

Arapahoe County Sheriff's Office

Crime Laboratory Supplemental Report

CR#: CT13-44545

Attempted Homicide

Supervising Criminalist – Andrea K. Stephen, MSFS, CLPE, CCSA *04038

Date of Report: 12/17/13

Investigator Assigned: McCauley/Himes

On Friday, December 13, 2013 at about 1350 hours Lieutenant Heaton contacted me and requested that all Criminalists respond to assist with a shooting that had occurred at Arapahoe High School. He requested we respond to the staging area at the Chase Bank across the street from the school. I was en route at about 1355 hours and arrived on scene at about 1420 hours and met with Lieutenant Heaton. He informed me that the bomb squad was still clearing the building.

At about 1545 hours Investigator E. Smith requested photographs be taken of some school staff who had assisted a shooting victim to document the blood on their clothing. I took photographs of Darryl Meredith and Rod Mauler.

Information was relayed by Lieutenant Heaton providing a possible identity of the deceased suspect as:

Karl Pierson

DOB [REDACTED]

We received notification that we were clear to enter the school at about 1730 hours. Sergeant Anselmi walked me through the scene with representatives from CBI, FBI and ATF pointing out the areas of the scene he knew to be involved in the incident to include the northwest hallway where the suspect had entered and the female victim had been shot, the library, the suspect's locker and the hallways leading from the northwest doors to the library. ATF Agent Forkner looked at the shotgun during the walkthrough to obtain information for an emergency trace. He read off the following information from the shotgun:

Stevens Model 320, 12 gauge shotgun

Serial number 134200P

Sun City Machinery Co., LTD in P.R.C.

Imported by Savage Arms Inc. Westfield, MA USA

At about 1700 hours Chief Line asked if we could positively identify the suspect through fingerprints. Coroner's approval was received by Lieutenant Heaton for us to take a photograph of the decedent's right index finger for identification purposes. I assisted Criminalist Dominguez in taking photographs of the decedent's right index finger. The decedent's wallet was also lying next to the body. Criminalist Dominguez took photographs of the wallet in its original position, then of the driver's license inside showing the name of Karl Pierson. Criminalist Dominguez compared the photographs of the decedent's finger with the DMV dossier received by Investigator Johnston. I independently examined the photographs of the finger and the DMV dossier fingerprint. We concurred that both were made by the same source individual.

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ATF Agents Forkner and Whiteley entered the scene to obtain 360 panoramic photographs of all of the primary scene locations (hallway, library, library office area). We divided the remaining scene responders from Arapahoe County, CBI and FBI ERT into four investigations teams.

- Team 1: responsible for the east portion of the main library where the decedent and shotgun were found. This team was led by Criminalist Dominguez.
- Team 2: responsible for the office area of the library with two shots fired. This team was led by Criminalist Bryant. This team also documented the hallways outside the library leading to the northwest doors and the suspect's locker.
- Team 3: responsible for the west side of the library where the Molotov cocktail had ignited. This team was led by Criminalist Bajda.
- Team 4: responsible for the west hall leading from the northwest doors to the study center at the south end of the school (area where female victim was shot). This team was led by Criminalist Adams.

**See each Criminalist's report for a full list of their team members and details of their investigation.

FBI ERT Agent DeFrance and CBI Agent Vallario were paired together to analyze the trajectory of the shots fired in the hallway (team 4's area) and the library office area (team 2's area).

I assisted Criminalist Dominguez with the diagram and evidence marking for Team 1's area. I also assisted all teams with logistics and communications with Commanders outside of the scene.

Coroner's Investigator C. Goodman arrived on scene to examine the body. She noted there was an apparent entrance gunshot wound to the left side of the subject's face. There was no apparent exit wound. Both hands were bagged prior to transport.

I cleared the scene at about 0100 hours and returned to ACSO Headquarters with photographs. The photographs were archived in the Crime Lab's secure image server.

On Saturday, December 14, 2013 at about 0930 hours I returned to Arapahoe High School to continue the investigation. I coordinated with all of the returning teams and found the following information:

- Team 1 was essentially done with their investigation. All that remained was some further documentation of bloodspatter found near the decedent's body.
- Team 2 needed to finish evidence collection and trajectory analysis of the two shots fired in the library office area.

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- Team 3 was finished with their investigation. All items had been collected and all documentation was complete.
 - Team 4 was planning to document the scene and evidence items with Nikon Total Station, complete a trajectory analysis of the three shots fired in the hallway and collect all of the evidence items.

CBI Agents K. Torres and C. Thomason collected 3-D scans of all scene areas with a Faro Scan Station prior to any further analysis or collection being done.

I assisted all teams in logistics and communications with Commanders outside of the scene.

All evidence collection and scene documentation was completed and I cleared the scene at about 1815 hours.

Autopsy

On Monday, December 16, 2013 at about 0830 hours I responded to the Arapahoe County Coroner's Office to document the autopsy of the suspect performed by Dr. Dobersen and assisted by D. Wiggs and C. Catterall. I took overall photographs of the body as it arrived. I photographed the computer screen showing x-rays that were taken of the decedent.

I collected all clothing and personal items from the decedent as they were removed from the body to include the following:

- Green/gray cargo pants, black shoes, two pairs of black socks, a red-t-shirt with CCCP logo, a gray West Point hoodie, gray long sleeved t-shirt, black long underwear, blue boxer briefs, a machete with sheath, a flashlight and holder, a lighter, a bandolier with 20 red steel shot shells, a bandolier with 21 white Royal buckshot shells, a gray baseball-style hat, the bags from each hand, and his wrist watch.

We noted handwritten information on the decedent's left inner forearm. There were 2 areas written:

- Faintly written sideways on his arm:

Alea
lacta
Est

- Internet research revealed this phrase to mean "The die has been cast" in Latin.

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- Written in black marker vertically down his inner forearm (from wrist end to elbow end):



Dr. Dobersen noted the gunshot wound appeared to have been near-contact due to the rippled appearance to the entrance wound. He also noted some abrasions to the face that could have been caused by pellets that didn't perforate the skin. Internally he noted a skull fracture on both sides of his head and 10 pellets and the plastic wad were collected from the brain.

I cleared the autopsy at about 1030 hours with photographs and evidence. The evidence items were secured in the Crime Lab to dry. The photographs were archived in the Crime Lab's secure image server.

END OF REPORT.



Evidence Release Form

Case Number: 2013-02531

Decedent: PIERSON, Karl Halverson

Evidence: Clothing / Pair of black shoes
Evidence: Clothing / 2 Pairs of black socks
Evidence: Clothing / Grey/green pants
Evidence: Clothing / Black long johns
Evidence: Clothing / Grey long sleeve shirt
Evidence: Clothing / Blue striped boxer brief underwear
Evidence: Clothing / Red tee-shirt
Evidence: Miscellaneous / Bag from right hand
Evidence: Miscellaneous / Bag from left hand
Evidence: Clothing / Grey zipper hooded jacket
Evidence: Clothing / Grey hat
Evidence: Miscellaneous / 2 Ammo belts from chest and waist
Evidence: Miscellaneous / Ammo- chest had 20 bullets, waist had 21
Evidence: Miscellaneous / Flashlight in case
Evidence: Miscellaneous / Red Lighter
Evidence: Miscellaneous / Machete with case
Evidence: Miscellaneous / Watch- black
Evidence: Miscellaneous / Bullet fragments with shot cup

DATE: 12-16-13
TIME: 1031

SIGNATURE:
WITNESS:

A. K. Stephen 01038
Denise Wiggins

CTB-44545
12-16-13

ACSO AHS Investigation

ACSO_0001194

ARAPAHOE COUNTY SHERIFF'S OFFICE
Crime Lab Progress Report
Centennial Case Number CT13-44545
Homicide
Criminalist II Diane W. Cloyd

Suspect Vehicle Documentation at Arapahoe High School

On 12-13-13 at approximately 1810 hours I was requested to document the suspect's vehicle at Arapahoe High School. The suspect's vehicle is a tan 2001 Toyota Corolla parked on the north side of the school. The vehicle is to be photographed, sealed, and then followed to the lab bay. FBI ERT members will do a diagram of the vehicle location. The bomb squad has searched the vehicle and it is safe. A search warrant will be forth coming.

I responded to the north side of the high school at approximately 1820 hours. There are crime scene barrier tapes at each entrance and Deputies Wightman and Horvath are protecting the area. Also present with me are FBI ERT members – Rene VonderHaar, Kim Milka, and Whitney Orndorff. The suspect's vehicle is parked in the fire lane on the north side of the school. It is described as follows:

- 2001 Toyota Corolla LS four door sedan, tan in color
- Colorado license plates on the front and rear – [REDACTED] which expire in November of 2014.
- The VIN is [REDACTED]

I photographed the vehicle and noted the following:

- The doors and windows are all closed, but all the doors appear to be unlocked.
- There is a Mountain Dew four pack carton on the front passenger seat. There is one bottle in the carton.
- There are keys on a lanyard on the front driver's seat.
- There are two black "Valeo" gloves on the driver's floor
- There is a slip of paper on the right rear floor.

The FBI team did a diagram of the vehicle's current location. They used the fire hydrant and southern most barrier pole east of the vehicle as fixed markers. They also used each side support of a cement stairwell south of the vehicle as fixed points. Orndorff also did a photo log.

I also took photos showing the fixed points in relationship to the vehicle. We marked each tires position with orange spray paint for future reference.

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At approximately 1915 hours I placed seals on the doors, trunk and hood of the vehicle. I used additional black and yellow ruler adhesive tape as the seals were not adhering well due to the temperature (approximately 36 degrees F).

The vehicle was towed by First Class Towing back to the Arapahoe County Sheriff's Office Crime lab bay accompanied by myself and Deputies Wightman and Horvath. The vehicle was secured in the bay at approximately 2045 hours and a copy made of the impound report.

All of the images were subsequently saved to the lab secure image server. The photo log and the diagram of the vehicle's location at AHS were also scanned and saved to the lab secure image server under the same incident folder.

The original diagram and photo log, as well as a copy of the vehicle impound are attached to this report.

Diane W. Cloyd 9316
Criminalist II Diane W. Cloyd

*AR/SDA/ARW
1-8-14*

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CT 13-44545

PAGE 2 of 2

VIN: 1N1XBR12E24Z431121

* NOT TO SCALE *

12/13/2013 prepared by FBI SA Kimberly Milke, SA Rene Vonderhaar:

OST Whitney Omdorff

Location: 2201 E. Dry Creek Road, Centennial, CO

AP/1-31/14

Fixed Points

- ① Center of South Concrete Post
- ② Fire Hydrant
- ③ East Concrete Stair Railing - Bottom Center
- ④ West Concrete Stair Railing - Bottom Center

Measurements

- ① to A = 46'3"
- ② to A = 43'7"

- ① to B = 53'8"
- ② to B = 51'9"

- ② to C = 44'2"
- ③ to C = 13'9"

- ③ to D = 12'8"
- ④ to D = 12'8"

Distance between ① and ② = 18'

Distance between ③ and ④ = 5'1"

A = Driver's side front tire

B = Driver's side rear tire

C = Passenger side front tire

D = Passenger side rear tire

Photo #	Type	Scale Used	Classification	Description
1	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	CR board-AHS north lot Susp. Veh [REDACTED]
2	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	View of 5 veh in Fire lane, Facing SE
3	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	" closer to Veh.
4	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	drivers side & rear of Veh; Facing SE
5	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	drivers side of Veh; Facing south
6	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	" " tan 4 door sedan
7	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	Front & drivers side of Veh. Facing SW
8	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	" " [REDACTED] 11/14
9	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	Front of Vehicle, Facing west
10	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	" "
11	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	Front & passenger side of Veh; Facing NW
12	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	" "
13	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	Passenger side of Veh. Facing north
14	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	" "
15	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	Passenger side & rear of Veh. Facing NE
16	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	" "
17	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	Rear of Veh, Facing East
18	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	Drivers side & rear of Veh., Facing SE
19	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	passenger area from drivers side
20	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	front driver/passenger area from drivers side
21	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	interior of Veh through windshield
22	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	interior of Veh. from passenger-front side
23	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	front pass. seat with 4pk. carton of Mtn. Dew - 1 bottle

AR/1-3-14

Date 12-13-13Assistant W. Orndorff FBI-ERT

Photo #	Type	Scale Used	Classification	Description
24	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	rear Veh. seats from passenger side
25	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	VIN plate on dash through windshield
26	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	Front drivers side wheel
27	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	drivers side showing 3 locks up
28	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	drivers side rear wheel
29	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	Front drivers side tire tread
30	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	rear drivers side tire tread
31	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	passenger side rear tire tread
32	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	passenger side front tire tread
33	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	Veh and fixed pts fire hydrant & southern barrier pole
34	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	Veh and fixed pts. cement stair rails
35	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	drivers side seals on both doors; tires marked paint
36	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	seal on trunk lid
37	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	seal with date/time/CR/initials
38	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	passenger side seals on both doors; tires marked paint
39	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	seal on hood of vehicle
	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	
	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	
	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	
	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	
	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	
	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	
	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	

AR/SDA03020
1-3-14

TOWED MOTOR VEHICLE FORM

ARAPAHOE COUNTY SHERIFF'S OFFICE CASE REPORT		CONNECTING CASE NO.		CASE REPORT NO.																																																																			
		OUTSIDE AGENCY		CT13-44545																																																																			
REASON TOWED <input type="checkbox"/> CRASH <input type="checkbox"/> ARREST <input type="checkbox"/> ABANDONED/HAZARD <input type="checkbox"/> SAFE KEEPING		<input type="checkbox"/> RECOVERED STEAL <input checked="" type="checkbox"/> OTHER EVIDENCE		REASON HELD (additional info in narrative) HOLD FOR EVID. PROCESSING																																																																			
		POLICE HOLD Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Hold for Summons <input type="checkbox"/>																																																																					
DATE 12/13/13 TIME 1630 AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>		LOCATION 2201 E 1ST CREEK RD		VEHICLE CT																																																																			
CODES DR=DRIVER; RO=REGISTERED OWNER; V=VICTIM; W=WITNESS; LP=LAST PERSON IN POSSESSION; RP=REPORTING PARTY; S=SUSPECT																																																																							
DRIVER	CODE		LAST NAME		DOB																																																																		
	ADDRESS		CITY		STATE ZIP CODE																																																																		
	DRIVER'S LICENSE NUMBER AND TYPE		STATE	RACE	SEX	WGT. HGT. HAIR EYES HOME PHONE BUS. PHONE																																																																	
Reg. Owner	LAST NAME		FIRST		MI																																																																		
	HOME PHONE																																																																						
VEHICLE INFORMATION	ADDRESS		CITY		STATE ZIP CODE																																																																		
	LICENSE PLATE/ID		EXP. YR	STATE	VEHICLE YEAR																																																																		
	VIN		MAKE	MODEL	BODY STYLE																																																																		
	CO CO (TOP/BOTTOM)		VALUE OF VEHICLE \$ 100																																																																				
	TRUNK EXAMINED		YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>																																																																				
	VEHICLE DAMAGE		PROPERTY INVENTORY																																																																				
	1-SLIGHT 2-MODERATE 3-EXTREME		Notation Den, Valero black glass Car Keys on Army lane																																																																				
	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>ITEM</th> <th>CONDITION</th> <th>ITEM</th> <th>YES</th> <th>NO</th> </tr> </thead> <tbody> <tr><td>a. LP Tire</td><td rowspan="16" style="text-align: center; vertical-align: middle;">OK</td><td>p. Jack</td><td></td><td></td></tr> <tr><td>b. RF Tire</td><td>q. Spare Wheel/Tire</td><td></td><td></td></tr> <tr><td>c. RR Tire</td><td>r. Rear View Mirror</td><td></td><td></td></tr> <tr><td>d. LR Tire</td><td>s. Side View Mirror</td><td></td><td></td></tr> <tr><td>e. Wheels</td><td>t. Air Conditioner</td><td></td><td></td></tr> <tr><td>f. Penders</td><td>u. Auto Stereo/CD</td><td></td><td></td></tr> <tr><td>g. Body</td><td>v. Seats (Front)</td><td></td><td></td></tr> <tr><td>h. Top</td><td>w. Seats (Rear)</td><td></td><td></td></tr> <tr><td>i. Head</td><td>x. Tape/Recorder</td><td></td><td></td></tr> <tr><td>j. Gail</td><td>y. Transmission</td><td></td><td></td></tr> <tr><td>k. Upholstery</td><td>z. Bumper (Front)</td><td></td><td></td></tr> <tr><td>l. Antenna</td><td>aa. Bumper (Rear)</td><td></td><td></td></tr> <tr><td>m. Windows</td><td>ab. Keys</td><td></td><td>NO</td></tr> <tr><td>n. Windshield</td><td>ac. Motor</td><td></td><td></td></tr> <tr><td>o. Hub Caps</td><td>cc. Battery</td><td></td><td></td></tr> </tbody> </table>		ITEM	CONDITION	ITEM	YES	NO	a. LP Tire	OK	p. Jack			b. RF Tire	q. Spare Wheel/Tire			c. RR Tire	r. Rear View Mirror			d. LR Tire	s. Side View Mirror			e. Wheels	t. Air Conditioner			f. Penders	u. Auto Stereo/CD			g. Body	v. Seats (Front)			h. Top	w. Seats (Rear)			i. Head	x. Tape/Recorder			j. Gail	y. Transmission			k. Upholstery	z. Bumper (Front)			l. Antenna	aa. Bumper (Rear)			m. Windows	ab. Keys		NO	n. Windshield	ac. Motor			o. Hub Caps	cc. Battery					
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DATE OF REPORT		SIGNATURE OF OFFICER		NUMBER																																																																			
				REVIEWED BY (INITIALS)																																																																			
				I authorize and accept responsibility for the above-captioned vehicle to remain where now parked and understand that this vehicle MUST be moved within 24 hours, or it may be towed at the owner's expense.																																																																			
				OPERATOR																																																																			

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Suspect's Arapahoe High School Planner Documentation

On 12-24-13 at approximately 0900 hours Investigator Johnston brought the Arapahoe High School planner belonging to Karl Pierson to the lab for photographs. This student planner had been collected from Karl Pierson's bedroom on 12-13-13 and had been booked into evidence. It has Arapahoe County Sheriff's Office tag number 64187.

I photographed the planner as it had been booked and then each page inside. There are extensive notations in the book, and several pages had folded edges. Investigator Johnston took notes on what was found.

I noted the following:

- Page one has the suspect's name and a phone number. There is also a notation "Saguntum 88"
- August, page 54 notation "Videri quam esse (Latin meaning: to seem to be rather than to be)"
- September 3 - notation - "Muh B-day 18!"
- September 7 - "Drudge Day!"
- September 13 (Friday) a number 1 in red ink
- September 18 - notation - "update diary- [REDACTED]"
- September 23 - notation - "I am not [REDACTED]" ([REDACTED] of debate team)
- September 26 - notation - "Jim Crow was mah nigga"
- October 27, Sunday- the countdown starts as day 47
- November 15 - notes several quizzes and then "MOOT!"
- November 20 - "I am not a number I am a free man"
- December 2 - "Bed @ 9!"
- December 5 - 11 are missing. This would be one page, front and back.
- December Friday 13 - notation "get pumped"

There are some notations after 12-13-13, but they seem more long range - like AP tests.

We concluded the photos at approximately 0945 hours. Investigator Johnston returned the planner to evidence.

Diane W. Cloyd 9316
Criminalist II Diane W. Cloyd

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SEARCH of SUSPECT'S VEHICLE

On 12-18-13 at approximately 1420 hours I was requested to assist in the execution of a search warrant of the suspect vehicle in this case. The vehicle had been sealed and towed from Arapahoe High School and secured in the Lab bay on 12-13-13. Also present for the search warrant execution were Sgt. C. Campbell and Investigator K. Johnston.

The vehicle is a 2001 Toyota Corolla LS bearing Colorado license plates [REDACTED] which expire in November of 2014. The vehicle is a tan, four door sedan. I photographed the exterior of the vehicle to document the seals. All were found intact. However the front passenger door seal appears to have fallen off in transit, as it is not on the vehicle or on the bay floor.

Johnston indicated there was a problem with the evidence list on the search warrant so we suspended activity prior to opening the vehicle.

On 12-19-13 at approximately 0800 hours Johnston and Campbell returned to the Lab bay to complete the execution of the search warrant. I again photographed the intact seals on the vehicle. I then photographed the exterior and interior of the vehicle and its contents and noted the following:

- The VIN is [REDACTED]
- There is an Arapahoe High School parking permit # [REDACTED] for 2013-2014 on the windshield.
- There is a four pack carton of Mountain Dew, which contains one full bottle, on the front passenger seat.
- There is a pair of black, "Valeo" gloves on the driver's floor. These gloves have open finger tips.
- Keys on an Army lanyard on the driver's seat
- There are two Mountain Dew bottle caps – one under the black gloves on the driver's floor and the second under the driver's seat.
- In the center console there is a Bellico Credit Union deposit slip for \$800 dated 12-12-13, marked "withdrawal" on account # [REDACTED]. The slip is signed by Karl Pierson.
- Also in the center console is a post it note with directions to [REDACTED]
- There is a roll of lime green duct tape on the left rear floor.
- The odometer reads 56563.
- There is approximately 1/3 tank of gas.

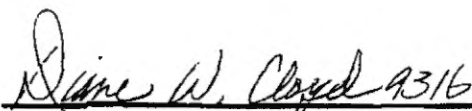
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- There is a vehicle registration and insurance card in the glove box. The registration is in Barbara Halverson Pierson's name. The purchase date is 11-13-2013.
- There are some smears on the inside of the front passenger window. The marks appear intentional, but do not form words. There is a resemblance to Chinese character writing.

These marks were photographed, then developed with graphite powder, re-photographed and then lifted as possible evidence. The lift was also photographed.

Investigator K. Johnston booked in the evidence collected from the vehicle as evidence. I booked in the gel lift of the finger marks as evidence.

We completed the search warrant execution at approximately 0900 hours. A copy of the warrant and the evidence taken from the vehicle were left on the driver's seat.


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SEARCH WARRANT at SUSPECT'S RESIDENCE

On 12-13-13 at approximately 2100 hours I was requested by Sgt. Peterson to respond to [REDACTED] to assist in the execution of a search warrant. I arrived on scene at approximately 2135 hours. Also present were Sgt. Peterson, Investigators K. Johnston, K. McCauley, Himes, Garnsey, Bartmann, and O'Neill. This address is a two story single family residence with an attached two car garage.

I started the photo documentation at approximately 2224 hours. I photographed each floor of the residence and the attached garage, and items of evidence as found by the investigators. I noted the following:

- The front door is metal with a wood core and was severely damaged when entry was made. The door frame was also damaged.
- The main floor consists of a foyer, living room, dining room, kitchen, family room, office, bathroom, laundry room and a two car garage.
- The second floor has a master bedroom and bath, and two additional bedrooms with a conjoined bathroom.
- There is a sliding glass door off the kitchen; which leads to the fenced backyard, and a stone patio. There are no out buildings.
- The basement is full and unfinished. It appears to be used solely for storage.
- The suspect's bedroom is in the northeast corner of the second floor. Numerous items of evidence were located to include the following:
 - Numerous empty boxes of shotgun shells – Royal Buck, Winchester and Remington
 - A portion of packaging for a Savage Arms shotgun
 - Packaging for shotgun shell belt and band
 - Receipts dated 12-13-13 from Target (Mountain Dew), Brunswick (lane and shoe rental) and Wal-Mart (3 boxes of ammunition).
 - Receipt for the shotgun and background check dated 12-06-13 from Cabelas.
 - Thumb drives and a hard drive
 - An NRA Marksman expert certificate for Karl Pierson
 - An AHS planner belonging to Karl Pierson with notations
 - A library book on the Columbine High School shooting
- The master bedroom had some papers reference mental health services for Karl Pierson dated 09-09-13

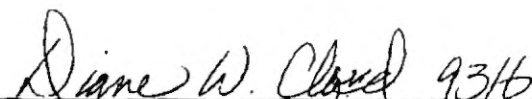
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- No prescriptions were found for Karl Pierson. However there were some supplements – "Calm PRT" and "GABAtrax" and a treatment plan for Karl Pierson dated 09-05-13
- A Mountain Dew bottle cap was found in the fruit bowl on the kitchen island.
- A red plastic gas can, with a low level of fluid; was found in the garage.
- White cotton type cloths torn in a narrow strip, along with the parent cloth; were found on top of the trash bin inside the garage.

All of the evidence was collected by the investigators. A copy of the search warrant and the evidence report forms were photographed and left at the scene.

