08/19/2019 at 2049 Redding made a phone call to his mother from Volusia County Branch Jail to his mother advising he had a

38 hold from Seminole County.

39

40 Video surveillance was available for Deputies to further review.

41

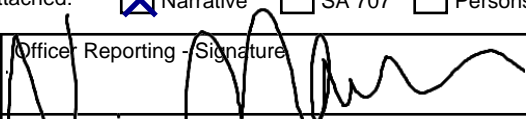
42 Video Surveillance and Votran bus ticket logs were collected which were later turned over EDU.

43

44 Deputy Marsan completed a charging affidavit and provided it to Detective Huffman to obtain a warrant.

45

46 Case Status: Active.

ADMINISTRATIVE	Final Case Status:	Final Case Status Codes: 1.Arrest/Adult 2.Arrest/Juv. 3.Exceptional/Adult 4.Exceptional/Juv. 5.Closed 6.Unfounded	<input type="checkbox"/> Victim Advocate	<input type="checkbox"/> Triad	<input type="checkbox"/> SA Referral	
	<input type="checkbox"/> DCF Hotline	Date:	Time:	<input type="checkbox"/> FCIC / NCIC Entry	<input type="checkbox"/> T.T. BOLO	
	<input type="checkbox"/> CAC	Spoke With:		<input type="checkbox"/> FCIC / NCIC Cancel	Date:	By:
	Connecting Report Number	Agency	Additional Forms Attached: <input checked="" type="checkbox"/> Narrative <input type="checkbox"/> SA 707 <input type="checkbox"/> Persons <input checked="" type="checkbox"/> Property <input type="checkbox"/> Veh./Tow Sheet <input type="checkbox"/> Other Describe: _____			
Officer Reporting - Printed	Officer Reporting - Signature		ID. Number	Unit	Date	
Necole, Marsan			8866	1D33	08-23-2019	
Officer Reviewing - Printed (If Applicable)	Officer Reviewing - Signature (If Applicable)		ID. Number	Unit	Date	

**7th. Judicial Circuit 707
Charging Affidavit - Volusia**

Arrest # _____ Bk # _____ Pg # 1 of 4

ARREST <input type="checkbox"/>	NOTICE TO APPEAR <input type="checkbox"/>	AFFIDAVIT <input checked="" type="checkbox"/>	C.C. <input type="checkbox"/>	ADULT <input checked="" type="checkbox"/>	JUVENILE <input type="checkbox"/>	Court Case Number: <u>2019304917CFDB</u>
(ORI) FL: <u>FL0640000</u>	Agency Name: <u>VOLUSIA COUNTY SHERIFF'S OFFICE</u>	Agency Case Number: <u>190018185</u>				
FCIC/NCIC Check? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	OBTS # _____	U.C.R. _____	Date Arrested: _____	Time of Arrest: _____		

ADDRESS OF ARREST (Street, City, State, Zip):		Arrested By: _____	ID Number: _____
DEFENDANT	NAME (Last) <u>REDDING</u> (First) <u>MICHAEL</u> (Middle) <u>L</u>	A.K.A.: _____	Sex: <u>M</u> Race: <u>W</u>
DOB: <u>11-10-1977</u>	Age: <u>41</u>	Driver's Lic./ID No.: _____	State: <u>FL</u> Year Expires: <u>2017</u> S.S.# - _____
Height: <u>5' 08"</u>	Weight: <u>195</u>	Hair: <u>BRO</u> Eyes: <u>HAZ</u>	P.O.B. (City, State, Country): <u>FL</u>
Scars, Marks, Tattoos: _____	Business & Occupation: _____		Statement: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Citizenship: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Probation: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Sexual Predator: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	English: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Deaf/Mute: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Address - Mailing/Permanent (STREET, APT. NUMBER) <u>190 11TH AVE</u>	(CITY) <u>OSTEEN</u> (STATE) <u>FL</u>	ZIP CODE <u>32764</u>	RESIDENCE PHONE _____
Address - Local (STREET, APT. NUMBER) _____	(CITY) _____ (STATE) _____	ZIP CODE _____	RESIDENCE PHONE _____
Address - Other (Employer/School) (STREET, APT. NUMBER) _____	(CITY) _____ (STATE) _____	ZIP CODE _____	BUS/SCHOOL PHONE _____