We cleared the scene at approximately 0016 hours. I returned to the office to download images.


Criminalist II Diane W. Cloyd

Case CT13-44545

Address

Suspects Residence

Photographer D.W. Cloyd 9/3/16

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Date 12-13-13

Assistant

Photo #	Type	Scale Used	Classification	Description
1	Overall Midrange Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	CR board Search Warrant [REDACTED]
2	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	front of residence; which faces NW
3	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	"
4	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	[REDACTED] house numbers above 2 car garage.
5	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	view of open front door
6	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	trash bin in front of garage door
7	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	open gate to backyard SW corner of house
8	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	porch, front door & interior
9	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	living room & dining room - NW corner main floor
10	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	living room - north wall
11	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	living room & foyer
12	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	front door damage
13	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	hall from foyer to office - south side of res.
14	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	hall closet - upper half
15	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	hall closet - lower half
16	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	doorway to basement from hall
17	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	office - main floor, view from hall door
18	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	East wall of office
19	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	doorway from office to family room on North
20	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	office and doors to hall & family room
21	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	upper portion of desk on South wall; photos, papers
22	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	office South corner
23	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	office SW wall; hall doorway

DW Cloyd 9/3/16

AR/50005020
1-6-14

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Assistant

Photo #	Type	Scale Used	Classification	Description
24	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	laundry room off hallway
25	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	bathroom off main floor hallway
26	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	bathroom cabinet
27	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	family room; east side of res.; looking south
28	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	family room sofa & coffee table
29	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	fam. rm. sofa - envelope on back of sofa
30	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	fam. rm sofa env. addressed [REDACTED]
31	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	envelope addressed to [REDACTED]
32	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	env. open showing holiday card
33	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	open card signed "[REDACTED]"
34	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	small holiday gift bag next to envelope
35	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	fam. rm. coffee table, family photos, magazines
36	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	fam rm. fireplace wall with Christmas stockings - 3
37	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Kitchen looking to NE, island & table
38	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Kitchen N. wall appliances & island
39	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Kit. floor papers on floor NE of island
40	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Kit. floor papers looking NW
41	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Kit. floor papers on floor closer looking West
42	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	trash can NE end of island in kitchen (wire tissue)
43	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Dining rm. table with numerous items
44	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	papers on Din. table; to Kristen TomTom related
45	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Living Rm from hall looking North
46	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	stairs to second floor looking SW

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Photo #	Type	Scale Used	Classification	Description
47	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	looking NW from stairs into M. bedroom
48	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Master bedroom looking to N corner - bed; nightstand
49	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	M bedroom West wall, dresser, opening to bath
50	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	M bedroom and hall to M. bath
51	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	photo frame "Life's greatest blessings" 4 family photos
52	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Master bathroom counter & bath tub
53	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	M. bath toilet
54	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	M bath shower & tub
55	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	M bath counter & doorway to closet, looking NW
56	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	M. bedroom closet
57	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	M. bedroom closet upper shelves
58	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	M. bedroom closet, upper shelves, looking SW
59	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	" " hanging items & shelves, SW view
60	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	M. bedroom closet floor - shoes
61	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	M. bath counter & bath tub
62	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	2nd floor hall counter
63	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	papers on 2nd floor hall counter
64	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	View from second floor hall down to 1st floor foyer
65	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	2nd floor hall to doorway of suspect's bedroom
66	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Suspect's bedroom - NE corner of 2nd floor
67	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Suspect's bedroom
68	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	" ammo box empty on floor
69	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Suspect's bedroom N wall, book cases

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Case CT13-44545Address [REDACTED]Photographer D.W. Cloyd 9316Page 4 of 12Date 12-13-13

Assistant _____

Photo #	Type	Scale Used	Classification	Description
70	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Suspects bedroom - N wall & Floor
71	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Suspects bed; receipts, Altoid tin; cap, box
72	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Target receipt;
73	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Target receipt - 12-13-13 09:44 - Mth. Dew
74	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Royal Buck 12ga. ammo box empty
75	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Lone Tree Brunswick Recept. 12-13-13 09:11 lane/shoe rental
76	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Altoid tin; electronic pad
77	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	\$5 bill, Royal buck lid; WalMart, Target receipts
78	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Highland Ranch WalMart rept. 12-13-13 07:24 3 boxes ammo
79	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	second photo "
80	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Suspects bedrm. Floor - papers
81	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	" Floor - ammo boxes
82	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	" Floor - Winchester 12ga box empty
83	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Suspects bedroom - closet wall
84	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	" " clothing in closet
85	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Susp. bedrm Floor - Savage Arms packing material
86	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Pump Shotgun Susp. bedrm. Floor - Savage Arms packing material
87	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Debate trophy on book shelf
88	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Susp. bedrm Floor; red & gray back pack
89	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	" " interior back pack - empty
90	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Susp. bedrm & adjoining bathroom
91	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Susp. bedrm - SW wall; track awards; West Pt. poster
92	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	" " " cross country 2011 & 2012

DW Cloyd 9316

AR/SDA08020
1-6-14

Date 12-13-13

Assistant _____

Photo #	Type	Scale Used	Classification	Description
93	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	bathroom between suspect & [REDACTED] bedrooms
94	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	bathroom counter top
95	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	toilet, tub-shower
96	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	East side medicine cabinet
97	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	linen closet
98	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	bathroom cabinet
99	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Susp. bedrm Floor - ammo boxes; shell belt wrappers
100	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	" " Winchester & Remington
101	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Remington box for 5 rounds rifled slugs - empty
102	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Winchester box - Super X 12ga bird shot - empty
103	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Cabela's shotgun shell belt - wrapper
104	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Cabela's shotgun shell band - wrapper
105	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	bathroom cabinet contents
106	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	bathroom drawer contents 1st top drawer
107	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	" " " 2nd drawer
108	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	" " " bottom drawer
109	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	" " " " 2nd shot
110	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	bathroom cabinet contents
111	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	toilet, trash can
112	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	trash can contents
113	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	back of door - books to read
114	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	[REDACTED] bedroom - NW corner 2nd floor
115	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	" desk; dressing table

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Photo #	Type	Scale Used	Classification	Description
116	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	[REDACTED] desk, dressing table
117	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	[REDACTED] closet wall, doorway to hall
118	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	[REDACTED] daybed - West wall
119	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	[REDACTED] - items on floor
120	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	[REDACTED] desk wall
121	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	[REDACTED] bed wall
122	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	LPS papers - [REDACTED] renew enrollment
123	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	[REDACTED] - mail indices
124	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Suspect's desk top
125	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Karl Pierson mail indices
126	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	" 2nd photo
127	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Susp. AHS student planner
128	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	" open to Dec. 13
129	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	" pg. 87 December 15
130	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	" Dec 13 notation "Get pumped"
131	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Susp. bed under drawers - blk box
132	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	" blk box with key lock
133	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Susp bed - Altoid tin
134	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Altoid tin
135	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	" open - Cabela's receipt inside
136	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Cabela's recpt. 12-06-13 CO background for \$10
137	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	2 Cabela's recpts. - background; shotgun
138	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Cabela's recpt 12-06-13 SAV 320 pump (shotgun)

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Photo #	Type	Scale Used	Classification	Description
139	Overall Midrange Closeup	Yes No	Entry Evidence	Cabela's shotgun rept & Savage Arms warning tag
140	Overall Midrange Closeup	Yes No	Entry Evidence	Savage Arms warning tag
141	Overall Midrange Closeup	Yes No	Entry Evidence	Susp. bedroom, book case on end of deck, trash can
142	Overall Midrange Closeup	Yes No	Entry Evidence	trash can with green plastic bag, foil balls
143	Overall Midrange Closeup	Yes No	Entry Evidence	green plastic Cabelas bag found in trash can
144	Overall Midrange Closeup	Yes No	Entry Evidence	" 2nd shot
145	Overall Midrange Closeup	Yes No	Entry Evidence	blk/tan Royal Buck box on floor near trash can
146	Overall Midrange Closeup	Yes No	Entry Evidence	black/tan Royal Buck box, open, lid torn
147	Overall Midrange Closeup	Yes No	Entry Evidence	" 2nd shot
148	Overall Midrange Closeup	Yes No	Entry Evidence	Susp deck; AHS student planner; December 13
149	Overall Midrange Closeup	Yes No	Entry Evidence	AHS planner Dec. 3 period 6 "Killer"
150	Overall Midrange Closeup	Yes No	Entry Evidence	door way to basement on main floor
151	Overall Midrange Closeup	Yes No	Entry Evidence	stairway down to basement
152	Overall Midrange Closeup	Yes No	Entry Evidence	bottom of basement stairway
153	Overall Midrange Closeup	Yes No	Entry Evidence	segment of unfinished basement; storage items
154	Overall Midrange Closeup	Yes No	Entry Evidence	"
155	Overall Midrange Closeup	Yes No	Entry Evidence	segment of basement, furnace on left
156	Overall Midrange Closeup	Yes No	Entry Evidence	area of basement past furnace - suitcases, coolers
157	Overall Midrange Closeup	Yes No	Entry Evidence	back packs in basement
158	Overall Midrange Closeup	Yes No	Entry Evidence	camping equip. in basement
159	Overall Midrange Closeup	Yes No	Entry Evidence	segment of basement, storage items
160	Overall Midrange Closeup	Yes No	Entry Evidence	from corner of basement, looking back to stair case
161	Overall Midrange Closeup	Yes No	Entry Evidence	" " another quadrant

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Photo #	Type	Scale Used	Classification	Description
162	Overall <u>/</u> Midrange <u>-</u> Closeup <u>-</u>	Yes <u>/</u> No <u>7</u>	Entry <u>-</u> Exit <u>-</u> Other <u>-</u> Evidence <u>-</u> Latent <u>-</u>	length of basement
163	Overall <u>-</u> Midrange <u>/</u> Closeup <u>-</u>	Yes <u>/</u> No <u>7</u>	Entry <u>-</u> Exit <u>-</u> Other <u>-</u> Evidence <u>-</u> Latent <u>-</u>	" same wall, midrange
164	Overall <u>/</u> Midrange <u>-</u> Closeup <u>-</u>	Yes <u>/</u> No <u>7</u>	Entry <u>-</u> Exit <u>-</u> Other <u>-</u> Evidence <u>-</u> Latent <u>-</u>	edge of stairwell on rt.; storage items
165	Overall <u>-</u> Midrange <u>/</u> Closeup <u>-</u>	Yes <u>/</u> No <u>7</u>	Entry <u>-</u> Exit <u>-</u> Other <u>-</u> Evidence <u>-</u> Latent <u>-</u>	Christmas, Halloween items
166	Overall <u>/</u> Midrange <u>-</u> Closeup <u>-</u>	Yes <u>/</u> No <u>7</u>	Entry <u>-</u> Exit <u>-</u> Other <u>-</u> Evidence <u>-</u> Latent <u>-</u>	more Christmas, storage items
167	Overall <u>/</u> Midrange <u>-</u> Closeup <u>-</u>	Yes <u>/</u> No <u>7</u>	Entry <u>-</u> Exit <u>-</u> Other <u>-</u> Evidence <u>-</u> Latent <u>-</u>	another quadrant of basement; stairwell on rt.
168	Overall <u>-</u> Midrange <u>/</u> Closeup <u>-</u>	Yes <u>/</u> No <u>7</u>	Entry <u>-</u> Exit <u>-</u> Other <u>-</u> Evidence <u>-</u> Latent <u>-</u>	storage items in basement
169	Overall <u>/</u> Midrange <u>-</u> Closeup <u>-</u>	Yes <u>/</u> No <u>7</u>	Entry <u>-</u> Exit <u>-</u> Other <u>-</u> Evidence <u>-</u> Latent <u>-</u>	"
170	Overall <u>/</u> Midrange <u>-</u> Closeup <u>-</u>	Yes <u>/</u> No <u>7</u>	Entry <u>-</u> Exit <u>-</u> Other <u>-</u> Evidence <u>-</u> Latent <u>-</u>	" in basement
171	Overall <u>/</u> Midrange <u>-</u> Closeup <u>-</u>	Yes <u>/</u> No <u>7</u>	Entry <u>-</u> Exit <u>-</u> Other <u>-</u> Evidence <u>-</u> Latent <u>-</u>	under stairwell in basement
172	Overall <u>/</u> Midrange <u>-</u> Closeup <u>-</u>	Yes <u>/</u> No <u>7</u>	Entry <u>-</u> Exit <u>-</u> Other <u>-</u> Evidence <u>-</u> Latent <u>-</u>	another quadrant in basement
173	Overall <u>/</u> Midrange <u>-</u> Closeup <u>-</u>	Yes <u>/</u> No <u>7</u>	Entry <u>-</u> Exit <u>-</u> Other <u>-</u> Evidence <u>-</u> Latent <u>-</u>	hall to garage; bath room on main floor
174	Overall <u>/</u> Midrange <u>-</u> Closeup <u>-</u>	Yes <u>/</u> No <u>7</u>	Entry <u>-</u> Exit <u>-</u> Other <u>-</u> Evidence <u>-</u> Latent <u>-</u>	laundry room; main floor
175	Overall <u>/</u> Midrange <u>-</u> Closeup <u>-</u>	Yes <u>/</u> No <u>7</u>	Entry <u>-</u> Exit <u>-</u> Other <u>-</u> Evidence <u>-</u> Latent <u>-</u>	interior of garage - SW side
176	Overall <u>/</u> Midrange <u>-</u> Closeup <u>-</u>	Yes <u>/</u> No <u>7</u>	Entry <u>-</u> Exit <u>-</u> Other <u>-</u> Evidence <u>-</u> Latent <u>-</u>	" "
177	Overall <u>/</u> Midrange <u>-</u> Closeup <u>-</u>	Yes <u>/</u> No <u>7</u>	Entry <u>-</u> Exit <u>-</u> Other <u>-</u> Evidence <u>-</u> Latent <u>-</u>	" "
178	Overall <u>/</u> Midrange <u>-</u> Closeup <u>-</u>	Yes <u>/</u> No <u>7</u>	Entry <u>-</u> Exit <u>-</u> Other <u>-</u> Evidence <u>-</u> Latent <u>-</u>	interior of garage NE side; gas can
179	Overall <u>/</u> Midrange <u>-</u> Closeup <u>-</u>	Yes <u>/</u> No <u>7</u>	Entry <u>-</u> Exit <u>-</u> Other <u>-</u> Evidence <u>-</u> Latent <u>-</u>	" " lawn mower
180	Overall <u>/</u> Midrange <u>-</u> Closeup <u>-</u>	Yes <u>/</u> No <u>7</u>	Entry <u>-</u> Exit <u>-</u> Other <u>-</u> Evidence <u>-</u> Latent <u>-</u>	int. of garage; trash can with white material on top
181	Overall <u>/</u> Midrange <u>-</u> Closeup <u>-</u>	Yes <u>/</u> No <u>7</u>	Entry <u>-</u> Exit <u>-</u> Other <u>-</u> Evidence <u>-</u> Latent <u>-</u>	interior of trash can in garage; paper items
182	Overall <u>/</u> Midrange <u>-</u> Closeup <u>-</u>	Yes <u>/</u> No <u>7</u>	Entry <u>-</u> Exit <u>-</u> Other <u>-</u> Evidence <u>-</u> Latent <u>-</u>	" "
183	Overall <u>/</u> Midrange <u>-</u> Closeup <u>-</u>	Yes <u>/</u> No <u>7</u>	Entry <u>-</u> Exit <u>-</u> Other <u>-</u> Evidence <u>-</u> Latent <u>-</u>	" "
184	Overall <u>/</u> Midrange <u>-</u> Closeup <u>-</u>	Yes <u>/</u> No <u>7</u>	Entry <u>-</u> Exit <u>-</u> Other <u>-</u> Evidence <u>-</u> Latent <u>-</u>	whit. strip of torn material on top of trash can in garage

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Photo #	Type	Scale Used	Classification	Description
185	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	interior of garage, NE side, gas can AHS signs
186	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	" "
187	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	gas can - red plastic with black caps
188	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	MB doorway, 2nd Floor; looking to NW-front of res.
189	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	papers on dresser in MB
190	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Referral for mental health service for Karl Pierson dated 09-19-13
191	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	"
192	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	10-22-13 Farmers Ins. to Karl & Barb Pierson changes to Veh policy Farmers letter closeup
193	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Susp. bedrm storage below mattress
194	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Susp. bedrm - storage, below mattress
195	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	clothing; book on Columbine
196	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	book - Columbine - true crime story by Jeff Koss Library Book
197	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	"
198	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	2011 Susp. bedrm Winchester - NRA Expert Certificate for Susp
199	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Susp desk drawer, thumb drives (3)
200	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	" "
201	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Susp. desk drawer - hard drive
202	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	" "
203	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	" Toshiba
204	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	" " #52A6YETKEN69
205	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	Susp bedrm - book shelf west of bed
206	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	" " ID cards
207	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input checked="" type="checkbox"/>	" 4 ID cards 3-AHS 1-DMV

DW Cloud 9316

AR/SDA03020
1-6-14

Date 12-13-13

Assistant

Photo #	Type	Scale Used	Classification	Description
208	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	ext. of garage, trash can
209	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	interior of trash can - 2 cinnamon boxes
210	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	int. of kitchen to open sliding door
211	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	back yard from slider to east
212	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	" " south
213	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	" " north
214	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	backyard & NE corner of kitchen
215	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	backyard to west
216	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	backyard patio table
217	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	" " candles in holder
218	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	backyard south side
219	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	" family rm & office exterior walls
220	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	South side yard to gate
221	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	" " black container
222	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	backyard looking east to table
223	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	" chairs outside kitchen slider
224	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	back patio; shovel & plate against wall
225	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	Kitchen cupboard - supplements
226	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	paper treatment plan - Karl from Advanced Integrative Medicine
227	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	" dated 9/5/13
228	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	Supplements - "Calm PRT" & "GABA Trex"
229	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	" "
230	Overall <input checked="" type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	fruit bowl in kitchen on island; bottle cap

DW Cloyd 9316

AR/SP4030W
1-6-14

Case CT13-44545Address [REDACTED]Photographer D.W. Cloyd 9316Page 11 of 12Date 12-13-13

Assistant

Photo #	Type	Scale Used	Classification	Description
231	Overall <u> </u> Midrange <u> </u> Closeup <u> </u>	Yes <u> </u> No <u> </u>	Entry <u> </u> Exit <u> </u> Other <u> </u> Evidence <u> </u> Latent <u> </u>	Mtn Dew bottle cap inside Fruit bowl
232	Overall <u> </u> Midrange <u> </u> Closeup <u> </u>	Yes <u> </u> No <u> </u>	Entry <u> </u> Exit <u> </u> Other <u> </u> Evidence <u> </u> Latent <u> </u>	Family rm, 3 Christmas stockings; Barb; [REDACTED]; 1
233	Overall <u> </u> Midrange <u> </u> Closeup <u> </u>	Yes <u> </u> No <u> </u>	Entry <u> </u> Exit <u> </u> Other <u> </u> Evidence <u> </u> Latent <u> </u>	2 stockings - Barb; [REDACTED]
234	Overall <u> </u> Midrange <u> </u> Closeup <u> </u>	Yes <u> </u> No <u> </u>	Entry <u> </u> Exit <u> </u> Other <u> </u> Evidence <u> </u> Latent <u> </u>	" [REDACTED]; 1
235	Overall <u> </u> Midrange <u> </u> Closeup <u> </u>	Yes <u> </u> No <u> </u>	Entry <u> </u> Exit <u> </u> Other <u> </u> Evidence <u> </u> Latent <u> </u>	Susp. bdrm - doorway - desk
236	Overall <u> </u> Midrange <u> </u> Closeup <u> </u>	Yes <u> </u> No <u> </u>	Entry <u> </u> Exit <u> </u> Other <u> </u> Evidence <u> </u> Latent <u> </u>	book shelf at end of desk
237	Overall <u> </u> Midrange <u> </u> Closeup <u> </u>	Yes <u> </u> No <u> </u>	Entry <u> </u> Exit <u> </u> Other <u> </u> Evidence <u> </u> Latent <u> </u>	Gun magazine (paper) "Recoil" issue 9
238	Overall <u> </u> Midrange <u> </u> Closeup <u> </u>	Yes <u> </u> No <u> </u>	Entry <u> </u> Exit <u> </u> Other <u> </u> Evidence <u> </u> Latent <u> </u>	back side of Susp bdrm door - tape marks
239	Overall <u> </u> Midrange <u> </u> Closeup <u> </u>	Yes <u> </u> No <u> </u>	Entry <u> </u> Exit <u> </u> Other <u> </u> Evidence <u> </u> Latent <u> </u>	" 1/1/10; 1/1/11 & 2 others
240	Overall <u> </u> Midrange <u> </u> Closeup <u> </u>	Yes <u> </u> No <u> </u>	Entry <u> </u> Exit <u> </u> Other <u> </u> Evidence <u> </u> Latent <u> </u>	" just 1/1/10 & 1/1/11 (ht-growth marks?)
241	Overall <u> </u> Midrange <u> </u> Closeup <u> </u>	Yes <u> </u> No <u> </u>	Entry <u> </u> Exit <u> </u> Other <u> </u> Evidence <u> </u> Latent <u> </u>	top of book shelf; folded flag; rifle casings
242	Overall <u> </u> Midrange <u> </u> Closeup <u> </u>	Yes <u> </u> No <u> </u>	Entry <u> </u> Exit <u> </u> Other <u> </u> Evidence <u> </u> Latent <u> </u>	" " "
243	Overall <u> </u> Midrange <u> </u> Closeup <u> </u>	Yes <u> </u> No <u> </u>	Entry <u> </u> Exit <u> </u> Other <u> </u> Evidence <u> </u> Latent <u> </u>	Kitchen; interior of refrigerator
244	Overall <u> </u> Midrange <u> </u> Closeup <u> </u>	Yes <u> </u> No <u> </u>	Entry <u> </u> Exit <u> </u> Other <u> </u> Evidence <u> </u> Latent <u> </u>	"
245	Overall <u> </u> Midrange <u> </u> Closeup <u> </u>	Yes <u> </u> No <u> </u>	Entry <u> </u> Exit <u> </u> Other <u> </u> Evidence <u> </u> Latent <u> </u>	int. fridge, lower shelves
246	Overall <u> </u> Midrange <u> </u> Closeup <u> </u>	Yes <u> </u> No <u> </u>	Entry <u> </u> Exit <u> </u> Other <u> </u> Evidence <u> </u> Latent <u> </u>	int. Freezer
247	Overall <u> </u> Midrange <u> </u> Closeup <u> </u>	Yes <u> </u> No <u> </u>	Entry <u> </u> Exit <u> </u> Other <u> </u> Evidence <u> </u> Latent <u> </u>	" lower shelves
248	Overall <u> </u> Midrange <u> </u> Closeup <u> </u>	Yes <u> </u> No <u> </u>	Entry <u> </u> Exit <u> </u> Other <u> </u> Evidence <u> </u> Latent <u> </u>	" door shelves
249	Overall <u> </u> Midrange <u> </u> Closeup <u> </u>	Yes <u> </u> No <u> </u>	Entry <u> </u> Exit <u> </u> Other <u> </u> Evidence <u> </u> Latent <u> </u>	" lower door shelves
250	Overall <u> </u> Midrange <u> </u> Closeup <u> </u>	Yes <u> </u> No <u> </u>	Entry <u> </u> Exit <u> </u> Other <u> </u> Evidence <u> </u> Latent <u> </u>	interior of dishwasher
251	Overall <u> </u> Midrange <u> </u> Closeup <u> </u>	Yes <u> </u> No <u> </u>	Entry <u> </u> Exit <u> </u> Other <u> </u> Evidence <u> </u> Latent <u> </u>	interior side of front entry door
252	Overall <u> </u> Midrange <u> </u> Closeup <u> </u>	Yes <u> </u> No <u> </u>	Entry <u> </u> Exit <u> </u> Other <u> </u> Evidence <u> </u> Latent <u> </u>	damage to front door - side view
253	Overall <u> </u> Midrange <u> </u> Closeup <u> </u>	Yes <u> </u> No <u> </u>	Entry <u> </u> Exit <u> </u> Other <u> </u> Evidence <u> </u> Latent <u> </u>	" " locking components

DW Cloyd 9316

AR/SDA 3020
1-6-14

Case CT13-44545Address [REDACTED]Photographer D.W. Cloyd 9346Page 12 of 12Date 12-13-13

Assistant

Photo #	Type	Scale Used	Classification	Description
254	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	damage to Front door, side & exterior view
255	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	" "
256	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	damage to Front door Frame
257	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	" "
258	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	Copy of search warrant & 3 evidence sheets
259	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	Copy of search warrant
260	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	Copy evidence report items 1-9
261	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	" items 10-21
262	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	" items 22-26
263	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	Suspect's bedroom - doorway - floor - desk
264	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	" " desk & bed area
265	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	" " bed, floor & book shelves
266	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	" " " "
and	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	
	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	
	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	
	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	
	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	
	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	
	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	
	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	
	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	
	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	

D.W. Cloyd 9346

AR/62903020
1-0-11

ARAPAHOE COUNTY SHERIFF'S OFFICE

Crime Laboratory Supplemental Report
Crime: Attempt Homicide
Report By: Criminalist II Erian Dominguez *05042

CR#: CT13-44545
Investigator: McCauley
Date of Report: 12/19/13

Initial Information

On 12/13/13 at about 1400 hours, Supervising Criminalist Andrea Stephen requested that I respond to the ACSO command post located in the Albertson's shopping center parking lot east of Arapahoe High School. I was en route at about 1402 hours and arrived at the ACSO command post at 1416 hours. Upon my arrival, I note numerous fire/rescue personnel and local, state and federal law enforcement personnel.

A briefing conducted by Lt. Heaton informs me of the following:

- At about 1230 hours, a shooting occurred at Arapahoe High School (AHS).
- The suspect, identified to me as Karl Pierson, DOB [REDACTED] is deceased in the library (also known as the media center).
- The suspect died of a self-inflicted gunshot wound to the head.
- It is believed that the suspect was working alone.
- The suspect shot and critically wounded a female identified to me as Claire Davis in the west hallway (also known as the trophy hall).
- Davis is currently in critical condition at Littleton Adventist hospital.
- It is unknown as to how many shots occurred inside the school, but initial witness reports state that two shots occurred in the trophy hall and multiple shots were heard in the library.
- The suspect came to AHS to kill the librarian who used to be the suspect's debate coach.
- SWAT deputies and Bomb Technicians are in the process of clearing the school and located two Molotov cocktails on the suspect and rendered the devices safe.
- Two Molotov cocktails were set off in the library by the suspect.
- The suspect was armed with a shot gun and a machete.
- For safety reasons, the shot gun was moved away from the suspect, but the shotgun was not rendered safe.
- The suspect's backpack and pockets were gone through by Bomb Technicians and/or SWAT for safety reasons.
- A search warrant for the vehicle the suspect arrived at the school in is being written.
- The suspect's cell phone which was located on the victim will need to be preserved and collected.
- The suspect lives with his mother at [REDACTED]
- The suspect does not have regular contact with his father and has never been to his father's apartment located at [REDACTED]
- A search warrant for the mother's home is being written.

Crime Scene Investigation

With the assistance of personnel from the ATF, the FBI and the CBI, the crime scene at Arapahoe High School was segmented into four sections consisting of the northeast library, the southeast library, the central library and the west hallway (the trophy hall). I was designated as the lead of group 1, which documented and collected evidence in the northeast library area where the suspect was located. Criminalist Erick Bryant was the lead of group 2 (the southeast library), Criminalist Ewelina Bajda was the lead of group 3 (the central library) and

ARAPAHOE COUNTY SHERIFF'S OFFICE

Crime Laboratory Supplemental Report
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CR#: CT13-44545
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Date of Report: 12/19/13

Criminalist Steve Adams was the lead of group 4 (the west hallway/trophy hall). Refer to reports from the above listed Criminalists for details.

FBI agents Leslie Kopper and Toni Payne were the scribe and photographer for group 1. I took measurements for a sketch and collected all evidence. All of the photographs taken by the FBI personnel in group 1 were burned to a CD and given to Supervising Criminalist Andrea Stephen.

The evidence I collected consist of the following items: (Note: The "1" before the evidence item number signifies the group number.)

Item 1-1: A black Stevensons shotgun, serial # 134200P with four live Remington 12G shotgun rounds in a black ammunition holder attached to the butt of the shotgun (Note: One Royal Buck live shotgun round (Item 1-1a) and one spent Royal Buck shotgun shell (Item 1-1b) were obtained from the inside of the shotgun.)

Item 1-2: One Royal Buck 12G live shotgun round

Item 1-3: A black Verizon Samsung cell phone

(Note: To preserve all potential evidence, the battery was not removed to obtain the serial number and the cell phone was collected in an aluminum paint can to prevent remote destruction of digital evidence.)

Item 1-4: One slate gray Sheffield folding pocket knife

Item 1-5: A multi-colored duct tape wallet containing:

- CO driver's license # [REDACTED] for Karl Pierson, DOB [REDACTED]
 - Eagle Scout member card for Karl Pierson
 - Highlands Ranch Community Association (HRCA) membership card for Karl Pierson
 - Douglas County Library card
 - Arapahoe High School ID card for Karl Pierson
 - A King Soopers card
 - A Tokyo Joe's Addict card
 - A Belco Credit Union ATM card # [REDACTED] for Karl Pierson
 - A four of spades card
 - 6-\$100.00 bills, 3-\$20.00 bills and 2-\$1.00 bills (\$662.00 collected as Item 1-5a)
- (Photocopies of the wallet contents are attached.)

Item 1-6: An orange 7-11 lighter

Item 1-7: A black Sharpie pen

Item 1-8: A round purple Moldex case containing ear buds

Item 1-9: A black visor light for a baseball hat brim with two disc batteries missing

Item 1-10: A glass Mountain Dew bottle approximately 1/8 full of possible gasoline

(Note: The possible gasoline was collected using a Teflon-capped bottle and labeled 1-10a.)

Item 1-11: Two Duracell 2032 disc batteries

Item 1-12: A red bandana with possible gasoline and possible blood

Item 1-13: An empty Mountain Dew bottle with possible gasoline residue

Item 1-14: A piece of tan cloth saturated in possible gasoline

Item 1-15: An unopened Winchester Super X box of twenty-five 12G waterfowl steel shot live rounds

Item 1-16: An unopened Winchester Super X box of twenty-five 12G waterfowl steel shot live rounds

Item 1-17: An empty box of Royal Buck 12G hunting cartridges (Note: The box indicates that it holds 25.)

ARAPAHOE COUNTY SHERIFF'S OFFICE

Crime Laboratory Supplemental Report
Crime: Attempt Homicide
Report By: Criminalist II Erinn Dominguez #05042

CR#: CT13-44545
Investigator: McCauley
Date of Report: 12/19/13

Item 1-18: A green and black Wenger Swissgear backpack (ripped and emptied for safety by Bomb Technicians.) (Note: This backpack contains 25 Royal Buck live shotgun rounds which I collected as item 1-18a.)

Item 1-19: Four Playboy magazines, one Economics textbook, a deck of political cards, a protractor, an eraser, a yellow pencil, a broken yellow pencil, a roll of tape, a tube of superglue, a travel bottle of hand sanitizer, a tube of lip moisturizer, a travel first aid kit, two containers of mechanical pencil lead, a warranty card and care instructions for a Wenger Swissgear item and a red carabiner.

At about 2400 hours, Coroner Investigator Cherry Goodman arrives to examine the decedent. The body transport team arrives a short time later. With assistance from Investigator Goodman, I bag the decedent's right and left hands. Investigator Goodman notes a gunshot entrance wound on the lower left side of the victim's jaw. No exit wound is observed. The victim's clothing including a baseball cap, a bandolier with ammunition and a machete remain with the decedent when he was placed in a black body bag by Investigator Goodman.

I clear the scene at about 0050 hours. All of the evidence items I collect from the crime scene are secured in the Crime Lab.

Bloodstain Patterns on Books in Library Row 3

On 12/14/13 at about 1200 hours, I take photographs and measurements for a sketch of library row 3 where the decedent shot himself. I label the bookshelf with the majority of bloodstains, bookcase 4 quadrant 2. I further label the shelves of quadrant 2: 2 top, 2 mid-top, 2 mid-bottom and 2 bottom (see sketch). I note that the majority of the bloodstains are located on shelves 2 mid-top, 2 mid-bottom and 2 bottom. No bloodstains are visible on shelf 2 top. The bloodstains on shelf 2 mid-top are approximately 32" from the floor, the bloodstains on the books located on shelf 2 mid-bottom are approximately 28" from the floor and the bloodstains on the books located on shelf 2-bottom are approximately 13" from the floor. I note that the bloodstains on the books on shelf 2 mid-bottom are consistent with a bloodstain pattern resulting from a volume of blood falling onto a surface. Some of the bloodstains on shelves 2 mid-top and 2 mid-bottom show directionality and a void area that suggest the blood-letting event occurred in row 3 south of the north side of bookcase 4.

Evidence Documentation

On 12/17/13, I photograph and examine the contents of evidence item 1-19 and note the following:

- The Playboy magazine dated January/February 2014 has two articles "dog-eared." One article titled "Chronic Problems" begins on page 60 and is about the marijuana boom in Colorado. The other article titled "Behind the Penis Straws" begins on page 96 and is about what goes on at a bachelorette party.
- Numerous pages inside the Economics textbook contain handwritten notes, but the pages about anti-trust laws and trade commissions are heavily marked to include the words "we suck" in the paragraph that mentions the US trade deficit with China. *D*

ARAPAHOE COUNTY SHERIFF'S OFFICE

Crime Laboratory Supplemental Report

Crime: Attempt Homicide

Report By: Criminalist II Erinn Dominguez *05042

CR#: CT13-44545

Investigator: McCauley

Date of Report: 12/19/13

- A Carlton birthday card is found in the back flap of the Economics textbook (photocopies attached). The handwritten message on the greeting card states:

"Hey Karl,

Here is a little "Bushism" patch to put on your future uniform. Hope it reminds you of all the political debates we had! I admire your intelligence and value our friendship. You are a great guy and an amazing friend!"

The signature on the card is illegible, but it may be [REDACTED]

These photographs were downloaded to the Crime Lab's secure image server.

Crime Scene Sketch

On 12/19/13, I prepared a sketch of the north east library area and library row 3 where the suspect was located using the Crime Zone CAD software and an aerial photograph of Arapahoe High School generated by Arapahoe County GIS mapping (ARAPAMAP). See attached crime scene sketches and aerial photographs. The original sketch, a PDF format file and a copy of the aerial photograph from ARAPAMAP were archived to the Crime Lab's secure image server.

END OF REPORT


Erinn Dominguez Star #

Arapahoe County Sheriff's Office

Crime Lab Progress Report

Offense: Death Investigation

Criminalist: Erick P. Bryant, MFS, CCSA, *12016

CR#: CT13-44545

Date of Report: 1/30/14

Investigator: McCauley, K

Notification: About 1400 hours, 12/13/13, I was contacted by Supervising Criminalist Andrea Stephen and tasked with assisting in a death investigation at the Arapahoe High School, 2201 E Dry Creek Dr., Centennial, CO.

Initial Information: Upon my arrival at the Command Post at 1435 hours, I was informed by Andrea Stephen of the following:

- The school had been subjected to an Active Shooter incident.
- The shooter (later identified as Karl Pierson) was found dead from a gunshot wound to the head.
- A female victim (later identified as Claire Davis) had been taken to Littleton Adventist Hospital for a gunshot wound to the head.
- Another victim had been sent to Swedish Medical Center for treatment of a minor injury.
- Law Enforcement Agencies from the Denver Metro area had started to clear the high school. That process was expected to take several hours and would have to be completed before a scene exam could take place.

Evidence Collection: After receiving an initial brief, I was tasked with responding to Littleton Adventist Hospital, 7700 S Broadway, Littleton, CO 80122 to collect clothing and other evidence associated with the victim, Claire Davis. I arrived at 1455 hours and met with ACSO Investigators Antonio Hernandez and Steveny True. I was informed the victim's clothing had been placed in paper bags by the treating ER personnel. I was also informed that two metal pellets had been removed from the victim's wound and had been secured by Operating Room personnel.

I was given six paper bags which contained clothing belonging to the victim. This included a [REDACTED]

[REDACTED] I examined the items with Investigator Hernandez to determine if any information could be obtained which might immediately assist the investigation. [REDACTED]

[REDACTED] No discernable patterns were noted. I packaged the items in their original bags and secured them pending processing. [REDACTED]

At 1528 hours, I signed for these items from Joseph Fishburn, Critical Care Technician, Littleton Adventist Hospital, 7700 S Broadway, Littleton, CO 80122.

At 1615 hours, I obtained two small, black pellets which were stored in a plastic specimen cup. I signed for the pellets from Angela Miller, Operating Room Nurse, Littleton Adventist Hospital, 7700 S Broadway, Littleton, CO 80122.

I returned to the Command Post at 1710 hours and received additional information about the incident. The shooter had entered the school through a door on the north side of the

Arapahoe County Sheriff's Office

Crime Lab Progress Report

Offense: Death Investigation

Criminalist: Erick P. Bryant, MFS, CCSA, *12016

CR#: CT13-44545

Date of Report: 1/30/14

Investigator: McCauley, K

school. It was believed he fired a shotgun in the hallway just inside the north door. It was believed this is where the victim (Claire Davis) was struck. The shooter then entered a hall way running east-west and moved to the school library where he fired the shotgun twice more. The shooter is thought to have thrown an incendiary device which burned a wall and book shelves before taking his own life with the shotgun. About 1730 hours, I accompanied ACSO Investigators and Criminalists to the school.

Team Assembly and Brief: Supervising Criminalist Stephen briefed the following prior to the beginning of the scene processing:

- FBI and CBI Evidence Response Teams had agreed to assist the ACSO with scene processing.
- ACSO Criminalists would be assigned a team of FBI and CBI personnel to assist in photography, scene diagramming and analysis.
- The overall scene had been broken into four areas with one team assigned to each area.
- I was assigned to Team # 2 which was tasked with processing the Media Center in the school library.
- An evidence marking convention was agreed upon. Each team would identify potential evidence by their team number and the item number separated by a dash, e.g. 2-1, 2-2, 2-3. These numbers would be placed on green evidence marker cards.
- About 2048 hours, the team leaders and other key personnel were taken on a brief walk through of the entire scene to allow for situational awareness of how the four areas related to each other.
- Following the walk through, I briefed the members of Team #2 on the area assigned and their assigned tasks. The following personnel were assigned to Team 2 – CBI Special Agents K. Torres and K. Hassenstab – Scene Photography; CBI Special Agents T. Lee, J. Means and J. Dahlberg– Scene Diagram/Measurement.

Search of the Scene: The scene had been searched prior to the scene exam. It was initially searched and cleared by responding officers and again by Explosive Ordnance Disposal personnel. It had again been searched by supervisors who conducted an initial walk through before areas had been assigned. White cardboard markers had been placed over items of potential evidence.

Characteristics of the Scene (Library Media Room): Team # 2 was assigned the Media Room section of the library. The library was accessed by a set of double doors on the north wall of the northern most hall way which ran from the school cafeteria to the gym and science area of school. The double doors opened inwards into the hall way. Passing through these doors allowed access to the southern part of the library.

Arapahoe County Sheriff's Office

Crime Lab Progress Report

Offense: Death Investigation

Criminalist: Erick P. Bryant, MFS, CCSA, *12016

CR#: CT13-44545

Date of Report: 1/30/14

Investigator: McCauley, K

The media room was accessed by turning right after passing through metal detectors. A curved circulation desk separated an office area from the rest of the media room. In the wall south of the circulation desk there was a door which led to the editing room. This room was furnished with desks, chairs and computers. A dividing wall to the east of the circulation desk separated two areas of the media room. To the south of this wall was a study area occupied by a series of private work stations, each with a chair. To the north of the dividing wall was an area lined with shelves used to store different types of electronic media. The area also had small carts with books, conference tables, chairs and other types of office furniture. In the northeast corner of this area, a door allowed access to a small office. This office had another door on the north wall which led to the main part of the library. To the west of the small office was an area which had a large table / copy stand. To the west of this area was a small desk chair. Continuing west from the desk led to another office with a desk and chair and another door which led to the main part of the library. Turning south from this point led back to the circulation desk. The walls were constructed of a dry wall material covering an unknown frame. The floor was carpeted throughout the media room.

Condition of the Scene (Library Media Room): The media room was in a disorderly state. Books and backpacks were on the floor of the study area. Paper debris and other items were on the floor throughout the media area. There was no blood, or other suspected human tissue noted anywhere in the media room.

A list of items previously marked with white cards and other items of potential evidence in the media room follows. A dime (2-1) was on the floor immediately west of the circulation desk. A spent shotgun shell (2-2) was located on the floor to the south of the dime, immediately adjacent the edge of the circulation desk. A large area of apparent shotgun pellet ricochet marks was located on the eastern most edge of the circulation desk. These trajectory of the marks appeared to align with the holes in a metal book cart (some with shot embedded in the metal) and a nearby chair. A shotgun shell follower (2-3) was located on the floor southwest of the book cart. A suspected shotgun pellet (2-7) was on the floor to the west of the book cart. A printer paper box (2-8) with suspected shotgun pellet damage was also on the floor adjacent to the book cart. Items 2-2, 2-3, 2-7 and 2-8 and the metal book case comprise items suspected to have been involved in the first discharge of the shotgun. A spent shotgun shell (2-4) was on the floor at the base of the dividing wall. A cell phone (2-5) was located in the 5th south side cubicle to the east in the center row of cubicles. Another cell phone (2-6) was located in the eastern most center cubicle located on the south wall of the study area. Stains on the circulation desk suggested a liquid had been spilled. A plastic water bottle (2-9) with a large hole was on the floor in the circulation area. A cell phone (2-10) was on the desk in the larger of the two offices west of the large table / copy stand. A series of four printer boxes (2-11) stacked together with holes suspected to be from a shotgun pellet were located on a table in the media shelf area. A shotgun shell follower (2-12) was on the floor to the east of the northern most table. A shotgun shell cup (2-13) was on the floor east of the follower (2-12) and west of the northern most book shelf on the east wall.

Arapahoe County Sheriff's Office

Crime Lab Progress Report

Offense: Death Investigation

Criminalist: Erick P. Bryant, MFS, CCSA, *12016

CR#: CT13-44545

Date of Report: 1/30/14

Investigator: McCauley, K

Scene Documentation: The scene was photographed and a scene diagram was prepared.

Scene Cleared: About 0045 hours, 12/14/13, we received notification from Andrea Stephen that scene processing activities would cease for the night. The teams were dismissed and asked to return about 1000 hours to complete the scene processing. I cleared the scene about 0100 hours and returned to the ACSO headquarters where I secured the victim's clothes and the two shot pellets in secure storage in the crime lab. I archived photographs on the crime lab's secure image server.

Return to the Scene: I returned to the scene about 0950 hours. The teams were briefed on the activities to be accomplished. Team 2's area would be measured using a Faro laser scanning device prior to collecting any of the evidence.

Additional Scene Documentation: While that work was being done, I was tasked with photographing classrooms which were not part of the active crime scene. My instructions were to take establishing photographs to document the condition of the rooms. I completed that task about 1245 hours.

Evidence Collection: About 1350 hours, at the direction of the supervising criminalist, I collected the following items: 2-14 (white cloth) located near the library door in the hallway; 2-15 (spent shotgun shell) located near the door between the hallway that runs north-south and the hallway which runs east-west. About 1500 hours, the laser scanning of the media room was completed. At that time, I collected the following items:

- 2-2 spent shotgun shell
- 2-3 spent shotgun shell follower
- 2-4 spent shotgun shell
- 2-7 shotgun pellet
- 2-9 water bottle
- 2-12 spent shotgun follower
- 2-13 spent shotgun shell cup

Item #s 2-1 (dime), 2-5 (cell phone), 2-6 (cell phone), 2-8 (cardboard box), 2-10 (cell phone), 2-11 (cardboard box) were determined to have no evidentiary value and were not collected.

Scene Cleared: About 1630 hours, I cleared the scene and returned to the ACSO headquarters. I archived the photographs on the crime lab's secure image server. I secured the evidence I collected in secure storage in the crime lab.

Evidence Submission to Evidence Room: On 12/17/13, I packaged the victim's clothing and the two shot pellets, secured the packages with red tape, placed my initials,

Arapahoe County Sheriff's Office

Crime Lab Progress Report

Offense: Death Investigation

Criminalist: Erick P. Bryant, MFS, CCSA, *12016

CR#: CT13-44545

Date of Report: 1/30/14

Investigator: McCauley, K

Star # and date (EB 12016 12/17/13) on the tape and submitted these items to the evidence room.

Evidence Processing: On 12/18/13, I processed the three spent shotgun shells (2-2, 2-4 and 2-15) with cyanoacrylate fumes and Rhodamine 6G dye stain. I examined the shells using a Spex Forensics MCS 400 ALS under various wavelengths but saw no latent prints.

Evidence Submission to Evidence Room: On 12/18/13, I packaged item #'s 2-2, 2-3, 2-4, 2-7, 2-9, 2-12, 2-13, 2-14 and 2-15 in brown paper bags. I secured the packages with red tape, placed my initials, Star # and date (EB 12016 12/18/13) on the tape and submitted these items to the evidence room.

End of Report



Erick P. Bryant, 12016

Arapahoe County Sheriff's Office

Crime Lab Progress Report

CR#: CT13-44545

Offense: Homicide

Date of Report: December 31, 2013

Criminalist Ewelina J. Bajda, 12060

Investigator: Kristin McCauley/Jeffrey Himes

SCENE INTRODUCTION

On December 13, 2013, at approximately 1400 hours, I was told by Criminalist Erick Bryant to respond to a staging area in the Albertson's shopping center parking lot east of Arapahoe High School on a shooting investigation. I responded at approximately 1410 hours and arrived on scene at approximately 1430 hours. There had been an active shooter in the high school and the school was being evacuated. The deceased suspect, **Karl Pierson (DOB: [REDACTED])**, was located in the high school library with a gunshot wound to the head. Also present were Supervising Criminalist Andrea Stephen, Criminalists Erick Bryant, Diane Cloyd, Erinn Dominguez, and Steve Adams. At approximately 1730 hours we entered the high school along with personnel from several agencies, including Colorado Bureau of Investigation (CBI), Evidence Response Team Unit of the Federal Bureau of Investigation (FBI ERT), and Alcohol, Tobacco and Firearms (ATF) agency to assist in the investigation. A diagram showing the overall floor plan of the high school was provided.