CHARGES	DOMESTIC VIOLENCE? Yes <input type="checkbox"/>	Attachments: Affidavit(s)? <input type="checkbox"/>	Statement(s) <input type="checkbox"/>	NTA Schedule <input type="checkbox"/>	Report <input checked="" type="checkbox"/>	Traffic Infraction(s) <input type="checkbox"/>	DUI <input type="checkbox"/>	Total Charges: <u>1</u>
#1 Charge: <u>Prisoner Escape</u>	FEL <input checked="" type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: <u>944.40</u>	Citation No.: _____	Bond: <u>NO BOND</u>				
#2 Charge: _____	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: _____	Citation No.: _____	Bond: _____				
#3 Charge: _____	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: _____	Citation No.: _____	Bond: _____				

CO-DEFENDANT	Co-Def #1. Arrested? Y <input type="checkbox"/> N <input type="checkbox"/> Fel. <input type="checkbox"/> Misd. <input type="checkbox"/> Traf. <input type="checkbox"/> Ord. <input type="checkbox"/> NTA <input type="checkbox"/>	Co-Def #2. Arrested? Y <input type="checkbox"/> N <input type="checkbox"/> Fel. <input type="checkbox"/> Misd. <input type="checkbox"/> Traf. <input type="checkbox"/> Ord. <input type="checkbox"/> NTA <input type="checkbox"/>
#1 NAME (Last) _____ (First) _____ (Middle) _____	Race: _____ Sex: _____ DOB: _____ Age: _____	
#2 NAME (Last) _____ (First) _____ (Middle) _____	Race: _____ Sex: _____ DOB: _____ Age: _____	

NARRATIVE The undersigned certifies and swears that there is probable cause to believe the above-named defendant, on the 23 day of August, 2019, at approximately 0701 a.m. p.m. at 1300 RED JOHN DRIVE DAYTONA BEACH within Volusia County, violated the law and did then and there:

1 On 08/23/2019 at 1212 hours, Deputies responded to 1300 Red John Drive, Daytona Beach, in reference to a reported escaped prisoner. Upon
 2 arrival Deputy Marsan made contact with Corrections Sergeant Rivers who advised he was processing inmates to be released.
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 10 knowledge Redding was supposed to be held over for Seminole County in reference to unrelated charges and placed Redding's face sheet to the
 11 side. Rivers did not call Redding into the office due to the information he was provided and having knowledge he was to be held.
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 14 advised he placed each of the inmates property, including Redding's, in the holding cell they were in. Rivers further advised he did not realize
 15 Redding's property bag was with the rest of the inmates. Due to being transported to Seminole County, Redding changed into his civilian clothing and

NOTICE TO APPEAR	MANDATORY APPEARANCE <input type="checkbox"/>	YOU NEED NOT APPEAR IN COURT BUT MUST COMPLY WITH INSTRUCTIONS ON THE REVERSE SIDE OF YOUR COPY <input type="checkbox"/>	FINE, AND COSTS AMOUNT: _____
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I AGREE TO APPEAR IN COURT HEREIN TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE INDICATED, I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED, OR PAY THE LISTED FINE, I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST WILL BE ISSUED.