SUMMARY OF SCENE PROCESSING

The location is a high school building at 2201 East Dry Creek Road. After Supervising Criminalist Stephen's initial walk-through, the scene was divided into four teams. I was assigned a lead processing role for Team 3. This included processing of a section of the library which was located in the north-west portion of the high school. The section started with the main library entrance, area west of the front desk, west of first bookshelf in the center of the room and the west computer lab. Other members of Team 3 were CBI's agents each assigned a specific role: Tanya Atkinson (photographer), Megan Honderd (photo log scribe), Tim McKibben (diagramming), Eric Thornton (diagramming), and Natasha Collins (evidence collection assistance). See separate CBI's report(s) for details on each team member's actions as well as the sketch of the library, including the measurements and relative evidence location. The initial Team 3 walk-through of the scene was conducted at about 2050 hours. The following was noted:

- the main entrance to the library is from the north hallway, that continues through the high school in west-east direction
- there is a strong gasoline-like smell in the library
- there is a front desk behind white plastic detection gates north-east of the entrance
- the library has an open floor plan with bookshelves in the middle of the floor in the east section and along the north wall, as well as tables with chairs in the center and west sections
- there is an east computer laboratory north-east of the entrance
- the west computer laboratory contains desks and chairs
- there is a burn pattern on the corner of the north wall between a set of bookshelves opposite the entrance as well as on the adjacent carpet, with pieces of burned white cloth in the center of the pattern

Arapahoe County Sheriff's Office

Crime Lab Progress Report

CR#: CT13-44545

Offense: Homicide

Date of Report: December 31, 2013

Criminalist Ewelina J. Bajda, 12060

Investigator: Kristin McCauley/Jeffrey Himes

- there is a red plastic water bottle lying on its side south of the north wall burn pattern with unscrewed but attached black screw cap and clear liquid inside the bottle
- there is an oval burn pattern on the carpet between the burned north wall and the red water bottle
- there is a linear burn pattern extending to the east from the north wall burn area to the first center bookshelf row (counting from the west end)
- the second segment (counting from the north end) of the first center row of bookshelves (counting from the west end), including the books on all five shelves of this segment, is burned
- there is a burned and melted plastic tag still attached to the bottom shelf of the burned bookshelf segment and some black melted plastic material on the carpet directly underneath
- there are blackened pieces of green glass bottle including the neck of the bottle at the bottom of the burned bookshelf segment
- there is a blackened green glass Mountain Dew bottle broken at its neck standing up west of the burned bookshelf segment
- there is a colorless empty glass vase with diamond pattern standing upside down on the floor north west of the Mountain Dew bottle and a colorless empty glass vase on the northeast corner of the northmost table near the north wall burn pattern area
- there is a green live shotgun shell lying on the floor south of the north wall bookshelves in line between first and the second center rows of bookshelves, counting from the west end
- there is an orange and blue plastic cap that resembles an electric wire connector on the bottom shelf of the unburned portion of the second segment of the first center row
- the southwest corner leg of the northmost table near the north wall burn pattern area is broken at the top and seem to be barely holding up the table
- there are backpacks, electronics, notebooks and other items on the tables, and floor in the library
- the search of the west computer laboratory and the forum located north of the library was done with negative results

The following evidence was collected with the help of Natasha Collins (the "3" before the evidence item number signifies the team number):

- red plastic Nalgene water bottle from the floor south of the north wall burn pattern area (item 3-1)
- colorless liquid sample (item 3-1.1) from the red plastic water bottle (item 3-1) collected in one glass vial (about 6 mL) with plastic cap
- cut out oval burn pattern of the carpet between the burned north wall and the red water bottle (item 3-2)

Arapahoe County Sheriff's Office

Crime Lab Progress Report

CR#: CT13-44545

Offense: Homicide

Date of Report: December 31, 2013

Criminalist Ewelina J. Bajda, 12060

Investigator: Kristin McCauley/Jeffrey Himes

- burned white cloth from the floor in the center of the north wall pattern area (item 3-3)
- green live Remington 12 GA shotgun shell from the floor south of the north wall bookshelves (item 3-4)
- broken bottle neck and other pieces of green glass bottle from the floor at the bottom of the burned bookshelf segment (item 3-5)
- two cotton swabs (item 3-5.1) from the inside lip of the broken neck piece of green glass bottle (item 3-5)
- bottom of the broken green glass Mountain Dew bottle from the floor west of the burned bookshelf segment (item 3-6)
- dark brown liquid sample (item 3-6.1) from the broken green glass Mountain Dew bottle (item 3-6) collected in four glass vials with plastic caps (approximate total volume of collected liquid is 22 mL)
- sample of the carpet (item 3-7.1) from the linear burn pattern floor section (item 3-7) extending to the east from the north wall burn area to the first center bookshelf
- comparison sample (item 3-8) of an unburned section of the carpet from the south west corner of the library

I cleared the scene on December 14, 2013 at approximately 0130 hours. The evidence was secured in the Arapahoe County Sheriff's Office Crime Laboratory.

On December 17, 2013, I scanned the photo log from Team 3 prepared by CBI Lab Agent Honderd and archived it on the Crime Laboratory's secure image server. The CBI Lab Agent Atkinson's photographs were already on the Crime Laboratory's secure image server.

SUMMARY OF EXAMINATION

On December 18, 2013, the red plastic Nalgene water bottle (item 3-1), and green live shotgun shell (item 3-4) were photographed. The water bottle was labeled with the name of [REDACTED]. Both items were processed with cyanoacrylate fumes for latent prints. No prints of value were observed. The mouth of the water bottle was swabbed with two cotton swabs (item 3-1.2). The ribbed sides of the shotgun shell were swabbed with two cotton swabs (item 3-4.1). The water bottle was processed with black fingerprint powder but no prints of value were observed. Both items were processed with Rhodamine 6G but no prints of value were observed.

On December 31, 2013, I scanned the photo log of evidence and archived it on the Crime Laboratory's secure image server.

For the details of the examination of the green glass bottle pieces (items 3-5 and 3-6) see additional report.

Arapahoe County Sheriff's Office

Crime Lab Progress Report

CR#: CT13-44545

Offense: Homicide

Date of Report: December 31, 2013

Criminalist Ewelina J. Bajda, 12060

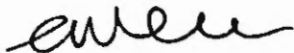
Investigator: Kristin McCauley/Jeffrey Himes

DISPOSITION

All photographs and the scanned photo logs were archived on the Crime Laboratory's secure image server.

The items 3-1 through 3-8, as well as 3-1.1, 3-1.2, 3-4.1, 3-5.1 and 3-6.1 were submitted to the Evidence Unit at the Arapahoe County Sheriff's Office.

Case notes, the original photo logs, and the overall high school floor plan are attached to the report.



Ewelina J. Bajda, 12060, Criminalist II

Case CT13-44545

Address ACSO CRIME LAB

Photographer EJB 12060

Page 1 of 1

Date 18DEC2013 1615

Assistant N/A

Photo #	Type	Scale Used	Classification	Description
1	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	CR BOARD
2	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input type="checkbox"/>	WATER BOTTLE (3-1) SIDE 1
3	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input type="checkbox"/>	WATER BOTTLE (3-1) SIDE 2
4	Overall <input type="checkbox"/> Midrange <input checked="" type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input type="checkbox"/>	RIBBON 1 ATTACHED TO CAP OF WATER BOTTLE (3-1) EJB 12060 18DEC2013 RIBBONS ON CAP OF BOTTLE (3-1)
5	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input type="checkbox"/>	RIBBON 1A ATTACHED TO CAP OF WATER BOTTLE (3-1)
6	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input type="checkbox"/>	RIBBON 2A ON CAP OF WATER BOTTLE (3-1) EJB 12060 18DEC2013
7	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input type="checkbox"/>	RIBBON 3 EJB 12060 18DEC2013
8	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input type="checkbox"/>	RIBBON 4 1B EJB 12060 18DEC2013
9	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input type="checkbox"/>	RIBBON 5 4A EJB 12060 18DEC2013
10	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input type="checkbox"/>	RIBBON 6 4B EJB 12060 18DEC2013
11	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input type="checkbox"/>	4 VE CARTRIDGE (3-4) SIDE 1
12	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input type="checkbox"/>	LINE CARTRIDGE (3-4) SIDE 2
13	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input type="checkbox"/>	LIVE CARTRIDGE (3-4) STAMP
14	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> Latent <input type="checkbox"/>	↓ ↓ END OPPOSITE STAMP
	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	
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Arapahoe County Sheriff's Office

Crime Laboratory Supplemental Report

CR# CT13-44545

Attempted Homicide

Assigned Investigator: McCauley/Himes

Report By: Criminalist II - Stephen D. Adams *03020

Initial Information

On Friday, 12-13-13, at about 1450 hours, I was assigned by Supervising Criminalist (S.C.) Andrea Stephen to assist in the investigation of a shooting. The location was given as the Arapahoe High School, 2201 E. Dry Creek Rd, Centennial, CO. At this time, two people were believed to have been shot and the suspect had committed suicide inside the school. I was told to respond to the staging area on the northeast corner of Dry Creek and University Blvd.

I arrived at the staging area at about 1515 hours. The initial briefing at the staging area from Lt. Heaton & S.C. Stephen indicated the following:

- The suspect, who was dead inside the school, had been tentatively identified as:
 - Karl Pierson, DOB [REDACTED]
- One person was now known to have been shot and had been transported to the hospital. The victim was identified as:
 - Claire Esther Davis
- The suspect was reported to have used a shotgun and set off at least one Molotov cocktail
- Possibly two shots were fired in the hallway at the north Forum entrance, and a third in the adjoining cross hallway. Additional shots were fired in the library.
- The victim, who had been shot in the head, had been in the "Trophy" hallway.

At about 1730 hours the school was declared secure and the students and faculty had all been evacuated. I then responded to the cafeteria of the school that was being used as the inner staging area. Numerous personnel were present from several agencies to assist in the investigation. A diagram showing the floor plan of the school was provided to all personnel.

S.C. Stephen, after her walk-through of the school, decided 4 teams of crime scene investigators would be formed with each team having a specific area of responsibility. I was assigned as the Team Leader for Team 4 with responsibility for the investigation of the "Trophy Hall," where Claire Davis had been shot.

Team 4 consisted of the following personnel and assignments:

- Stephen Adams - ACSO - Team Lead / Evidence Collection
- Dan Leyman - FBI - Scene Photographer
- Kim Malka - FBI - Photo Log Scribe
- Rene VonderHarr - FBI - Scene Sketch
- Whitney Omdorff - FBI - Sketch Assistance
- Jennifer Jostes - FBI - Evidence Collection Assistance

Other personnel working in this area for shooting/trajectory reconstruction were:

- Stephen DeFrance - FBI
- Toni Payne - FBI

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Crime Laboratory Supplemental Report

CR# CT13-44545

Attempted Homicide

Assigned Investigator: McCauley/Himes

Report By: Criminalist II - Stephen D. Adams *03020

Scene Investigation – Team 4 – Day 1

The "Trophy Hall" is the main north-south hall on the west side of the school. The north end of the hall is an entrance/exit for the school with a double set of glass doors forming a small entry vestibule. This entrance is on the west side of the Library/Media Center. Immediately inside the doorway is a stairway on the east side, going up to the Forum and second floor science classrooms. On the east side of this hall are classrooms. On the west side are the Science Dept., gymnasiums, and locker rooms. At the south end of the hall is the Study Center. There is another set of exit doors on the east side of the Study Center. At the north end of the Trophy Hall is a connecting hallway that runs east and west and terminates at the cafeteria on the east. The entrance to the Library is on the north side of this hallway. (Please refer to the diagram showing the overall floor plan of the school.)

There are numerous wall-mounted trophy/display cases on the east side of the hall. Also along the east wall are several benches. The west side of the hall has built-in display cabinets as well as some wall-mounted cases.

The initial Team walk-through of the scene was conducted at about 2050 hours.

During the examination of the scene, the following was noted:

- The north doors were closed and locked
 - Yellow barrier tape was strung across the sidewalk leading to these doors
- Yellow barrier tape had been strung from the doors to the library hall, west across the hall, to a drinking fountain and south down the west side of the hall to mark off areas of blood and other evidence
- The north door of the double doors to the library hall was being propped open with a trashcan
- Several orange traffic cones had been placed over items of evidence at the north end of the hall. These covered:
 - Sunglasses
 - Shotgun shell wadding – plastic
 - Fired 12ga shotgun shell – white case
 - Shotgun shell wadding – plastic
 - Live 12ga shotgun shell – red case
 - The plastic case of this shell appears bent with a ripple in the plastic and the leading edge of the brass base has a small area that has been bent backward from the side of the case.
 - Black plastic disk from shotgun shell
- A bench was on the east wall just south of the doors to the library hall and a wall-mounted trophy case was at the south end of the bench. This was a metal bench with curved armrests, and slats on the seat and back.
- A black backpack, bottle of water, cell phone with a pink cover, and a folded piece of paper were on the bench.

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Crime Laboratory Supplemental Report Attempted Homicide

CR# CT13-44545

Assigned Investigator: McCauley/Himes

Report By: Criminalist II - Stephen D. Adams *03020

- The north end of the bench seat was covered with blood and the floor under this part of the bench also was blood stained. This blood appeared consistent with blood dripping from a wound and not spatter caused by an impact.
- On the floor in front of the south end of bench were a black and pink backpack, a 3-ring notebook, papers, and a fired shotgun shell (red case).
- A couple of feet further west of the north end of the bench was a pool of blood.
- From the blood pool, a drip trail of blood went south, down the east side of the hallway, into the Study Center and out the east exit doors of that room.
- A cell phone in a black case and a substantial amount of brown hair was on the floor south of the bench and under the trophy case.
- The brick wall just above the back of the bench showed two projectile impact areas; one just north of the center of the bench and one just south of the bench at the north edge of the trophy case.
- The north end of this trophy case showed two projectile impact areas; one at the lower edge of the case; and one slightly higher on the case. The impacts appeared consistent with shot pellets and the higher grouping appeared to be larger shot than the lower group.
 - The lower group on the case appears to be part of the same shot as the southernmost impacts on the brick wall.
 - Some of the pellets penetrated to the inside of the case, breaking trophies in the case and impacting the back inside wall of the case.
 - Several pellets also struck and ricocheted from the plexiglass cover (door) on the front of the case.
- The angle of the impacts on the wall and trophy case all appear to relatively oblique to the plane of the wall, ie, originated north of the bench and west of the east wall. (Please refer to the report on the trajectory analysis by FBI Agents DeFrance and Payne).
- The north end of the second bench from the north on the east wall had been hit with 4 pellets. This is a low, black wooden bench with no arms or back. This bench is just south of the above trophy case.
- A large number of shot pellets were seen on the floor down the entire length of the Trophy Hall and in the Study Center.
- What appeared to be single pellet impacts were seen on the glass over the doors from the hall into the Study Center.
 - One impact penetrated the glass over the easternmost door with the projectile coming from the hall side. This was designated window impact #1 (WI-1)
 - One impact struck the hall side of the glass over the westernmost door but did not penetrate the glass. This was designated WI-2
- A third impact was in the glass window on the south side of the Study Center. This impact did not penetrate the glass and is in line with the impact over the easternmost door above. This was designated WI-3.
- A fired 12ga shotgun shell (red case) was on the floor of the Library hall, a few feet east of the doorway to the Trophy Hall. (Note: This item was collected by another Team).

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Crime Laboratory Supplemental Report

CR# CT13-44545

Attempted Homicide

Assigned Investigator: McCauley/Himes

Report By: Criminalist II - Stephen D. Adams *03020

Overall photographs covering the Trophy Hall and Study Center were taken. Green evidence marking tents were then placed over the evidence items. Each item was assigned a number with the number 4 as a prefix to denote the Team 4 area. Another set of overall photographs were taken with the green evidence tents in place. An initial sketch of the north end of the hallway was made. This sketch includes some basic dimension measurements but not location measurements for evidence items.

At about 0030 hours on 12-14-13, Team 4's scene investigation was concluded for this work period. No evidence was collected from the Trophy Hall during this work period. I left the scene at 0103 hours.

Scene Investigation - Team 4 - Day 2

On Saturday, 12-14-13, at 1000 hours, the members of Team 4 began the second day of the investigation. On this day the team consisted of:

- Stephen Adams - ACSO - Team Lead / Evidence Collection
- Dan Leyman - FBI - Scene Photographer
- Kim Malka - FBI - Photo Log Scribe
- Rene VonderHarr - FBI - Evidence Collection Assistance
- Whitney Orndorff - FBI - Evidence Collection Assistance
- Leslie Kopper - FBI - Evidence Collection Assistance
- Jennifer Jostes - FBI - Total Station Data Collection
- Derrick Rieger - FBI - Total Station Assistance
- Gerard Ackerman - Supervisory Special Agent FBI - Total Station Assistance

Other personnel working in this area for shooting/trajectory reconstruction were:

- Stephen DeFrance - FBI
- Toni Payne - FBI

Prior to Team 4 starting work again in the hallway, the Trophy Hall was scanned by personnel from CBI using a Faro 3D Laser Scanner to capture the architectural detail and some evidence locations.

The location of each item of evidence had previously been marked with a green marker tent. Photographs were taken of each individual item and the items were collected. (See Evidence List for details on Items 4-1 through 4-108). As the items were collected a location mark was placed on the floor and the marker tent was left in place. The Total Station was then used to record and map the locations of the items as well as some projectile impact points needed for the trajectory analysis.

At about 1800 hours I received from S.C. Stephen a package of 6 pellets (Item 4-109) found in the library and two pieces of drywall (Item 4-110) that had been cut from the east wall of the

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Crime Laboratory Supplemental Report Attempted Homicide

CR# CT13-44545

Assigned Investigator: McCauley/Himes

Report By: Criminalist II - Stephen D. Adams *03020

library. These pieces contain the wall area that was struck by pellets from one of the shots fired in the library.

I left the school at about 1815 hours. The collected evidence was brought to the ACSO Crime Lab and secured in the Lab's evidence room.

Evidence List - Team 4

Item #	Item	Location Found
4-1	Sunglasses w/ black frames	Trophy Hall - Floor at north entrance
4-2	Plastic shot wad	Trophy Hall - Floor at north end
4-3	12ga shotgun shell - FIRED - white case -RIO Royal Buck (shell imprinted "21P 12/70-2 3/4")	Trophy Hall - Floor at north end
4-4	Piece of shot wadding-plastic	Trophy Hall - W of entrance to library hall
4-5	12ga shotgun shell - LIVE - red case-Winchester SuperHV-steel shot	Trophy Hall - W of entrance to library hall
4-6	Piece of shot wadding - black disk	Trophy Hall - by door to Science Dept. Hall
4-7	12ga shotgun shell - FIRED - red case-Winchester SuperHV-steel shot	Trophy Hall - floor by 1 st bench from N end
4-8	Piece of shot wadding - plastic shot cup	Trophy Hall - floor by 1 st bench from N end
4-9	Backpack - blk & pnk - w/ ID for Claire Davis - contains wallet, books, notebooks, pens, calculator, Inhaler, thumb drive, cell phone cover	Trophy Hall - floor by 1 st bench from N end
4-9a	US currency \$4.87	In backpack - Item 4-9
4-10	Backpack - blk - w/ ID for [REDACTED] - contains - wallet, iPod, keys, calculator, thumb drive, notebooks, cosmetics	Trophy Hall - on seat of 1 st bench from N end
4-10a	US Currency - \$20.09	In backpack - Item 4-10
4-11	Samsung cell phone w/ pink cover	Trophy Hall - on seat of 1 st bench from N end
4-12	Bottle of Dysani water	Trophy Hall - on seat of 1 st bench from N end
4-13	Notebook and papers	Trophy Hall - floor by 1 st bench from N end
4-14	Samsung cell phone w/ blk cover	Trophy Hall - floor S of 1 st bench from N end
4-15	Ball point pen	Trophy Hall - floor by 1 st bench from N end
4-16	Cookie bag	Trophy Hall - on seat of 1 st bench from N end
4-17	Hair - multiple strands	Trophy Hall - floor S of 1 st bench from N end
4-18	Blood sample - scrapings	Trophy Hall - floor west of 1 st bench from N end
4-19	Blood sample - scrapings	Trophy Hall - floor at edge of 1 st bench from N end

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Crime Laboratory Supplemental Report Attempted Homicide

CR# CT13-44545

Assigned Investigator: McCauley/Himes

Report By: Criminalist II - Stephen D. Adams #03020

4-20	White tablet-imprinted "Midol"	Trophy Hall - by back of 1 st bench from N end
4-21 to 4-31	Shot pellets	Trophy Hall - floor
4-32	Metal ring - small wire	Trophy Hall - floor
4-33 to 4-47	Shot pellets	Trophy Hall - floor
4-48	Shot wadding - plastic shot cup	Trophy Hall - floor
4-49 to 4-86	Shot pellets	Trophy Hall - floor
4-87 to 4-104	Shot pellets	Study Center - floor
4-105	Shoe - blk & white flat	Trophy Hall - floor
4-106	Shoe - black loafer - Route 66	Trophy Hall - floor
4-107	Shot pellets -multiple	Trophy Hall - inside 1 st trophy case on E wall
4-108	Shot pellets (4)	Trophy Hall - lodged in N end of 2 nd bench from N end
4-109	Shot pellets (6)	Library - E wall of video room
4-110	Pieces of drywall (2)	Library - E wall of video room

The scene images taken by Agent Leyman (day 1 and day 2) were copied to DVD disks. These images were archived on the Lab's secure image server. The photo logs were scanned to PDF files and archived with the associated images.

The school floor plan diagram provided to the team on day 1 was marked to show Team 4's area of responsibility (Trophy Hall). This diagram and the sketch prepared by Agent VonderHaar were scanned to PDF files and archived with the Team 4 images. I subsequently created another diagram of the north end of the hallway using the above information. This is not to scale but shows the relative positions of the shot shell evidence to the bench and trophy case. This last diagram was saved in the native format for the Crime Zone drafting software (.czd) and as a PDF file for easier viewing.

Additional Photographs / Evidence Collection

On Tuesday, 12-17-13, I made arrangements with Guy Grace from the Little Public Schools Security, to collect the trophy case from the Trophy Hall. I arrived at the school about 0900 hours with Criminalist Erinn Dominguez. We met with a representative of School Security and collected the trophy case. Workmen had already taken the case from the wall and wrapped it in heavy black plastic. I was advised that the trophies that were in the case at the time of the shooting were still in the case. The trophies had been damaged by the shot pellets.

During the autopsy on the suspect in this case, writing was discovered on his arm that appeared to be [REDACTED] ([REDACTED])

[REDACTED] Criminalist Dominguez completed the photo log for these images.

Arapahoe County Sheriff's Office

**Crime Laboratory Supplemental Report
Attempted Homicide**

CR# CT13-44545

Assigned Investigator: McCauley/Himes

Report By: Criminalist II - Stephen D. Adams *03020

We left the school at about 1025 hours. The trophy case was logged as additional evidence for this case. The images taken were archived on the Lab's secure image server. The photo log was scanned to a PDF file and archived with the images.


Report Summary/Scene Reconstruction- Team 4

The evidence in the Trophy Hall supports the following:

- The suspect entered through the doors at the north end of the "Trophy Hall."
- Three (3) shots are fired from a shotgun from the north end of the hall toward the bench where the victim was seated.
 - One shot hits the north side and the front (west side) of the trophy case
 - The shot pellets in this impact appear larger than the other shot pellets
 - One shot hits the brick wall at the north edge of the case and the lower end of the north side of the case.
 - Smaller shot pellets than the above
 - One shot hits the brick wall above the back of the bench, just north of the center of the bench.
 - This shot is closest to the bloodstains and has the tightest pattern of pellet impacts indicating it was fired from the closest proximity to the bench.
 - Two fired cases were in the Trophy hall with the third fired case being ejected after going through the doors into the library hall.
 - The fired case in the library hall would most likely be from the last shot in the Trophy Hall.
- The pellets scattered down the length of the hall and into the Study Center were most likely ricochets from the shots into the wall & trophy case at the north end of the hall.
- One shot shell apparently was a misfeed, causing damage to the shell and was discarded (ejected?) in the hallway.
 - This most likely occurred prior to the last shot in the hallway but whether it was the first shell to be chambered or the attempt to chamber it came in between one of the other shots could not be determined from the scene examination.
- The bloodstains indicate the victim bled over the north end of the bench before her position changed and her head was on the floor west of the bench.
- The drip trail down the hallway is consistent with her being carried down the hall to the Study Center.

For a detailed reconstruction of the shots, see the report by FBI Agents DeFrance and Payne.

End of Report


Stephen D. Adams *03020



Arapahoe County Sheriff's Office



Crime Laboratory

Case #: CT13 44545

Date: 12/17/13 Time: 1000

Location: AHS

Crime Type: Attempt Homicide

Photos By: S. D. ADAMS*03020

Case 13-4414Address 2201 E DRY CREEK RDADAMS 03020Page 1 of 2Date 12-17-13ARAPAHOE HIGH SCHOOLDOMINGUEZ

Photo #	Type	Scale Used	Classification	Description
1	Overall Midrange Closeup	Yes No	Entry ___ Exit ___ Other ___ Evidence ___ Latent ___	CE Board
2	Overall <input checked="" type="checkbox"/> Midrange ___ Closeup ___	Yes ___ No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit ___ Other ___ Evidence ___ Latent ___	
3	Overall ___ Midrange ___ Closeup <input checked="" type="checkbox"/>	Yes ___ No <input checked="" type="checkbox"/>	Entry ___ Exit ___ Other ___ Evidence ___ Latent ___	
4	Overall <input checked="" type="checkbox"/> Midrange ___ Closeup ___	Yes ___ No <input checked="" type="checkbox"/>	Entry ___ Exit ___ Other <input checked="" type="checkbox"/> Evidence ___ Latent ___	
5	Overall <input checked="" type="checkbox"/> Midrange ___ Closeup ___	Yes ___ No <input checked="" type="checkbox"/>	Entry ___ Exit ___ Other ___ Evidence ___ Latent ___	SE corner looking northwest inside
6	Overall <input checked="" type="checkbox"/> Midrange ___ Closeup ___	Yes ___ No <input checked="" type="checkbox"/>	Entry ___ Exit ___ Other ___ Evidence ___ Latent ___	NE looking south west inside
7	Overall <input checked="" type="checkbox"/> Midrange ___ Closeup ___	Yes ___ No <input checked="" type="checkbox"/>	Entry ___ Exit ___ Other ___ Evidence ___ Latent ___	NE looking south east inside
8	Overall <input checked="" type="checkbox"/> Midrange ___ Closeup ___	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Entry ___ Exit ___ Other ___ Evidence ___ Latent ___	S looking North inside
9	Overall <input checked="" type="checkbox"/> Midrange ___ Closeup ___	Yes ___ No <input checked="" type="checkbox"/>	Entry ___ Exit ___ Other ___ Evidence ___ Latent ___	E looking west inside
10	Overall <input checked="" type="checkbox"/> Midrange ___ Closeup ___	Yes ___ No <input checked="" type="checkbox"/>	Entry ___ Exit ___ Other ___ Evidence ___ Latent ___	N looking south inside
11	Overall <input checked="" type="checkbox"/> Midrange ___ Closeup ___	Yes ___ No <input checked="" type="checkbox"/>	Entry ___ Exit ___ Other ___ Evidence ___ Latent ___	W looking east inside
12	Overall <input checked="" type="checkbox"/> Midrange ___ Closeup ___	Yes ___ No <input checked="" type="checkbox"/>	Entry ___ Exit ___ Other ___ Evidence ___ Latent ___	
13	Overall ___ Midrange ___ Closeup <input checked="" type="checkbox"/>	Yes ___ No <input checked="" type="checkbox"/>	Entry ___ Exit ___ Other ___ Evidence ___ Latent ___	Placard of #
14	Overall <input checked="" type="checkbox"/> Midrange ___ Closeup ___	Yes ___ No <input checked="" type="checkbox"/>	Entry ___ Exit ___ Other ___ Evidence ___ Latent ___	NE looking south west inside
15	Overall <input checked="" type="checkbox"/> Midrange ___ Closeup ___	Yes ___ No <input checked="" type="checkbox"/>	Entry ___ Exit ___ Other ___ Evidence ___ Latent ___	SE looking northwest inside
16	Overall <input checked="" type="checkbox"/> Midrange ___ Closeup ___	Yes ___ No <input checked="" type="checkbox"/>	Entry ___ Exit ___ Other ___ Evidence ___ Latent ___	SW looking north east inside
17	Overall <input checked="" type="checkbox"/> Midrange ___ Closeup ___	Yes ___ No <input checked="" type="checkbox"/>	Entry ___ Exit ___ Other ___ Evidence ___ Latent ___	NW looking southeast inside
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20	Overall <input checked="" type="checkbox"/> Midrange ___ Closeup ___	Yes ___ No <input checked="" type="checkbox"/>	Entry ___ Exit ___ Other ___ Evidence ___ Latent ___	E looking west inside
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AR EFB 1206

Case C-13-44545Address 2201 E Dry Creek Rd

ADAMS 03071

Page 2 of 2Date 12-17-13~~Residence~~ High SchoolDOMINGUEZ

Photo #	Type	Scale Used	Classification	Description
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25	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	NW looking southeast inside [redacted]
26	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	SW looking northeast inside [redacted]
27	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	SE looking northwest inside [redacted]
28	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	BS looking north inside [redacted]
29	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	W looking east inside [redacted]
30	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	N looking south inside [redacted]
31	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	E looking W inside [redacted]
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33	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	Closeup of [redacted] placard to [redacted]
34	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	SE looking northwest inside [redacted]
35	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	SW looking northeast inside [redacted]
36	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	NW looking southeast inside [redacted]
37	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	NE looking southwest inside [redacted]
38	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	N looking south inside [redacted]
39	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	W looking east inside [redacted]
40	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	S to North inside [redacted]
41	Overall <input checked="" type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	E to west inside [redacted]
	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	
	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	
	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	
	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	
	Overall <input type="checkbox"/> Midrange <input type="checkbox"/> Closeup <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> Latent <input type="checkbox"/>	

AR EJB 12060
12-17-13

North

* Not to Scale

Prepared by: SA Rene Vander Haar
Assisted by: Whitney Orndorff
Prepared on: 12/13/2013
Case ID: CT13-44545
Address: 2201 E. Dry Creek Road
Centennial, CO.

CT13-44545
S0103020
TEAM 4

Pg 1 of 2

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TEAM 4

DATE 12 / 13 / 2013
MONTH DAY YEAR



CASE ID CT13-44545

PHOTOGRAPHER D. Leyman

LOCATION 2201 East Dry Creek Road
Centennial, CO
Hallway Scenes

CT13-44545
50408020

At 5:40
2013

Case CT13-44545 Team 4Address 2201 E. Dry Creek RoadPage 1 of 3Date 12/13/2013Centennial, COSP403020

1	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Photo Log
2	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Facing North Entrance, ^{furthest} crosswalk
3	Overall <input type="checkbox"/> Long <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Facing North Entrance ^{next} crosswalk
4	Overall <input type="checkbox"/> Long <input checked="" type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Facing North Entrance ^{next} crosswalk
5	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Facing North Entrance, ^{closest} crosswalk
6	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Entry Doors ^(KS) , Misfire
7	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Misfire
8	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Entry Doors
9	Overall <input type="checkbox"/> Long <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	^{entry} hallway from 2 nd set of Double Doors facing South
10	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-1 with cone
11	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-1 w/o cone
12	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-2 & 4-3 with cones
13	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-2 w/o cone
14	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-3 w/o cone
15	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Items #4-2 & 4-3 w/o cone
16	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	^{entry} hallway facing south
17	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-4 w/o cone
18	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-4 w/o cone
19	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Items #4-5 & #4-6 with cone
20	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Items #4-5 & 4-6 w/o cone
21	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-5

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Date 12/13/2013Centennial, COSP408020

22	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-6 w/o cone
23	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Trophy Hall with markers facing south
24	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Trophy Hall with markers facing south
25	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Primary Victim Bench in Trophy Hall facing east
26	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Primary Victim Bench in Trophy Hall facing east
27	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Hair and Cellphone next to Primary victim
28	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Pool of blood and trail in front of primary victim bench
29	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Blood on & under primary victim bench
30	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Trophy Hall from 1st trophy case on right (west wall) facing south
31	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Trophy Hall from 2nd trophy case facing south
32	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Trophy Hall from 3rd trophy case facing south
33	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Trophy Hall from 2nd Hallway facing south
34	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Trophy Hall from Concession stand facing south
35	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Trophy Hall from Soccer Trophy Case facing south
36	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Trophy Hall from 3rd Hallway facing south
37	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Trophy Hall from S-14 Classroom facing south
38	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Trophy Hall from 1st trophy case facing south
39	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Trophy Hall from entrance to Study Center into Study Center
40	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Trophy Hall from Study Center Monitor Deck facing south
41	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Blood pool from front of doors in Study Center
42	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Study Center from Girl's Locker Room Door facing North

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43	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	South end of Study Center facing North
44	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Study Center from center of Compass facing North
45	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Study Center from Girl's Locker Room facing North
46	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Study Center from Monitor's Desk facing North
47	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Trophy Hall from doors to Trophy Hall of Study Center facing North
48	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Trophy Hall from S-13 Classroom facing north
49	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Trophy Hall from S-14 Classroom facing north
50	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Trophy Hall from 3rd Hallway facing north
51	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Trophy Hall from Soccer Trophy Case facing north
52	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Trophy Hall from Concession Stand facing north
53	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Trophy Hall from 2nd Hallway facing north
54	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Trophy Hall from 3rd Trophy cabinet facing north
55	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Trophy Hall from 2nd Trophy Cabinet facing north
56	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Trophy Hall from Primary Victim Bench facing north
	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	
	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	
	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	
	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	
	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	
	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	
	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	

Team 4

DATE 12 / 14 / 2013
MONTH DAY YEAR



CASE ID CT13-44545

PHOTOGRAPHER D. Leyman

LOCATION 2201 East Dry Creek Road
Centennial, CO
Hallway Scene - Trophy Hallway

CT13-44545
SDA0302U

AL-1060
12/14/13

Date 12/14/2013Centennial, COSDA03020

1	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input checked="" type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Photo Log
2	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-1
3	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-1
4	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-1 w/ scale
5	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-2
6	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-2
7	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-2 w/ scale
8	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-2 w/ scale
9	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-3
10	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-3
11	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-3 w/ scale
12	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-4
13	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-4
14	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-4 w/ scale
15	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-5
16	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-5
17	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-5 w/ scale
18	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-6
19	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-6
20	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-6 w/ scale
21	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Primary Victim Bench Area w/ markers

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22	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-7
23	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-7
24	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-7 w/scale
25	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-8
26	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-8 Misfire
27	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-8
28	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-8 w/scale
29	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-9
30	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-9
31	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-9 w/scale
32	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-10
33	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-10
34	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-10 w/scale
35	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-11
36	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-11
37	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-11 w/scale
38	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-12
39	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-12
40	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-12 w/scale
41	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-13
42	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-13

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43	Overall <input type="checkbox"/> Long <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-13 w/scale
44	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-14
45	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-14
46	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-14 w/scale
47	Overall <input type="checkbox"/> Long <input checked="" type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-15
48	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-15
49	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-15
50	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-15 w/scale
51	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-16
52	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-16
53	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-16 w/scale
54	Overall <input type="checkbox"/> Long <input checked="" type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-17
55	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-17
56	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-17
57	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-17 w/scale
58	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Items # 4-9 & # 4-9A
59	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Colorado Driver's ^(K) license ID
60	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Colorado ID
61	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Apache ID
62	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-9A
63	Overall <input checked="" type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-18

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64	Overall <input type="checkbox"/> Long <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-18
65	Overall <input type="checkbox"/> Long <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-18 w/ scale
66	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-19
67	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-19
68	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-19 w/ scale
69	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-20
70	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-20
71	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-20 w/ scale
72	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-20 w/ scale
73	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-10
74	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-10A
75	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Colorado Drivers License
76	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Apache ID
77	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	AAA Colorado Card
78	Overall <input type="checkbox"/> Long <input checked="" type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Items #4-21 : #4-22
79	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-21
80	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-22
81	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-23
82	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-24
83	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-25
84	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-26

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85	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-27
86	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-28
87	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-28
88	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-29
89	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-30
90	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-31
91	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-32
92	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-33
93	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-34
94	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-35
95	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-36
96	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-37
97	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-38
98	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-39
99	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Items #4-40 & #4-41
100	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-42
101	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-43
102	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-44
103	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-45
104	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-46
105	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-47

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106	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-48 w/ scale
107	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-49
108	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-50
109	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-51
110	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-52
111	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-53
112	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-54
113	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Items #4-55 & #4-56
114	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-57
115	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-58
116	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Items #4-59 & #4-60
117	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-61
118	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-62
119	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Items #4-63 & #4-64
120	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-65
121	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-66
122	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-67
123	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-68
124	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-69
125	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-70
126	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item #4-71

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127	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-72
128	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-73
129	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-74
130	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-75
131	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-76
132	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-77
133	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-78
134	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-79
135	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-80
136	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-81
137	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-82
138	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-83
139	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-84
140	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-85
141	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-86
142	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	WI # 1 (WI = Window Impact) east window of Trophy Hall Doors
143	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	WI # 1 east window of Trophy Hall Doors
144	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	WI # 2 west window of Trophy Hall Doors
145	Overall <input type="checkbox"/> Long <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	WI # 2
146	Overall <input type="checkbox"/> Long <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	WI # 1
147	Overall <input type="checkbox"/> Long <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	WI # 1

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148	Overall <input checked="" type="checkbox"/> Long <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	WI #1
149	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-87
150	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-88
151	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-89
152	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-90
153	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-91
154	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-92
155	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-93
156	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-94
157	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-95
158	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-96
159	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-97
160	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-98
161	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-99
162	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-100
163	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-101
164	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-102
165	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-103
166	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-104
167	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input checked="" type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4 WI #3 Study Center South Window
168	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-105

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Centennial, CO

SDA03020

169	Overall <input type="checkbox"/> Long <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-105
170	Overall <input type="checkbox"/> Long <input checked="" type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-105 w/scale
171	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-106
172	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-106
173	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-106 w/scale
174	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Item # 4-108
175	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Items 4-108
176	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Misfire
177	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Items 4-108 (2 on top)
178	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input checked="" type="checkbox"/> LatPrint <input type="checkbox"/>	Items 4-108 (middle)
179	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	Item 4-108 (lower)
	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	
	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	
	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	
	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	
	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	
	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	
	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	
	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	
	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	
	Overall <input type="checkbox"/> Long <input type="checkbox"/> Medium <input type="checkbox"/> Close <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Entry <input type="checkbox"/> Exit <input type="checkbox"/> Other <input type="checkbox"/> Evidence <input type="checkbox"/> LatPrint <input type="checkbox"/>	

CT73-44545

Evidence log 1 of 2

Dominguez cox

Item #	Description	N of S. wall	W	RP
2001-1	shotgun 12.4200P 4 Remington 760	41"	40"	W of office door
2001-2	live round	196"	18"	
2001-3	cell phone	33" Row 3 Book Shelf N. corner	11" Row 3	
2010-4	knife	33"	14"	
2011-5	wallet	33"	7"	
2011-6	lighter	33"	16"	
2011-7	sharpie	32" 22"	15"	
2011-8	ear bud case	32"	16"	
2011-9	visor light	37"	35"	
2011-10	mountain dew bottle	17"	39"	
2011-11	batteries 532	16"	38"	
2011-12	red cloth/wipe	15"	38"	
2011-13	mountain dew	41" Sub R Book shelf	39" N. corner N. bookshelf	
2011-14	wipe (from 1-13)	36"	33"	

AC EFB notes
20082013

662

18-2238

75-2234

1-14 22.2/2

1-19 22.43

72 22.4

14 16 2-42

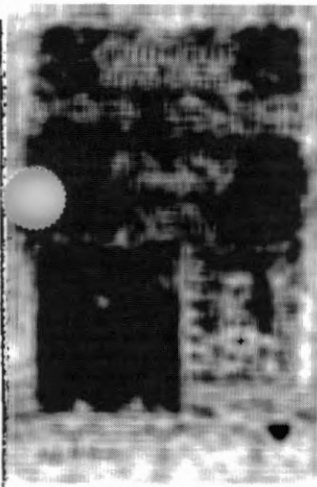
0513-44545

Evidence Log PR 12
Boothell #1

Dominguez van

RD

Item #	Description	South of Boothell	7th & 8th corner
1-15	Winchester box	18"	54"
1-16	Winchester box	13"	54"
1-17	Royal knuck box	18"	59"
1-18	Knuck pack #1-18a live rounds	36"	47"
1-19	magazines, cards	17"	102"



GT13 44545
Inside wallet
Item 1-5

AC 8/18/2018 2:00:00 PM

AK EYE 1200020022013

CR13-44545

Inside wallet
Item 5



Karl Pierson



MAIN OFFICE:
303-347-6000

ATTENDANCE OFFICE:
303-347-6030

GUIDANCE:
303-347-6010

SUICIDE PREVENTION
1-800-273-TALK
(1-800-273-8255)

IF FOUND RETURN TO:
ARAPAHOE HIGH SCHOOL
2201 EAST DRY CREEK ROAD
CENTENNIAL, CO 80122

1. This membership card is presented upon entry or when requested by a staff member.
2. This membership card is non-transferable and privileges may be revoked if violated.
3. By accepting this membership card, the holder agrees to comply with and be bound by HRCA's rules and regulations as they now exist and as they may hereafter be amended or supplemented.

If found please mail to:
9568 University Blvd.
Highlands Ranch, CO 80126



**I Learned
How to Save
a Life Today!**

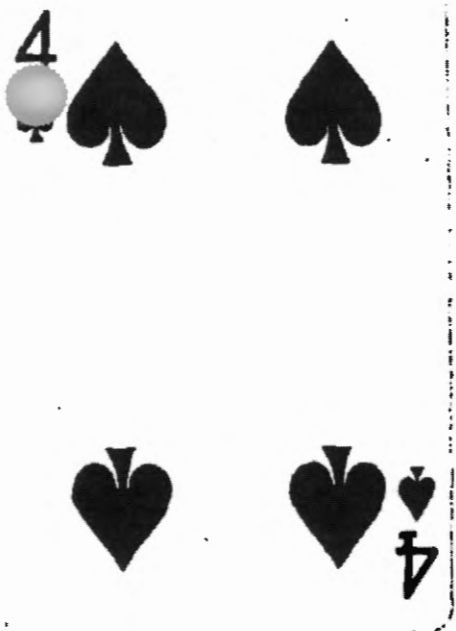


**American
Red Cross**










973-44545
Books collect
Item 1-5

CT13-44545
Inside Wall
1-5
Jhon



AL EP1200020002013

King Soopers
 65 Third Street
 Denver, CO 80220

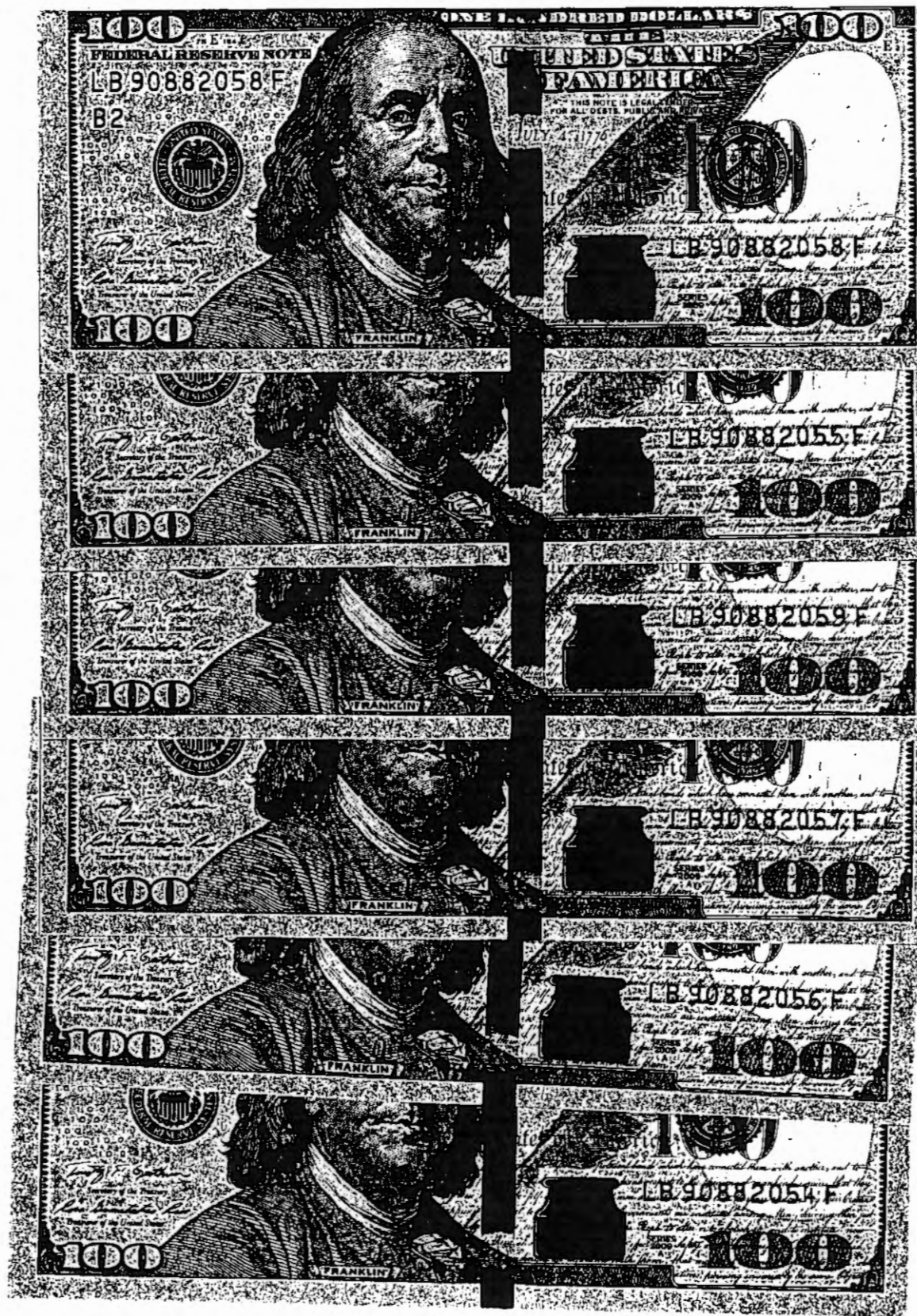
For more information, call 1-800-477-KING

King Soopers current programs and such privileges
 subject to the property of King Soopers. Use of this card is

ADDICT

[illegible]

As the road was



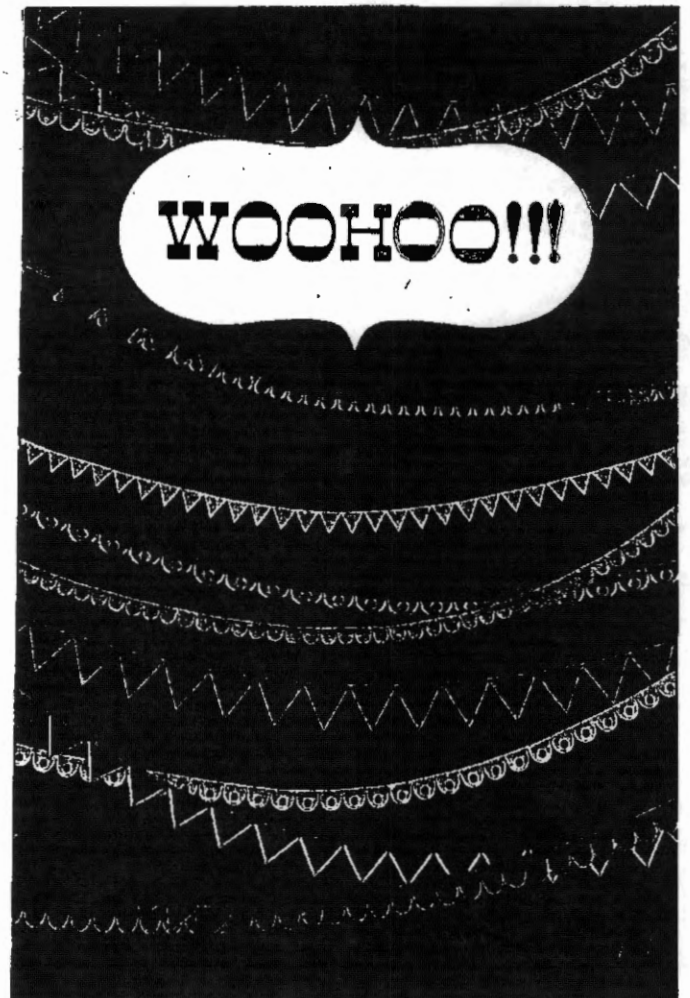
CT73-4454

closed
wallet
lter 1-5



CT13-4885
seried
wallet
Item 1-5

CT13-44545
Inside back
Way of Economics
textbook
Collier 1-19)



CT13-44845
reside
inside flap
of economics
text book
(date 1-19)



Let's hear it for your birthday!

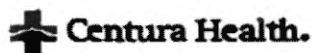
Hope It's AWESOME

Hey Karl,

Here is a little "Rushism" patch
to put on your future uniform.
Hope it reminds you of all the
political debates we had! I admire
your intelligence and value our
friendship. You are a great guy
and an amazing friend!



Littleton Adventist Hospital



CHAIN OF EVIDENCE RELEASE FORM

CT13-44545

12/13/13

BRyant

12016

42

1/1/16

Patient's Name: DAVIS, CLAIRE

Date of Collection: 12/13/13

Location of Exam: LAH OR 3

Police Agency: Arapahoe County Sheriff's Office

Agency Case Record Number: CT13- 44545

Name and Badge Number of Officer Receiving Evidence: Rodney Dilmore 12029

Signature of Receiving Officer: [Signature]

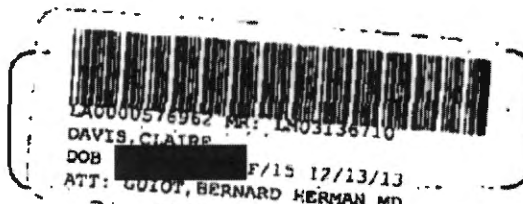
Name of LAH Staff Member Releasing Evidence: [Signature]

Date: 12/13/13

Time: 1442

ORIGINAL TO LAW ENFORCEMENT.

MAKE A COPY AND PLACE IN THE PATIENT'S MEDICAL RECORD.