SIGNATURE OF DEFENDANT _____	Date _____	SIGNATURE OF JUVENILE PARENT OR CUSTODIAN _____	RELATIONSHIP TO JUVENILE _____	JUVE DISP. CITATION No. _____
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Sworn to and subscribed before me, the undersigned this <u>23</u> day of <u>August</u> , <u>2019</u> Name: <u>[Signature]</u> <u>9560</u>	I swear/affirm the above statements are correct and true <u>[Signature]</u> OFFICER'S/COMPLAINANT'S SIGNATURE MARSAN,NECOLE MARIE NAME (PRINTED) 8866 ID NUMBER	Notary Public <input type="checkbox"/> Law Enforcement or Corrections Officer <input checked="" type="checkbox"/> Personally Known <input checked="" type="checkbox"/> Produced Identification <input type="checkbox"/> Type of Identification: <u>HUFFMAN</u>	2019 AUG 23 PM 2:54 FILED
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OFFICIAL USE ONLY Inmate Number & Facility: _____

Narrative Supplement 707-B

Arrest
 Affidavit
 Notice to Appear
 Adult
 Juvenile

Court Case Number:

Page # 3 of 4

Defendant (Last) Name: REDDING	(First) MICHAEL	(Middle) L	Agency Case Number: 190018185
CHARGES		DOMESTIC VIOLENCE? Yes <input type="checkbox"/> Attachments: Affidavit(s)? <input type="checkbox"/> Statement(s) <input type="checkbox"/> NTA Schedule <input type="checkbox"/> Report <input checked="" type="checkbox"/> Traffic Infraction(s) <input type="checkbox"/>	Total Charges: 1
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: Citation No.: Bond:
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: Citation No.: Bond:
#	Charge:	FEL <input type="checkbox"/> MISD <input type="checkbox"/> ORD <input type="checkbox"/>	FS/ORD: Citation No.: Bond:

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21 County. At that time Rivers was unable to locate Redding along with his bag of clothes. Rivers confirmed with the Correctional Officer in charge of

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36 Furthermore, on 08/19/2019 at 2049 Redding made a phone call to his mother from Volusia County Branch Jail to his mother advising he had a hold

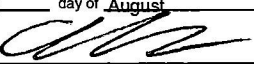
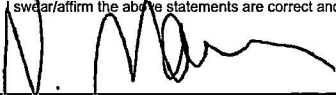
37 from Seminole County.

38

39 Video surveillance was collected and provided to Deputies for further review.

40

41 Deputy Marsan completed a charging affidavit and provided it to Detective Huffman to obtain a warrant.

Sworn to and subscribed before me, the undersigned this 23 day of August, 2019	I swear/affirm the above statements are correct and true	Right Thumb
Name:  8560		
Notary Public <input type="checkbox"/> Law Enforcement Officer <input checked="" type="checkbox"/>	OFFICER'S/COMPLAINANT'S SIGNATURE	
Personally Known <input checked="" type="checkbox"/> Produced Identification <input type="checkbox"/>	MARSAN,NECOLE MARIE	8866
Type of Identification: Del. Huffman	NAME (PRINTED)	ID NUMBER

Witness/Victim/Evidence Form 707-A

Arrest
 Affidavit
 Notice to Appear
 Adult
 Juvenile

Court Case Number: 190018185

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Defendant (Last) Name: REDDING		(First) MICHAEL	(Middle) L	Agency Case Number: 190018185					
Name: (Last)	(First)	(Middle)	Vic <input type="checkbox"/>	Wit <input type="checkbox"/>	Race:	Sex: M <input type="checkbox"/> F <input type="checkbox"/>	Age:	DOB:	SSN:
Address (#, Street, City, State):			Zip:		Home: Phone:		Statement: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Bus/School Address:			Zip:		Home: Phone:		Bus: Phone:		
Relative/Contact Name			Relative/Contact Address:		Home: Phone:		Phone:		

EVIDENCE COLLECTED

Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
BWC	08-23-2019		
Owner Name (Last) (First) (Address)	(Phone)	Value	
VIDEO SURVEILLANCE	08-23-2019		
Owner Name (Last) (First) (Address)	(Phone)	Value	
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
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Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount
Description of Evidence	Date Recovered	Model Serial/I.D. Number	Drug Amount

I certify that the foregoing is a complete list of witnesses/victims & evidence known to me.

MARSAN,NECOLE MARIE
Investigating Officer

N. Marie
8866
ID Number

VC SO
Agency