Office of the Sheriff
EVIDENCE SECTION
13101 E. Broncos Parkway
Centennial, CO 80112
Phone: 720-874-3646
Fax: 720-874-3644

CR# CT13-44545

☐ PETTY OFFENSE

☒ EVIDENCE

Date 12/13/13

☐ MISDEMEANOR

☐ FOUND PROPERTY

Offense 1ST DEG. ASSAULT

☒ FELONY

☐ SAFE KEEPING

Received this date from POD MAULER, whose address or location is:

13101 E BRONCOS PKWY CENTENNIAL, CO the following items listed:

(Tag # and Location for Official
Evidence Use Only)

NO.	QTY.	TAG#	LOC	Description of Item	Location Found
1	1	64134	124	BLOOD STAINED PAIR	ON PERSON
				511 PANTS 34/35	MENS LOCKER
					ROOM.
2	1	64135	124	BLACK ARAPAHOE	
				BASKETBALL SHIRT	
				SIZE M	
3	1	64136	124	MENS TENNIS SHOES	DESK.
				GREEN/BLACK	
				BROOKS 11.5	

Signature of person from whom items were taken [Signature]

Signature of person receiving items [Signature]

(Sign and Print)

STAR#

CHAIN OF CUSTODY

I hereby acknowledge receipt for items No. 1-3 which are listed at the top of this form.

Inventory Officer: [Signature]

(Sign and Print/STAR#)

Date: 12/13/13 / Time 1845

Received By: [Signature]

(Sign and Print/STAR#)

Date: _____ / Time _____

CR# _____

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

BY RECEIVING THE ITEM(S) LISTED ON THIS FORM, THE RECEIVER AGREES TO SAFEGUARD THE ITEMS AND MAINTAIN CHAIN OF CUSTODY WHILE THE ITEM IS IN THEIR CONTROL & CUSTODY. UPON RETURNING THE ITEM(S) TO THE ARAPAHOE COUNTY SHERIFF'S OFFICE, THE ORIGINAL PACKAGING MUST BE INCLUDED WITH THE ITEM(S) AND THE ITEMS MUST BE PACKAGED AND RE-SUBMITTED IN ACCORDANCE WITH CURRENT STANDARDS OF THE ARAPAHOE COUNTY SHERIFF'S OFFICE.

I do not hold the Sheriff's Office responsible for any items which were reported missing that have not been recovered. I also waive my right to a complete inventory of all items recovered by the Sheriff's Office. The Arapahoe County Sheriff's Office does not warranty any items and by receiving the items, the receiver acknowledges that the Arapahoe County Sheriff's Office makes no representations of the items and shall be held harmless from any liability as to the items condition.

Witness: _____

(Signature of Owner)

ACSO AHS Investigation ACSO_0001272



Office of the Sheriff
EVIDENCE SECTION
13101 E. Broncos Parkway
Centennial, CO 80112
Phone: 720-874-3646
Fax: 720-874-3644

CR# CT13-44545

Date 12/13/13

Offense 1ST DEG ASSAULT

☐ PETTY OFFENSE

☐ MISDEMEANOR

☒ FELONY

☒ EVIDENCE

☐ FOUND PROPERTY

☐ SAFE KEEPING

Received this date from DARRELL MEREDITH, whose address or location is:
13101 E BRONCOS PKWY CENTENNIAL, CO the following items listed:

(Tag # and Location for Official
Evidence Use Only)

NO.	QTY.	TAG#	LOC	Description of Item	Location Found
1	1	64137	124	1 PAIR PERRY ELIS PANTS 38/34 BLOOD STAINED.	VICTIM ASST. ROOM. 3RD FLOOR
2	2	64138	124	BLACK ECCO SHOES	size 12
3	1	64139	124	BLACK ARAPAHOE BASKETBALL SHIRT	

Signature of person from whom items were taken Darrell Meredith 12/13/13

Signature of person receiving items McKenzie PCW
(Sign and Print) STAR#

CHAIN OF CUSTODY

I hereby acknowledge receipt for items No. 1-3 which are listed at the top of this form.

Inventory Officer: McKenzie PCW
(Sign and Print/STAR#)

Date: 12/13/13 / Time 1830

Received By: T. [Signature] 04011-
(Sign and Print/STAR#)

Date: 12/16/13 / Time 0700

White - Evidence; Yellow - Records

CT 13-44545
ACSO AHS Investigation

AC805 (Rev 1/10)
ACSO_0001273

CR# _____

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Witness: _____

(Signature of Owner)



Office of the Sheriff
EVIDENCE SECTION
13101 E. Broncos Parkway
Centennial, CO 80112
Phone: 720-874-3646
Fax: 720-874-3644

CR# CT13-00044545

☐ PETTY OFFENSE

☒ EVIDENCE

Date 12/13/2013

☐ MISDEMEANOR

☐ FOUND PROPERTY

Offense ATTEMPTED MURDER

☒ FELONY

☐ SAFE KEEPING

Received this date from DULMAGE 00181, whose address or location is:

13101 E BRONCOS PK the following items listed:

(Tag# and Location for Official
Evidence Use Only)

NO.	QTY.	TAG#	LOC	Description of Item	Location Found
7	1	64140	129	PHOTO OF KARL PIERSON, IDENTIFIED BY TRACY MURPHY	HQ/INV. INTERVIEW ROOM #3408
8	1	64141	129	(3) DIAGRAMS OF ARAPAHOE HIGH SCHOOL, SIGNED BY TRACY MURPHY	HQ/INV. INTERVIEW ROOM #3408

Signature of person from whom items were taken

Signature of person receiving items

(Sign and Print)

DULMAGE, CHRISTOPHER 00181
STAR#

CHAIN OF CUSTODY

I hereby acknowledge receipt for Items No. 7-8 which are listed at the top of this form.

Inventory Officer: DULMAGE, CHRISTOPHER 00181
(Sign and Print/STAR#)

Date: 12/13/13 / Time 2105 hrs.

Received By: 7. 2011 04011
(Sign and Print/STAR#)

Date: 12/16/13 / Time 0700

CT13-00044545

AC805 (Rev 03/09)

ACSO AHS Investigation ACSO_0001275

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

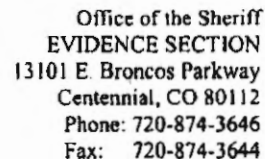
☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

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Witness: _____

(Signature of Owner)



EVIDENCE

☐ FOUND PROPERTY

☐ SAFE KEEPING

2200 S. Dry Creek Rd. the following items listed:

[illegible]

~~#07028~~
STAR#

CHAIN OF CUSTODY

Date: 12-13-13 / Time 1139

Date: 12/16/13 / Time 0700

CT 13-44545
ACSO AHS Investigation

AC805 (Rev 1/10)

ACSO 0001277

CR# _____

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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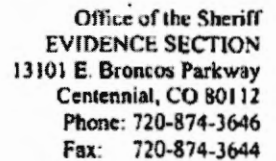
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Witness: _____

(Signature of Owner)



EVIDENCE

☐ FOUND PROPERTY

FELONY

☐ SAFE KEEPING

the following items listed:

[illegible]

(Sign and Print)

12/14/13
STARN

CHAIN OF CUSTODY

I hereby acknowledge receipt for Items No. 1 which are listed at the top of this form.

(Sign and Print/STAR#)

Date: 12/19/17 / Time 1:50

(Sign and Print/STAR#)

Date: 12/16/13 / Time 0700

White - Evidence; Yellow - Records

ACS0 AHS Investigation

AC805 (Rev 1/10)

ACSO 0001279

CR# _____

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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Date: _____ / Time _____

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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Witness: _____

(Signature of Owner)

CR= _____

I hereby acknowledge receipt for Items No. _____ Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print STAR# Title ID#)

Date: _____ Time _____

Received By: _____
(Sign and Print STAR# Title ID#)

Date: _____ Time _____

Purpose the Item(s) were checked out / opened: _____

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(Sign and Print STAR# Title ID#)

Date: _____ Time _____

Received By: _____
(Sign and Print STAR# Title ID#)

Date: _____ Time _____

Purpose the Item(s) were checked out / opened: _____

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(Sign and Print STAR# Title ID#)

Date: _____ Time _____

Received By: _____
(Sign and Print STAR# Title ID#)

Date: _____ Time _____

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(Sign and Print STAR# Title ID#)

Date: _____ Time _____

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(Sign and Print STAR# Title ID#)

Date: _____ Time _____

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Witness: _____

(Signature of Owner)

ACSO AHS Investigation ACSO_0001282



Office of the Sheriff
EVIDENCE SECTION
13101 E. Broncos Parkway
Centennial, CO 80112
Phone: 720-874-3646
Fax: 720-874-3644

CR# ET AE13-00044545

☐ PETTY OFFENSE

☒ EVIDENCE

Date 12/13/2013

☐ MISDEMEANOR

☐ FOUND PROPERTY

Offense ATTEMPT HOMICIDE

☒ FELONY

☐ SAFE KEEPING

Received this date from INVESTIGATOR ONEILL, whose address or location is:

[REDACTED] the following items listed:

(Tag# and Location for Official
Evidence Use Only)

NO.	QTY.	TAG#	LOC	Description of Item	Location Found
1		64147	124	TORN WHITE TSHIRT WITH A TORN STRIP	GARAGE ON TOP OF GARBAGE CAN
2		64148	124	RUBBERMAID PLASTIC GAS CAN WITH SOME GAS IN IT	GARAGE ON THE FLOOR
3		64149	124	TREATMENT PLAN FOR KARL FROM APPOINTMENT AT ADVANCED INTEGRATIVE MEDICINE ON 09/05/13	KITCHEN CABINET
4		64150	124	MOUNTAIN DEW BOTTLE CAP	KITCHEN ISLAND
5		64151	124	RAMS (RIFLE ARCHERY MUZZLE LOADING SHOTGUN)	KARL'S BEDROOM BOOKCASE
6		64152	124	ID BADGE FOR KARL PIERSON	KARL'S BEDROOM BOOKCASE
7		64153	124	MISC IDS FOR KARL PIERSON	KARL'S BEDROOM BOOKCASE
8		64154	124	NRA QUALIFICATION CERTIFICATES FOR KARL PIERSON	KARL'S BEDROOM BOOKCASE
9		64155	124	EXTERNAL HARDDRIVE TOSHIBA S/N: 52A6YETKFN69	KARL'S BEDROOM DESK DRAWER
				3 LOOSE USB DRIVES	KARL'S BEDROOM DESK DRAWER

Signature of person from whom items were taken

Signature of person receiving items

(Sign and Print)

AT Scene
JOHNSTON, KIMBERLY 9938

STAR#

CHAIN OF CUSTODY

I hereby acknowledge receipt for Items No. 1-9 which are listed at the top of this form.

Inventory Officer: [Signature] JOHNSTON, KIMBERLY 9938

(Sign and Print/STAR#)

Date: 12/14/13 / Time 0100

Received By: [Signature] 04011-

(Sign and Print/STAR#)

Date: 12/14/13 / Time 0700

AE13-00044545

CT

AC805 (Rev 03/09)

ACSO AHS Investigation ACSO_0001283

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

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I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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Witness: _____

(Signature of Owner)



Office of the Sheriff
EVIDENCE SECTION
13101 E. Broncos Parkway
Centennial, CO 80112
Phone: 720-874-3646
Fax: 720-874-3644

CR# AC13-00044545

☐ PETTY OFFENSE

☒ EVIDENCE

Date 12/13/2013

☐ MISDEMEANOR

☐ FOUND PROPERTY

Offense ATTEMPT HOMICIDE

☒ FELONY

☐ SAFE KEEPING

Received this date from INVESTIGATOR GARNSEY whose address or location is:

[REDACTED] the following items listed:

(Tag# and Location for Official
Evidence Use Only)

NO.	QTY.	TAG#	LOC	Description of Item	Location Found
10				DELL INSPIRON 530 S/N: 97MBPH1 COMPUTER TOWER	OFFICE UNDERNEATH THE DESK
11				WALMART RECEIPT FOR AMMO	KARL'S BEDROOM ON THE FLOOR NEXT TO THE BED
12				PACKAGING FOR A SLING FOR LONG GUN BUTLER CREEK	KARL'S BEDROOM ON THE FLOOR
13				INSTRUCTION MANUAL FOR SAVAGE ARMS STEVENS MODEL 3 20 PUMP SHOTGUN	KARL'S BEDROOM ON THE FLOOR
14				TORN ROYAL BUCK SHOTGUN SHELLS BOX 25 (EMPTY)	KARL'S BEDROOM ON THE FLOOR
15				GROVTEC SLING SWIVELS PACKAGING	KARL'S BEDROOM ON THE FLOOR
16				CABELLAS BRAND SHOTGUN SHELL BELT PACKAGING AND STOCK SHELLHOLDER BAND PACKAGING	KARL'S BEDROOM ON THE FLOOR
17				REMINGTON SHOTGUN SLUGS BOX OF 5 (EMPTY)	KARL'S BEDROOM ON THE FLOOR
18				ALTOID BOX CONTAINING CABELLAS RECEIPT FOR SAVAGE SHOTGUN AND \$10 BACKGROUND CHECK	KARL'S BEDROOM ON THE BED
19				WINCHESTER SHOTGUN SHELLS BOX OF 25 (EMPTY)	KARL'S BEDROOM ON THE FLOOR
20				RECEIPT FROM BRUNSWICK ZONE FOR BOWLING ON 121313 AT 0911AM	KARL'S BEDROOM ON THE FLOOR
21				TARGET RECEIPT FOR MOUNTAIN DEW FOUR PACK BOTTLES FROM 121313 AT 0944AM	KARL'S BEDROOM ON THE FLOOR

Signature of person from whom items were taken At Scars

Signature of person receiving items [Signature]

JOHNSTON, KIMBERLY 9938

STAR#

CHAIN OF CUSTODY

I hereby acknowledge receipt for Items No. 10-21 which are listed at the top of this form.

Inventory Officer [Signature] JOHNSTON, KIMBERLY 9938

(Sign and Print/STAR#)

Date: 12/14/13 / Time 0100

Received By: 7. [Signature] 0900

(Sign and Print/STAR#)

Date: 12/16/13 / Time 0700

AC13-00044545

RTO per dispo

2/1/14 810826

AC805 (Rev 03/09)

ACSO AHS Investigation

ACSO_0001285

I hereby acknowledge receipt for Items No. 64156 which are listed on the other side of this form.

Released By: Chelsea S. Shanahan 0826

(Sign and Print / STAR# / Title / ID#)

Date: 12/18/13 / Time 0730Received By: K. Johnston 9938

(Sign and Print / STAR# / Title / ID#)

Date: 12/18/13 / Time 0730

Purpose the item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. 64156 which are listed on the other side of this form.

Released By: K. Johnston 9938

(Sign and Print / STAR# / Title / ID#)

Date: 12/20/13 / Time 1030Received By: Chelsea S. Shanahan 0826

(Sign and Print / STAR# / Title / ID#)

Date: 12/20/13 / Time 1030

Purpose the item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. 64156 which are listed on the other side of this form.

Released By: Chelsea S. Shanahan 0826

(Sign and Print / STAR# / Title / ID#)

Date: 2/7/14 / Time 1325Received By: Barbara Pierson

(Sign and Print / STAR# / Title / ID#)

Date: 2/7/14 / Time 1325Purpose the item(s) were checked out / opened: Return to Owner CO DL☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____

(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____

(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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Witness: _____

(Signature of Owner)



ARAPAHOE COUNTY SHERIFF PROPERTY DISPOSITION REPORT

Printed: 2/07/14 9:40:04 Page 1



CENT

CR#: 201300044545

Type of Case: SHOTS FIRED
Target Disp Dt: 12/16/2025

Case Report Date: 12/13/2013

Assigned Investigator: MCCAULEY, KRISTIN Star No: 03077
Reporting Deputy: DREILING, LARA Star No: 10052

For Evid	Tag#	Bin	Tag# Barcode	Code	Item Description	Serial/VIN Number	Release To	Final Disp
<input checked="" type="checkbox"/>	0064156	124		EVID	CT/DELL INSPIRON 530 COMPUTER TOWER	97MBP111	Barber	1
Type	Name	Date of Birth	Address	Home				
S	PIERSON, KARL, HALVERSON							
V	MURPHY, TRACY, GENE			Home Work				
V	DAVIS, CLAIRE, ESTHER			Home				
V			ADDRESS NOT ON FILE					

NOTE: ONLY PROPERTY WITH CODES OF EVID, FOUND, OR SAFE ARE ACTUALLY ON-HAND

Key:

1. Release to Owner, Indicate if Photos Needed
2. Destroy
3. (A) Sale (B) General Fund (C) Official Use

{ } Photos Needed

{ } Lab Requested Submitted

Supr Approval:

Signature:

Date: 2/7/14

Title:

Remarks: release to owner Barber

Contact Made (please date): By Letter _____ Certified Mail _____ or Phone _____ Destruction Date: _____

Response: _____ Evidence Tech Signature:

Barbara Pierson CO OL



ARAPAHOE COUNTY SHERIFF PROPERTY DISPOSITION REPORT

Printed: 2/07/14 9:40:04 Page: 2

CENT

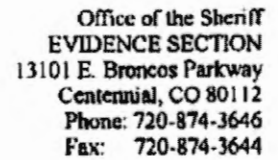
CR#: 201300044545

Type of Case: SHOTS FIRED
Target Disp Dt: 12/16/2025



Assigned Investigator: MCCAULEY, KRISTIN Star No: 03077
Reporting Deputy: DREILING, LARA Star No: 10052

Case Report Date: 12/13/2013



□ SAFE KEEPING

ACSO AHS Investigation ACSO 0001289

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

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(Sign and Print / STAR# / Title / ID#)

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Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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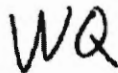
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Witness: _____

(Signature of Owner)



ACSO AHS Investigation ACSO 0001291

CR# _____

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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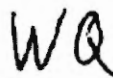
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Witness: _____

(Signature of Owner)



CR# CT13-44545
Date: 12/16/2013
Offense Att. Murder

~~X~~ EVIDENCE

☐ FOUND PROPERTY

X FELONY

☐ SAFE KEEPING

Littleton P.D. the following items listed:

[illegible]

Signature of person receiving items

STAR#

I hereby acknowledge receipt for Items No. 1 which are listed at the top of this form.

Date: 2/11/13 / Time 9:06am

Date: _____ / Time _____

ACSO AHS Investigation ACSO 0001293

CR# _____

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Witness: _____

(Signature of Owner)

ACSO AHS Investigation ACSO_0001294



Office of the Sheriff
EVIDENCE SECTION
13101 E. Broncos Parkway
Centennial, CO 80112
Phone: 720-874-3646
Fax: 720-874-3644

CR# ACTB-44545

Date 12/13/13

Offense Found prop.

~~1~~ PETTY OFFENSE

EVIDENCE

☐ MISDEMEANOR

X FOUND PROPERTY

☒ ~~FELONY~~

☐ SAFE KEEPING

Received this date from SCENE, whose address or location is:

2201 E. Dry CREEK RD. the following items listed:

(Tag # and Location for Official
Evidence Use Only)

[illegible]

Signature of person from whom items were taken

Signature of person receiving items

(Sign and Print)

STAR#

CHAIN OF CUSTODY

I hereby acknowledge receipt for Items No.

which are listed at the top of this form.

Inventory Officer:

(Sign and Print/STAR#)

Date: 12/13/13 / Time 1945

Received By:

(Sign and Print/STAR#)

Date: 12/4/13 / Time 1100

ACSÖ AHS Investigation ACSÖ_0001295

CR# _____

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

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I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

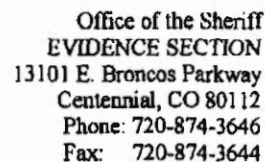
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Witness: _____

(Signature of Owner)

ACSO AHS Investigation ACSO_0001296



☐ SAFE KEEPING

ACSO 0001297

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

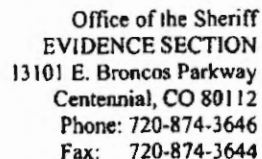
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Witness: _____

(Signature of Owner)



EVIDENCE

□ FOUND PROPERTY

☐ **SAFE KEEPING**

(Tag # and Location for Official
Evidence Use Only)

(Sign and Print)

04038
STAR#

White - Evidence, Yellow - Records

ATTN-114545

ACSO AHS Investigation

ACSO 0001299

CR# _____

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

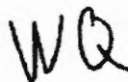
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Witness: _____

ACSO AHS Investigation ACSO_0001300



CR#

CT13-44545

U) PETTY OFFENSE

~~X~~EVIDENCE

Date _____

12/16/2013

□ MISDEMEANOR

□ FOUND PROPERTY

Offense

Att. Murder

~~X~~ FELONY

☐ SAFE KEEPING

Received this date from

Barbara Pierson

, whose address or location is:

the following items listed:

(Tag # and Location for Official
Evidence Use Only)

Signature of person from whom items were taken _____

• Gene

Signature of person receiving items

(Sign and Print)

Hines

9823

STARA

CHAIN OF CUSTODY

I hereby acknowledge receipt for ~~for~~ items No

1-5

which are listed at the top of this form.

Inventory Officer:

Time 2833

Open and Print/STAR#)

Date: 2/16/13 / Time 5:56 PM

Date: 12/7/3 / Time 0700

Received By:

16 June 9001

(Sign and Print) **STAR**

OT 13-11115115

ACSO AHS Investigation

ACSO 0001301

CR# _____

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

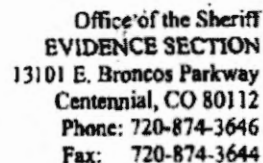
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Witness: _____

(Signature of Owner)

ACSO AHS Investigation ACSO_0001302



□ EVIDENCE

☐ FOUND PROPERTY

☐ SAFE KEEPING

2700 S BROADWAY, LITTLETON, CO the following items listed:

[illegible]

(Sign and Print)

1216
STAR#

CHAIN OF CUSTODY

I hereby acknowledge receipt for Items No. 1 - 6 which are listed at the top of this form.

(Sign and Print/STAR#)

(Sign and Print/STAR#)

Date: 12/12/13 / Time 10:35

Date: 12/17/13 / Time 1045

ACSO AHS Investigation

ACSO 0001303

13-14-140
I hereby acknowledge receipt for Items No. _____ Tag No. _____

CR= _____
which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

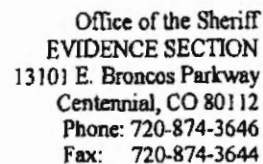
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Witness: _____

ACSO AHS Investigation ACSO_0001304



☐ SAFE KEEPING

the following items listed:

ACSO AHS Investigation ACSO 0001305

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

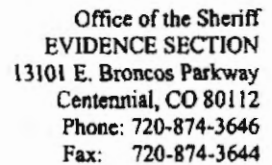
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Witness: _____

(Signature of Officer)



☐ SAFE KEEPING

ACSO AHS Investigation ACSO_0001307

CR#

I hereby acknowledge receipt for Items No. / Tag No. 64194

which are listed on the other side of this form.

Released By: [Signature]

(Sign and Print / STAR# / Title / ID#)

Date: 12/20/13/ Time: 15:15Received By: [Signature]

(Sign and Print / STAR# / Title / ID#)

Date: 12/20/13/ Time: 17:15Purpose the Item(s) were checked out / opened: TOT - Bruce Peterson to RTD

The item(s) will not be returned to the Arapahoe County Sheriff's Office



The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____

which are listed on the other side of this form.

Released By: _____

(Sign and Print / STAR# / Title / ID#)

Date: _____

/ Time: _____

Received By: _____

(Sign and Print / STAR# / Title / ID#)

Date: _____

/ Time: _____

Purpose the Item(s) were checked out / opened: _____



The item(s) will not be returned to the Arapahoe County Sheriff's Office



The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____

which are listed on the other side of this form.

Released By: _____

(Sign and Print / STAR# / Title / ID#)

Date: _____

/ Time: _____

Received By: _____

(Sign and Print / STAR# / Title / ID#)

Date: _____

/ Time: _____

Purpose the Item(s) were checked out / opened: _____



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Released By: _____

(Sign and Print / STAR# / Title / ID#)

Date: _____

/ Time: _____

Received By: _____

(Sign and Print / STAR# / Title / ID#)

Date: _____

/ Time: _____

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Witness: _____

(Signature of Owner)

ACSO AHS Investigation ACSO_0001309



ARAPAHOE COUNTY SHERIFF PROPERTY DISPOSITION REPORT

Printed: 12/20/13 17:12:45

Page: 1



CENT

CR#: 201300044545

Type of Case: SHOTS FIRED
Target Disp Dt: 12/18/2016Assigned Investigator: MCCAULEY, KRISTIN Star No: 03077
Reporting Deputy: DREILING, LARA Star No: 10052

Case Report Date: 12/13/2013

For Evid	Tag#	Bin	Tag# Barcode	Code	Item Description	Serial/VIN Number	Release To	Final Disp
✓	0064194	124	000000000000000000	EVFL	CT/PAIR OF PINK AND BLACK TENNIS SHOES			
	0064264	124	000000000000000000	EVFL	CT/ITEM 4-10 - BACKPACK-BLK-W/ID FOR [REDACTED]			
	0064265	V SAFE	000000000000000000	EVFL	CT/ITEM 4-10A - US CURRENCY - \$20.09 FROM ITE			
	0064266	124	000000000000000000	EVFL	CT/ITEM 4-11 - CELL PHONE - SAMSUNG - PINK CO			

TOT
Bruce Peterson
to return
to owner

Type	Name	Date of Birth	Address	Home
S	PIERSON, KARL HALVERSON	[REDACTED]	[REDACTED]	[REDACTED]
V	MURPHY, TRACY, GENE	[REDACTED]	[REDACTED]	Home [REDACTED] Work [REDACTED]

NOTE: ONLY PROPERTY WITH CODES OF EVID, FOUND, OR SAFE ARE ACTUALLY ON-HAND

Key:

1. Release to Owner, Indicate if Photos Needed
2. Destroy
3. (A) Sale (B) General Fund (C) Official Use

{ } Photos Needed

{ } Lab Requested Submitted

Supr Approval: _____

Signature: _____

Date: 12/20/13

Title: _____

Remarks: _____

Contact Made (please date): By Letter _____ Certified Mail _____ or Phone _____

Destruction Date: _____

Response: _____

Evidence Tech Signature: _____



ARAPAHOE COUNTY SHERIFF PROPERTY DISPOSITION REPORT

Printed: 12/20/13 17:12:45 Page: 2

CENT

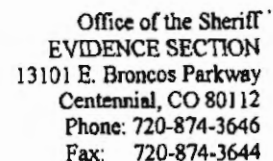
CR#: 201300044545

Type of Case: **SHOTS FIRED**
Target Disp Dt: 12/18/2016



Assigned Investigator: **MCCAULEY, KRISTIN** Star No: 03077
Reporting Deputy: **DREILING, LARA** Star No: 10052

Case Report Date: 12/13/2013



☐ SAFE KEEPING

2201 E DRY CREEK RD _____ the following items listed:

ACSO AHS Investigation ACSO 0001312

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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Witness: _____

(Signature of Owner)

COLORADO BUREAU OF INVESTIGATION
REQUEST FOR LABORATORY EXAMINATION

CBI LAB CASE # D13.2756 re
PAGE 1 OF (add)

SUSPECT	<u>Karl</u>	<u>Pirson</u>	RAC/ <u>W</u>	SEX/ <u>M</u>	DOB/ <u>[REDACTED]</u>	SID/ <u>[REDACTED]</u>
	FIRST	MIDDLE	LAST			
SUSPECT	<u></u>	<u></u>	RAC/ <u></u>	SEX/ <u></u>	DOB/ <u></u>	SID/ <u></u>
	FIRST	MIDDLE	LAST			
SUSPECT	<u></u>	<u></u>	RAC/ <u></u>	SEX/ <u></u>	DOB/ <u></u>	SID/ <u></u>
	FIRST	MIDDLE	LAST			
VICTIM	<u></u>	<u></u>	RAC/ <u></u>	SEX/ <u></u>	DOB/ <u></u>	SID/ <u></u>
	FIRST	MIDDLE	LAST			
VICTIM	<u></u>	<u></u>	RAC/ <u></u>	SEX/ <u></u>	DOB/ <u></u>	SID/ <u></u>
	FIRST	MIDDLE	LAST			

OFFENSE (I.C. NUMBER) Homicide NCIC OFFENSE CODE 903 DATE OF OFFENSE 12/13/13

Arapahoe County Sheriff Office REQUESTING AGENCY AND ORI CO 0030000 *CASE# CT13-44545

18th Judicial District *IMPORTANT: EVIDENCE MUST BE LIMITED TO ONE AGENCY CASE

JUDICIAL DISTRICT AND EXACT TRIAL DATE, IF AVAILABLE CHECK ALL THAT APPLY: NEW CASE FOR CBI? ☒
ADDITIONAL EVIDENCE? ☐
RESUBMITTED EVIDENCE? ☐
CBI ASSISTED CRIME SCENE? ☐

CBI ITEM	OUTER PACKAGING	AGENCY ITEM	DESCRIPTION	gun(s)/sharp(s) are safe to handle to confirm
10	L	64205	Display cabinet	<input type="checkbox"/>
		64287	Pieces of drywall 112	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

COPY

CBI Forensic Sciences personnel MUST be notified if this evidence has been previously analyzed

USE CONTINUATION FORM FOR ADDITIONAL ITEMS

Investigating Officer Kristin McCauley Phone # 720-874-4101
E-Mail kmccauley@arapahoe.gov PLEASE PRINT Fax # 720-874-4080

CHAIN OF CUSTODY: (Pending inventory by CBI staff)

Date/Time	Signature
04/09/14 1235	<u>[Signature]</u>
4/9/14 1235	<u>[Signature]</u>

FedEx/UPS/Car

- CBI USE
- CRS
- DNA
- SER
- HRF
- CHE
- TRA
- GSR
- P.R.**
- NIS
- FTP
- FIN
- PDS

DENVER
690 Kipling St., Suite 4000
Denver, CO 80215
(303) 239-4303
Fax (303) 239-0859

GRAND JUNCTION
2797 Justice Dr.
Grand Junction, CO 81506
(970) 248-7500
Fax (970) 248-7484

PUEBLO
3416 N. Elizabeth St.
Pueblo, CO 81008
(719) 542-1133
Fax (719) 542-8411



Page 1*3

Office of the Sheriff
EVIDENCE SECTION
13101 E. Broncos Parkway
Centennial, CO 80112
Phone: 720-874-3646
Fax: 720-874-3644

SAFE

CR# CT13-00044545☐ PETTY OFFENSE☒ EVIDENCEDate 12/13/2013☐ MISDEMEANOR☐ FOUND PROPERTYOffense ATTEMPT HOMICIDE☒ FELONY☐ SAFE KEEPINGReceived this date from SCENE whose address or location is:2201 E DRY CREEK RD the following items listed:(Tag# and Location for Official
Evidence Use Only)

NO.	QTY.	TAG#	LOC	Description of Item	Location Found
1		64200 GYB		ITEM 1-1: BLACK STEVENSONS MODEL 320 SHOTGUN Serial # 134200P	SOUTH EAST FLOOR OF LIBRARY
2		64201 124		ITEM 1-2: ROYAL BUCK LIVE ROUND	FLOOR OF LIBRARY (ROW 3)
3		64202 124		ITEM 1-4: FOLDING POCKET KNIFE	FLOOR OF LIBRARY (ROW 3)
4		64209 124		ITEM 1-5: WALLET WITH CO DL FOR PIERSON, KARL	FLOOR OF LIBRARY (ROW 3)
5		64210 VSAF2		ITEM 1-5A 6-\$100.00, 3-\$20.00 & 2-\$1.00 DOLLAR BILLS (\$662)	INSIDE WALLET WITH CO DL FOR PIERSON
6		64211 124		ITEM 1-7: 1 SHARPIE PEN	FLOOR OF LIBRARY (ROW 3)
7		64212 124		ITEM 1-6: 7-11 LIGHTER	FLOOR OF LIBRARY (ROW 3)
8		64213 124		ITEM 1-8: PURPLE EARBUD CASE	FLOOR OF LIBRARY (ROW 3)
9		64214 124		ITEM 1-9: BLACK VISOR LIGHT	FLOOR OF LIBRARY (ROW 3)
10		64215 H2C		ITEM 1-10: EMPTY MOUNTAIN DEW BOTTLE	FLOOR OF LIBRARY (ROW 3)
11		64216 H2C		ITEM 1-10A: TEFLON BOTTLE CONTAINING FLUID FROM MOUNTAIN DEW BOTTLE	FLOOR OF LIBRARY (ROW 3)
12		64217 124		ITEM 1-11: 2 2032 DISC BATTERIES	FLOOR OF LIBRARY (ROW 3)

Signature of person from whom items were taken

Signature of person receiving items

DOMINGUEZ, ERINN 05042
STAR#

CHAIN OF CUSTODY

I hereby acknowledge receipt for Items No. 1-12 which are listed at the top of this form.

Inventory Officer:

DOMINGUEZ, ERINN 05042

Date:

12/17/13 / Time 1520

Received By:

(Sign and Print/STAR#)

Shanahan 05026

Date:

12/17/13 / Time 1625

CT13-00044545

AC805 (Rev 03/09)

ACSO AHS Investigation

ACSO_0001315

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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Witness: _____

(Signature of Owner)



Page 283

Office of the Sheriff
EVIDENCE SECTION
13101 E. Broncos Parkway
Centennial, CO 80112
Phone: 720-874-3646
Fax: 720-874-3644

CR# CT13-00044545☐ PETTY OFFENSE☒ EVIDENCEDate 12/13/2013☐ MISDEMEANOR☐ FOUND PROPERTYOffense ATTEMPT HOMICIDE☒ FELONY☐ SAFE KEEPINGReceived this date from SCENE, whose address or location is:2201 E DRY CREEK RD

the following items listed:

(Tag# and Location for Official
Evidence Use Only)

NO.	QTY.	TAG#	LOC	Description of Item	Location Found
13		64218	HA2C	ITEM 1-12: RED CLOTH WITH POSSIBLE GASOLINE & BLOOD	FLOOR OF LIBRARY (ROW 3)
14		64219	HA2C	ITEM 1-13: EMPTY MOUNTAIN DEW BOTTLE	FLOOR OF LIBRARY (ROW 3)
15		64220	HA2C	ITEM 1-14: TAN CLOTH (WICK FROM ITEM 1-13)	FLOOR OF LIBRARY (ROW 3)
16		64221	124	ITEM 1-15: UNOPENED WINCHESTER SHOTGUN SHELL BOX	FLOOR OF LIBRARY (ROW 3)
17		64222	124	ITEM 1-16: UNOPENED WINCHESTER SHOTGUN SHELL BOX	FLOOR OF LIBRARY (ROW 3)
18		64223	124	ITEM 1-17: EMPTY ROYAL BUCK SHOTGUN SHELL BOX	FLOOR OF LIBRARY (ROW 3)
19		64224	124	ITEM 1-18: BACKPACK	FLOOR OF LIBRARY (ROW 3)
20		64225	124	ITEM 1-18A: 25 LIVE ROUNDS (ROYAL BUCK)	INSIDE BACKPACK FOUND ON FLOOR OF LIBRARY (ROW 3)
21		64226	124	ITEM 1-19: MAGAZINES, CHARGER, CARDS, AND MISC PAPERS	FLOOR OF LIBRARY (ROW 3)
22		64227	124	ITEM 1-1A: LIVE ROUND	INSIDE STEVENSONS SHOTGUN
23		64228	124	ITEM 1-1B: ONE SPENT SHOTGUN SHELL	INSIDE STEVENSONS SHOTGUN

Signature of person from whom items were taken

Signature of person receiving items

(Sign and Print)

DOMINGUEZ, ERINN 05042

STAR#

CHAIN OF CUSTODY

I hereby acknowledge receipt for items No. 13-23 which are listed at the top of this form.

Inventory Officer:

DOMINGUEZ, ERINN 05042

(Sign and Print/STAR#)

Date:

12/12/13 / Time 1520

Received By:

(Sign and Print/STAR#)

Date:

12/17/13 / Time 1625

CT13-00044545

AC805 (Rev 03/09)

ACSO AHS Investigation

ACSO_0001317

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

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I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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Witness: _____

(Signature of Owner)

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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Witness: _____

(Signature of Owner)



Office of the Sheriff
EVIDENCE SECTION
13101 E. Broncos Parkway
Centennial, CO 80112
Phone: 720-874-3646
Fax: 720-874-3644

CR# CT13-00044545

☐ PETTY OFFENSE

☒ EVIDENCE

Date 12/16/2013

☐ MISDEMEANOR

☐ FOUND PROPERTY

Offense ATT HOMICIDE

☒ FELONY

☐ SAFE KEEPING

Received this date from AUTOPSY, whose address or location is:

13101 E BRONCOS PK the following items listed:

(Tag# and Location for Official
Evidence Use Only)

NO.	QTY.	TAG#	LOC	Description of Item	Location Found
56		64230	124	LIGHTER	RIGHT FRONT CARGO POCKET; PANTS
57		64231		PAIR OF BLACK SHOES	DECEDENT
58		64232		2 PAIR BLACK SOCKS	DECEDENT
59		64233		GREEN/GRAY CARGO PANTS	DECEDENT
60		64234		FLASHLIGHT W/ HOLDER	DECEDENT
61		64235		BLACK LONG UNDERWEAR PANTS	DECEDENT
62		64236		BLUE BOXER BRIEFS	DECEDENT
63		64237		GERBER MACHETE	DECEDENT
64		64238		PAPER BAG FROM R HAND	DECEDENT
65		64239		PAPER BAG FROM L HAND	DECEDENT
66		64240	3	WATCH	DECEDENT
67		64241	124	BANDOLIER W/ 20 LIVE STEEL SHOT SHELLS	DECEDENT

Signature of person from whom items were taken

Signature of person receiving items

AK Stephen
(Sign and Print)

STEPHEN, ANDREA 04038
STAR#

CHAIN OF CUSTODY

I hereby acknowledge receipt for Items No. 56-67 which are listed at the top of this form.

Inventory Officer: *AK Stephen* STEPHEN, ANDREA 04038

Date: 12/18/13 / Time 0708

Received By:

Chelsea J. Shanahan
(Sign and Print/STAR#)

Date: 12/18/13 / Time 0710

CT13-00044545

AC805 (Rev 03/09)

ACSO AHS Investigation

ACSO_0001321

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

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Witness: _____

(Signature of Owner)

COLORADO BUREAU OF INVESTIGATION

REQUEST FOR LABORATORY EXAMINATION

CBI LAB CASE # _____

PAGE 1 OF 2

SUSPECT Karl Halverson Pierson RAC/ W SEX/ M DOB/ [REDACTED] SID/ _____
 FIRST MIDDLE LAST

SUSPECT _____ RAC/ _____ SEX/ _____ DOB/ _____ SID/ _____
 FIRST MIDDLE LAST

SUSPECT _____ RAC/ _____ SEX/ _____ DOB/ _____ SID/ _____
 FIRST MIDDLE LAST

VICTIM Claire Davis RAC/ W SEX/ F DOB/ _____ SID/ _____
 FIRST MIDDLE LAST

VICTIM _____ RAC/ _____ SEX/ _____ DOB/ _____ SID/ _____
 FIRST MIDDLE LAST

OFFENSE (E.G. HOMICIDE) 1st Degree Homicide NCIC OFFENSE CODE 911 DATE OF OFFENSE 12/13/13

Arapahoe County Sheriff Office CO 0030000 *CASE# CT13-44545

REQUESTING AGENCY AND ORI _____ *IMPORTANT: EVIDENCE MUST BE LIMITED TO ONE AGENCY CASE

18th Judicial district _____ CHECK ALL THAT APPLY: NEW CASE FOR CBI? ☒

JUDICIAL DISTRICT AND EXACT TRIAL DATE, IF AVAILABLE _____ ADDITIONAL EVIDENCE? ☐

RESUBMITTED EVIDENCE? ☐
 CBI ASSISTED CRIME SCENE? ☐

CBI ITEM	OUTER PACKAGING	AGENCY ITEM	DESCRIPTION	gun(s)/sharp(s) are safe Initial to confirm
		64206	Black Stevensons model 320 shotgun serial number 134200P found in library	<input type="checkbox"/>
		64222	unopened winchester shotgun shell box found in library	<input type="checkbox"/>
		64225	25 live rounds royal buck found in library	<input type="checkbox"/>
		64228	One spent shotgun shell found inside ghotgun	<input type="checkbox"/>
		64247	shotgun shell spent	<input type="checkbox"/>
		64246	Shot gun shell spent	<input type="checkbox"/>
		64255	Shotgun shell spent	<input type="checkbox"/>

CBI Forensic Sciences personnel MUST be notified if this evidence has been previously analyzed

USE CONTINUATION FORM FOR ADDITIONAL ITEMS

Investigating Officer Kristin McCauley Phone # [REDACTED]
 E-Mail [REDACTED] Fax # 720 874 4060

CHAIN OF CUSTODY: (Pending inventory by CBI staff)
 Date/Time Signature

FedEx/UPS/Cert _____

1		
2		
3		
4		

5		
6		
7		
8		

CBI USE
CRS
DNA
SER
HRF
CHE
TRA
GSR
FIR
NIB
FTP
FIN
FDB

DENVER
 680 Kipling St. Suite 4000
 Denver, CO 80216
 (303) 239-4303
 Fax (303) 239-9859

GRAND JUNCTION
 2797 Justice Dr.
 Grand Junction, CO 81506
 (970) 248-7500
 Fax (970) 248-7464

PUEBLO
 3418 N. Elizabeth St.
 Pueblo, CO 81008
 (719) 542-1133
 Fax (719) 542-8411

ACSO AHS Investigation ACSO_0001323

INVENTORY OF ITEMS SUBMITTED: (Continued)

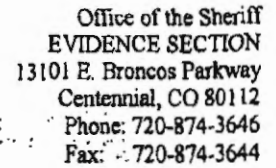
CBI LAB CASE # _____

DOS: _____

PAGE 2 OF 3

[illegible]

ADDITIONAL CASE INFORMATION:



EVIDENCE

☐ FOUND PROPERTY

☐ **SAFE KEEPING**

ACSO 0001325

AC805 (Rev 03/09)

CR# CT13-00044545

I hereby acknowledge receipt for Items No. / Tag No. 69 which are listed on the other side of this form.Released By: AK Stephen STEPHEN 04058
(Sign and Print / STAR# / Title / ID#)Date: 6/10/14 / Time 1045Received By: Chelsea S. Sharahan 08124
(Sign and Print / STAR# / Title / ID#)Date: 1/3/14 / Time 1045

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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Witness:

ACSO AHS Investigation ACSO_0001326



Office of the Sheriff
EVIDENCE SECTION
13101 E. Broncos Parkway
Centennial, CO 80112
Phone: 720-874-3646
Fax: 720-874-3644

CR# CT13-00044545

☐ PETTY OFFENSE

☒ EVIDENCE

Date 12/14/2013

☐ MISDEMEANOR

☐ FOUND PROPERTY

Offense ATT. MURDER

☒ FELONY

☐ SAFE KEEPING

Received this date from _____, whose address or location is:

2201 E DRY CREEK RD

the following items listed:

(Tag# and Location for Official
Evidence Use Only)

NO.	QTY.	TAG#	LOC	Description of Item	Location Found
8		64247	124	SHOTGUN SHELL, SPENT (ITEM 2-2)	ARAPAHOE HIGH SCHOOL
9		64248		SHOTGUN SHELL FOLLOWER (ITEM 2-3)	ARAPAHOE HIGH SCHOOL
10		64249		SHOTGUN SHELL, SPENT (ITEM 2-4)	ARAPAHOE HIGH SCHOOL
11		64250		BLACK PELLET (ITEM 2-7)	ARAPAHOE HIGH SCHOOL
12		64251		WATER BOTTLE (BROKEN) (ITEM 2-9)	ARAPAHOE HIGH SCHOOL
13		64252		SHOTGUN SHELL FOLLOWER (ITEM 2-12)	ARAPAHOE HIGH SCHOOL
14		64253		SHOTGUN SHELL CUP (ITEM 2-13)	ARAPAHOE HIGH SCHOOL
15		64254	1A2C	WHITE CLOTH (STORED IN PAINT CAN) (ITEM 2-14)	ARAPAHOE HIGH SCHOOL
17		64255	124	SHOTGUN SHELL, SPENT (ITEM 2-15)	ARAPAHOE HIGH SCHOOL

Signature of person from whom items were taken _____

Signature of person receiving items _____

(Sign and Print)

BRYANT, ERICK 12016

STAR#

CHAIN OF CUSTODY

I hereby acknowledge receipt for Items No. 8-16 8-15 AND 17 which are listed at the top of this form.

Inventory Officer: _____

BRYANT, ERICK 12016

(Sign and Print/STAR#)

Date: 12/18/13 / Time 1100

Received By: _____

(Sign and Print/STAR#)

Date: 12/18/13 / Time 1105

CT13-00044545

ACSO AHS Investigation

AC805 (Rev 03/09)
ACSO_0001327

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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Witness: _____

(Signature of Owner)



Office of the Sheriff
EVIDENCE SECTION
13101 E. Broncos Parkway
Centennial, CO 80112
Phone: 720-874-3646
Fax: 720-874-3644

CR# CT13-00044545

☐ PETTY OFFENSE

☒ EVIDENCE

Date 12/14/2013

☐ MISDEMEANOR

☐ FOUND PROPERTY

Offense SHOOTING

☒ FELONY

☐ SAFE KEEPING

Received this date from SCENE - ARAPAHOE HIGH SCHOOL, whose address or location is:

2201 E DRY CREEK RD the following items listed:

(Tag# and Location for Official
Evidence Use Only)

NO.	QTY.	TAG#	LOC	Description of Item	Location Found
1		11755	24	ITEM 4-01 - SUNGLASSES WITH BLACK FRAME	TROPHY HALL - FLOOR AT N ENTRANCE
2		11756		ITEM 4-02 - PLASTIC SHOT WAD	TROPHY HALL - FLOOR AT N END
3		11757		ITEM 4-03 - 12GA SHOTGUN SHELL-FIRED-WHITE CASING	TROPHY HALL - FLOOR AT N END
4		11758		ITEM 4-04 - PIECE OF SHOT WADDING - PLASTIC	TROPHY HALL - W OF ENTRANCE TO LIBRARY HALL
5		11759		ITEM 4-05 - SHOTGUN SHELL-LIVE-WINCHESTER-RED CASING	TROPHY HALL - W OF ENTRANCE TO LIBRARY HALL
6		11760		ITEM 4-06 - PIECE OF SHOT WADDING - BLACK DISK	TROPHY HALL - BY DOOR TO SCIENCE DEPT HALL
7		11761		ITEM 4-07 - 12GA SHOTGUN SHELL - FIRED-WINCHESTER RED CASING	TROPHY HALL - BY 1ST BENCH FROM NORTH END
8		11762		ITEM 4-08 - PIECE OF SHOT WADDING - PLASTIC SHOT CUP	TROPHY HALL - BY 1ST BENCH FROM NORTH END
9				ITEM 4-09 - BACKPACK-BLK&PNK-W/ID FOR CLAIRE DAVIS W/BOOKS/NOTEBOOKS/PENS/CALCULATOR/USB D	TROPHY HALL - ON 1ST BENCH FROM NORTH END
10				ITEM 4-09A - US CURRENCY - \$4.87 FROM ITEM 4-09 BACKPACK	TROPHY HALL - ON 1ST BENCH FROM NORTH END
11				ITEM 4-10 - BACKPACK-BLK-W/ID FOR [REDACTED] W/POD/KEYS/CALCULATOR/NOTEBOOKS/US	TROPHY HALL - ON 1ST BENCH FROM NORTH END
12				ITEM 4-10A - US CURRENCY - \$20.09 FROM ITEM 4-10 BACKPACK	TROPHY HALL - ON 1ST BENCH FROM NORTH END

Signature of person from whom items were taken NA

Signature of person receiving items [Signature]

(Sign and Print)

ADAMS,STEPHEN 03020

STAR#

CHAIN OF CUSTODY

I hereby acknowledge receipt for Items No. 112 9-10 which are listed at the top of this form.

Inventory Officer: [Signature] ADAMS,STEPHEN 03020
(Sign and Print/STAR#)

Date: 12-17-13 / Time 1051

Received By: [Signature]
(Sign and Print/STAR#)

Date: 12/17/13 / Time 1051

CT13-00044545

ACSO AHS Investigation

ACSO_0001329
AC805 (Rev 03/09)

CR# CT13-00044545

I hereby acknowledge receipt for Items No. / Tag No. 9-10 which are listed on the other side of this form.Released By: K. McCawley 03077
(Sign and Print / STAR# / Title / ID#)Date: 12/17/13 / Time 11:20Received By: [Signature]
(Sign and Print / STAR# / Title / ID#)Date: 12/17/13 / Time 1130Purpose the Item(s) were checked out / opened: returned to family☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office☒ The item(s) will be returned to the Arapahoe County Sheriff's Office.I hereby acknowledge receipt for Items No. 1-8 & 11-12 which are listed on the other side of this form.Released By: AD Cohen SD Adams 0302
(Sign and Print / STAR# / Title / ID#)Date: 12-18-13 / Time 1545Received By: Chelsea J. Shanahan 08126
(Sign and Print / STAR# / Title / ID#)Date: 12/18/13 / Time 1600

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.I hereby acknowledge receipt for Items No. 64264 - 964265 which are listed on the other side of this form.Released By: Chelsea J. Shanahan 08126
(Sign and Print / STAR# / Title / ID#)Date: 12/20/13 / Time 1715Received By: [Signature] 9603
(Sign and Print / STAR# / Title / ID#)Date: 12/20/13 / Time 1715Purpose the Item(s) were checked out / opened: TDI - Bruce Peterson to RTO☒ The item(s) will not be returned to the Arapahoe County Sheriff's Office☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Witness: _____

ACSO AHS Investigation ACSO_0001330



Office of the Sheriff
EVIDENCE SECTION
13101 E. Broncos Parkway
Centennial, CO 80112
Phone: 720-874-3646
Fax: 720-874-3644

TOT - Sgt Peterson 12/20/13
✓ TOT to Inv. McCauley 12/31/13

CR# CT13-00044545

☐ PETTY OFFENSE

☒ EVIDENCE

Date 12/14/2013

☐ MISDEMEANOR

☐ FOUND PROPERTY

Offense SHOOTING

☒ FELONY

☐ SAFE KEEPING

Received this date from SCENE - ARAPAHOE HIGH SCHOOL, whose address or location is:

2201 E DRY CREEK RD. the following items listed:

(Tag# and Location for Official
Evidence Use Only)

NO.	QTY.	TAG#	LOC	Description of Item	Location Found
13		04266	124	ITEM 4-11 - CELL PHONE - SAMSUNG - PINK COVER	TROPHY HALL - ON 1ST BENCH FROM NORTH END
14		04267		ITEM 4-12 - BOTTLE OF WATER - DYASNI	TROPHY HALL - ON 1ST BENCH FROM NORTH END
15		04268		ITEM 4-13 - NOTEBOOK & 3 PAPERS	TROPHY HALL - BY 1ST BENCH FROM NORTH END
16		04269		ITEM 4-14 - CELL PHONE - SAMSUNG - BLK COVER	TROPHY HALL - SOUTH OF 1ST BENCH FROM NORTH END
17		04270		ITEM 4-15 - BALL POINT PEN	TROPHY HALL - BY 1ST BENCH FROM NORTH END
18		04271		ITEM 4-16 - COOKIE BAG	TROPHY HALL - ON 1ST BENCH FROM NORTH END
19		04272		ITEM 4-17 - HAIR - MULTIPLE STRANDS	TROPHY HALL - SOUTH OF 1ST BENCH FROM NORTH END
20		04273		ITEM 4-18 - BLOOD SAMPLE (SCRAPINGS)	TROPHY HALL - WEST OF 1ST BENCH FROM NORTH END
21		04274		ITEM 4-19 - BLOOD SAMPLE (SCRAPINGS)	TROPHY HALL - FLOOR - EDGE OF 1ST BENCH FROM NORTH END
22		04275		ITEM 4-20 - WHITE TABLET - MIDOL 7.2g	TROPHY HALL - BY BACK OF 1ST BENCH FROM NORTH END
23		04276	124	ITEMS 4-21 THRU 4-31 - SHOT PELLETS	TROPHY HALL - FLOOR
24		04277	124	ITEM 4-32 - METAL RING - SMALL WIRE	TROPHY HALL - FLOOR

Signature of person from whom items were taken

Signature of person receiving items

(Sign and Print)

ADAMS, STEPHEN 03020

STAR#

CHAIN OF CUSTODY

I hereby acknowledge receipt for Items No. 13-24 which are listed at the top of this form.

Inventory Officer ADAMS, STEPHEN 03020

(Sign and Print/STAR#)

Date: 12-16-13 / Time 1545

Received By

(Sign and Print/STAR#)

Date: 12/18/13 / Time 1600

CT13-00044545

AC805 (Rev 03/09)

ACSO AHS Investigation ACSO_0001331

I hereby acknowledge receipt for Items No. / Tag No. 64269 which are listed on the other side of this form.

Released By: [Signature] 02010 Date: 12/18/13 / Time 1700
(Sign and Print / STAR# / Title / ID#)

Received By: [Signature] Gunnery 02010 Date: 12/18/13 / Time 1700
(Sign and Print / STAR# / Title / ID#)

Purpose the Item(s) were checked out / opened: Exam

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office ☒ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. 64269 which are listed on the other side of this form.

Released By: [Signature] Gunnery 02010 Date: 12/18/13 / Time 0933
(Sign and Print / STAR# / Title / ID#)

Received By: [Signature] Shanahan 08126 Date: 12/19/13 / Time 0933
(Sign and Print / STAR# / Title / ID#)

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office ☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. 64269 which are listed on the other side of this form.

Released By: [Signature] Shanahan 08126 Date: 12/20/13 / Time 1715
(Sign and Print / STAR# / Title / ID#)

Received By: [Signature] 967 Date: 12/20/13 / Time 1715
(Sign and Print / STAR# / Title / ID#)

Purpose the Item(s) were checked out / opened: TO - Bruce Peterson to RTD

☒ The item(s) will not be returned to the Arapahoe County Sheriff's Office ☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. 64269 which are listed on the other side of this form.

Released By: [Signature] Shanahan 08126 Date: 12/31/13 / Time 1055
(Sign and Print / STAR# / Title / ID#)

Received By: [Signature] McClamley Date: 12/31/13 / Time 1055
(Sign and Print / STAR# / Title / ID#)

Purpose the Item(s) were checked out / opened: _____

☒ The item(s) will not be returned to the Arapahoe County Sheriff's Office ☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

Phone returned to W family via Sheriff

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Witness: _____ (Signature of Owner)



ARAPAHOE COUNTY SHERIFF PROPERTY DISPOSITION REPORT

Printed: 12/31/13 9:51:42 Page: 1



CENT

CR#: 201300044545

Type of Case: SHOTS FIRED
Target Disp Dt: 12/16/2025

Case Report Date: 12/13/2013

Assigned Investigator: MCCAULEY, KRISTIN Star No: 03077
Reporting Deputy: DREILING, LARA Star No: 10052

For Evid	Tag#	Bin	Tag# Barcode	Code	Item Description	Serial/VIN Number	Release To	Final Disp
Only	0064269	124			EVEL CT/ITEM 4-14 - CELL PHONE - SAMSUNG - BLK COV		Davis	1

Type	Name	Date of Birth	Address	Home
S	PIERSON, KARL, HALVERSON			
V	MURPHY, TRACY, GENE			

NOTE: ONLY PROPERTY WITH CODES OF EVID, FOUND, OR SAFE ARE ACTUALLY ON-HAND

Key:

1. Release to Owner, Indicate if Photos Needed
2. Destroy
3. (A) Sale (B) General Fund (C) Official Use

() Photos Needed

() Lab Requested Submitted

Supr Approval: *[Signature]* 9821Signature: *[Signature]* Date: 12/31/13

Title: Inv

Remarks: *given back to Claire's family via Sheriff*

Contact Made (please date): By Letter _____ Certified Mail _____ or Phone _____ Destruction Date: _____

Evid Tech Signature: *TOT -> McCauley to give to Sheriff to RTO 12/31/13*

COLORADO BUREAU OF INVESTIGATION
REQUEST FOR LABORATORY EXAMINATION

CT13-44545
CBI LAB CASE # D13-2756 TR
PAGE 1 OF (add)

SUSPECT	<u>Karl</u>	<u>Pierson</u>	RAC/ <u>W</u>	SEX/ <u>M</u>	DOB/ <u></u>	SID/ <u></u>
	FIRST	MIDDLE	LAST			
SUSPECT	<u></u>	<u></u>	RAC/ <u></u>	SEX/ <u></u>	DOB/ <u></u>	SID/ <u></u>
	FIRST	MIDDLE	LAST			
SUSPECT	<u></u>	<u></u>	RAC/ <u></u>	SEX/ <u></u>	DOB/ <u></u>	SID/ <u></u>
	FIRST	MIDDLE	LAST			
VICTIM	<u></u>	<u></u>	RAC/ <u></u>	SEX/ <u></u>	DOB/ <u></u>	SID/ <u></u>
	FIRST	MIDDLE	LAST			
VICTIM	<u></u>	<u></u>	RAC/ <u></u>	SEX/ <u></u>	DOB/ <u></u>	SID/ <u></u>
	FIRST	MIDDLE	LAST			

OFFENSE (E.G. HOMICIDE) Homicide NCIC OFFENSE CODE 903 DATE OF OFFENSE 12/13/13
Arapahoe County Sheriff Office REQUESTING AGENCY AND ORI CO 0030000 *CASE# CT13-44545
*IMPORTANT: EVIDENCE MUST BE LIMITED TO ONE AGENCY CASE

18th Judicial district CHECK ALL THAT APPLY: NEW CASE FOR CBI? ☒
JUDICIAL DISTRICT AND EXACT TRIAL DATE, IF AVAILABLE ADDITIONAL EVIDENCE? ☐
RESUBMITTED EVIDENCE? ☐
CBI ASSISTED CRIME SCENE? ☐

CBI ITEM	OUTER PACKAGING	AGENCY ITEM	DESCRIPTION	gun(s)/sharp(s) are safe Initial to confirm
		64205	Display cabinet	<input type="checkbox"/>
<u>11</u>	<u>P</u>	64287	Pieces of drywall <u>124</u>	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

COPY

CBI Forensic Sciences personnel MUST be notified if this evidence has been previously analyzed

USE CONTINUATION FORM FOR ADDITIONAL ITEMS
Investigating Officer Kristin McCauley Phone #
E-Mail PLEASE PRINT Fax # 720-874-4060

CHAIN OF CUSTODY: (Pending inventory by CBI staff)		FedEx/UPS/Cert	CBI USE CRS DNA SER HRF CHE TRA GSR FIR NIB FTP FIN FDB
Date/Time	Signature		
1 <u>4/22/14</u>	<u>Chelsea F</u>		
2 <u>1005</u>	<u>J Raylsack</u>		
3 <u>4/22/14</u>			
4 <u>1005</u>			

DENVER
690 Kipling St., Suite 4000
Denver, CO 80215
(303) 239-4303
Fax (303) 239-8859

GRAND JUNCTION
2797 Justice Dr.
Grand Junction, CO 81508
(970) 248-7500
Fax (970) 248-7464

PUEBLO
3416 N. Elizabeth St.
Pueblo, CO 81008
(719) 542-1133
Fax (719) 542-6411



Office of the Sheriff
EVIDENCE SECTION
13101 E. Broncos Parkway
Centennial, CO 80112
Phone: 720-874-3646
Fax: 720-874-3644

CR# CT13-00044545

☐ PETTY OFFENSE

☒ EVIDENCE

Date 12/14/2013

☐ MISDEMEANOR

☐ FOUND PROPERTY

Offense SHOOTING

☒ FELONY

☐ SAFE KEEPING

Received this date from SCENE - ARAPAHOE HIGH SCHOOL, whose address or location is:

2201 E DRY CREEK RD

the following items listed:

(Tag# and Location for Official
Evidence Use Only)

NO.	QTY.	TAG#	LOC	Description of Item	Location Found
25		64278	124	ITEMS 4-33 THRU 4-47 - SHOT PELLETS	TROPHY HALL - FLOOR
26		64279		ITEM 4-48 - SHOT WADDING - PLASTIC SHOT CUP	TROPHY HALL - FLOOR
27		64280		ITEMS 4-49 THRU 4-86 - SHOT PELLETS	TROPHY HALL - FLOOR
28		64281		ITEMS 4-87 THRU 4-104 - SHOT PELLETS	STUDY CENTER - FLOOR
29		64282		ITEM 4-105 - SHOE - BLK & WHT FLAT	TROPHY HALL - FLOOR
30		64283		ITEM 4-106 - SHOE - BLK LOAFER - ROUTE 66	TROPHY HALL - FLOOR
31		64284		ITEM 4-107 - SHOT PELLETS (MULTIPLE)	TROPHY HALL - INSIDE 1ST TROPHY CASE ON EAST WALL
32		64285		ITEM 4-108 - SHOT PELLETS (4)	TROPHY HALL - N END OF 2ND BENCH FROM NORTH END
33		64286		ITEM 4-109 - SHOT PELLETS (6)	LIBRARY - E WALL OF VIDEO ROOM
34		64287		ITEM 4-110 - PIECES OF DRYWALL (2)	LIBRARY - E WALL OF VIDEO ROOM

Signature of person from whom items were taken UA

Signature of person receiving items ADAMS, STEPHEN

(Sign and Print)

ADAMS, STEPHEN 03020

STAR#

CHAIN OF CUSTODY

I hereby acknowledge receipt for Items No. 25-34 which are listed at the top of this form.

Inventory Officer: ADAMS, STEPHEN 03020

(Sign and Print/STAR#)

Date: 12-18-13 / Time 1545

Received By: Chelsea J. Shanahan

(Sign and Print/STAR#)

Date: 12/18/13 / Time 1600

CT13-00044545

ACSO AHS Investigation

AC805 (Rev 03/09)
ACSO_0001335

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

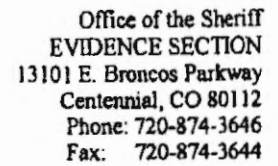
☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

BY RECEIVING THE ITEM(S) LISTED ON THIS FORM, THE RECEIVER AGREES TO SAFEGUARD THE ITEMS AND MAINTAIN CHAIN OF CUSTODY WHILE THE ITEM IS IN THEIR CONTROL & CUSTODY. UPON RETURNING THE ITEM(S) TO THE ARAPAHOE COUNTY SHERIFF'S OFFICE, THE ORIGINAL PACKAGING MUST BE INCLUDED WITH THE ITEM(S) AND THE ITEMS MUST BE PACKAGED AND RE-SUBMITTED IN ACCORDANCE WITH CURRENT STANDARDS OF THE ARAPAHOE COUNTY SHERIFF'S OFFICE.

I do not hold the Sheriff's Office responsible for any items which were reported missing that have not been recovered. I also waive my right to a complete inventory of all items recovered by the Sheriff's Office. The Arapahoe County Sheriff's Office does not warranty any items and by receiving the items, the receiver acknowledges that the Arapahoe County Sheriff's Office makes no representations of the items and shall be held harmless from any liability as to the items condition.

Witness: _____

(Signature of Owner)



8 EVIDENCE

☐ FOUND PROPERTY

☐ SAFE KEEPING

Received this date from INVESTIGATOR KIM JOHNSTON, whose address or location is:

13101 E BRONCOS PK the following items listed:

(Tag# and Location for Official
Evidence Use Only)

NO.	QTY.	TAG#	LOC	Description of Item	Location Found
13		04293	24	MOUNTAIN DEW 4 PACK BOX WITH ONE SEALED GLASS MT. DEW BOTTLE	PASSENGER SEAT
14		04294	1	MOUNTAIN DEW BOTTLE CAP	DRIVER'S FLOOR BOARD UNDER GLOVES
15		04295	1	MOUNTAIN DEW BOTTLE CAP	UNDER THE DRIVER'S SEAT
16		04296	V	BELLCO CREDIT UNION WITHDRAWAL RECEIPT FOR \$800 FRO M 12/12/2013 BY KARL PIERSON	CENTER CONSULE

Signature of person from whom items were taken

Signature of person receiving items

JOHNSTON, KIMBERLY 9938

STAR#

CHAIN OF CUSTODY

I hereby acknowledge receipt for Items No. 13-16 which are listed at the top of this form.

Inventory Officer: JOHNSTON, KIMBERLY 9938

Date: 12/9/13 / Time 0910

Received By:

Date: 12/19/13 / Time 0910

CT13-00044545

AC805 (Rev 03/09)

ACSO AHS Investigation ACSO 0001337

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

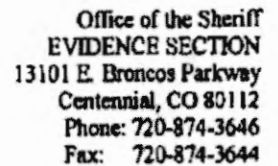
☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

BY RECEIVING THE ITEM(S) LISTED ON THIS FORM, THE RECEIVER AGREES TO SAFEGUARD THE ITEMS AND MAINTAIN CHAIN OF CUSTODY WHILE THE ITEM IS IN THEIR CONTROL & CUSTODY. UPON RETURNING THE ITEM(S) TO THE ARAPAHOE COUNTY SHERIFF'S OFFICE, THE ORIGINAL PACKAGING MUST BE INCLUDED WITH THE ITEM(S) AND THE ITEMS MUST BE PACKAGED AND RE-SUBMITTED IN ACCORDANCE WITH CURRENT STANDARDS OF THE ARAPAHOE COUNTY SHERIFF'S OFFICE.

I do not hold the Sheriff's Office responsible for any items which were reported missing that have not been recovered. I also waive my right to a complete inventory of all items recovered by the Sheriff's Office. The Arapahoe County Sheriff's Office does not warranty any items and by receiving the items, the receiver acknowledges that the Arapahoe County Sheriff's Office makes no representations of the items and shall be held harmless from any liability as to the items condition.

Witness: _____

(Signature of Owner)



ACSO AHS Investigation ACSO 0001339

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

BY RECEIVING THE ITEM(S) LISTED ON THIS FORM, THE RECEIVER AGREES TO SAFEGUARD THE ITEMS AND MAINTAIN CHAIN OF CUSTODY WHILE THE ITEM IS IN THEIR CONTROL & CUSTODY. UPON RETURNING THE ITEM(S) TO THE ARAPAHOE COUNTY SHERIFF'S OFFICE, THE ORIGINAL PACKAGING MUST BE INCLUDED WITH THE ITEM(S) AND THE ITEMS MUST BE PACKAGED AND RE-SUBMITTED IN ACCORDANCE WITH CURRENT STANDARDS OF THE ARAPAHOE COUNTY SHERIFF'S OFFICE.

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Witness: _____

(Signature of Owner)

WR



Office of the Sheriff
EVIDENCE SECTION
13101 E. Broncos Parkway
Centennial, CO 80112
Phone: 720-874-3646
Fax: 720-874-3644

CR# CT13-44545☐ PETTY OFFENSE☒ EVIDENCEDate 12/19/13☐ MISDEMEANOR☐ FOUND PROPERTYOffense Attempted 1st Degree Murder ☒ FELONY☐ SAFE KEEPINGReceived this date from ACSO, whose address or location is:13101 E. Broncos Pkwy, Centennial, CO the following items listed:

(Tag # and Location for Official Evidence Use Only)

NO.	QTY.	TAG#	LOC	Description of Item	Location Found
1	1	04303	C	DVD-Int w Fabian Valerio	As Above
2	1	04304		DVD-Int w James Mason	"
3	1	04305		DVD-Int w Barbara Pierson	"
4	1	04306		DVD-Int w Tracy Murphy	"
5	1	04307		DVD-Int w Rob Bratsch	"
6	1	04308		DVD-Int w Cameron Rust	"
7	1	04309		DVD-Int w James Engler	"
8	2	04310		DVD-Int w Kolk, Mauler, Mard. H. CD-Int w Kolk, Mauler, Mard. H.	"
8 of 8 ver					

Signature of person from whom items were taken N/ASignature of person receiving items EVANS 00283

(Sign and Print)

STAR#

CHAIN OF CUSTODY

I hereby acknowledge receipt for Items No. 1-8 which are listed at the top of this form.

Inventory Officer

(Sign and Print/STAR#)

Date: 12/19/13 / Time 1455

Received By

(Sign and Print/STAR#)

Date: 12/19/13 / Time 1520

ACSO AHS Investigation

ACSO_0001341

CR# _____

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

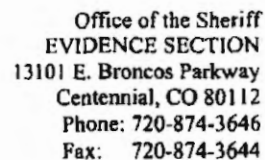
BY RECEIVING THE ITEM(S) LISTED ON THIS FORM, THE RECEIVER AGREES TO SAFEGUARD THE ITEMS AND MAINTAIN CHAIN OF CUSTODY WHILE THE ITEM IS IN THEIR CONTROL & CUSTODY. UPON RETURNING THE ITEM(S) TO THE ARAPAHOE COUNTY SHERIFF'S OFFICE, THE ORIGINAL PACKAGING MUST BE INCLUDED WITH THE ITEM(S) AND THE ITEMS MUST BE PACKAGED AND RE-SUBMITTED IN ACCORDANCE WITH CURRENT STANDARDS OF THE ARAPAHOE COUNTY SHERIFF'S OFFICE.

I do not hold the Sheriff's Office responsible for any items which were reported missing that have not been recovered. I also waive my right to a complete inventory of all items recovered by the Sheriff's Office. The Arapahoe County Sheriff's Office does not warranty any items and by receiving the items, the receiver acknowledges that the Arapahoe County Sheriff's Office makes no representations of the items and shall be held harmless from any liability as to the items condition.

Witness: _____

(Signature of Owner)

ACSO AHS Investigation ACSO_0001342



EVIDENCE

☐ FOUND PROPERTY

☐ **SAFE KEEPING**

5776 S. CROCKER ST. the following items listed:

[illegible]

07098
STAR#

I hereby acknowledge receipt for Items No. 1 which are listed at the top of this form.

Date: 12-19-13 / Time 1700

Date: 12/20/13 / Time 1300

ACSO AHS Investigation ACSO 0001343

CR# _____

I hereby acknowledge receipt for Items No. _____ Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print STAR# Title ID#)

Date: _____ Time _____

Received By: _____
(Sign and Print STAR# Title ID#)

Date: _____ Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print STAR# Title ID#)

Date: _____ Time _____

Received By: _____
(Sign and Print STAR# Title ID#)

Date: _____ Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print STAR# Title ID#)

Date: _____ Time _____

Received By: _____
(Sign and Print STAR# Title ID#)

Date: _____ Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print STAR# Title ID#)

Date: _____ Time _____

Received By: _____
(Sign and Print STAR# Title ID#)

Date: _____ Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office

BY RECEIVING THE ITEM(S) LISTED ON THIS FORM, THE RECEIVER AGREES TO SAFEGUARD THE ITEMS AND MAINTAIN CHAIN OF CUSTODY WHILE THE ITEM IS IN THEIR CONTROL & CUSTODY. UPON RETURNING THE ITEM(S) TO THE ARAPAHOE COUNTY SHERIFF'S OFFICE, THE ORIGINAL PACKAGING MUST BE INCLUDED WITH THE ITEM(S) AND THE ITEMS MUST BE PACKAGED AND RE-SUBMITTED IN ACCORDANCE WITH CURRENT STANDARDS OF THE ARAPAHOE COUNTY SHERIFF'S OFFICE.

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Witness: _____

ACSO AHS Investigation ACSO_0001344



Office of the Sheriff
EVIDENCE SECTION
13101 E. Broncos Parkway
Centennial, CO 80112
Phone: 720-874-3646
Fax: 720-874-3644

CR# 013-44545

Date 12-17-13

Offense Home

☐ PETTY OFFENSE

☐ MISDEMEANOR

☒ FELONY

☒ EVIDENCE

☐ FOUND PROPERTY

☐ SAFE KEEPING

Received this date from SCS, whose address or location is:

5776 S. CROWDER ST. the following items listed:

(Tag # and Location for Official
Evidence Use Only)

NO.	QTY.	TAG#	LOC	Description of Item	Location Found
1	1	64323	124	TEACHER / FACULTY CONTACT INFORMATION	SCS - 12-17-13
2	1	64324	124	CLASS SCHEDULE KARE PARRIS	SCS - 12-17-13
3	1	64325	124	TRUCK DRIVE CONTAINING	SCS
				THE FOLLOWING INFORMATION:	
				1. COMPLETE LIST OF STUDENTS 12-13-13	
				2. COMPLETE LIST OF STUDENTS 2013-2014	
				3. DAILY ATTENDANCE REGISTER 12-13-13	
				4. 12-13-13 CLASSES TRACY MURPHY	
				5. [REDACTED]	
				6. [REDACTED]	
				7. [REDACTED]	
4	1	64326	124	VISITOR LOG 12-13-13	
5	1	64327	124	PERSONNEL FILE - TRACY MURPHY	

Signature of person from whom items were taken X Ballek

Signature of person receiving items [Signature]
(Sign and Print)

#07098
STAR#

CHAIN OF CUSTODY

I hereby acknowledge receipt for Items No. 1-5 which are listed at the top of this form.

Inventory Officer [Signature] #07098

Received By: Chelsea [Signature]
(Sign and Print/STAR#)

Date: 12-20-13 / Time: 1200

Date: 12/20/13 / Time: 1500

ACSO AHS Investigation ACSO_0001345

CR= _____

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print STAR= Title ID=)

Date: _____ Time _____

Received By: _____
(Sign and Print STAR= Title ID=)

Date: _____ Time _____

Purpose the item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form

Released By: _____
(Sign and Print STAR= Title ID=)

Date: _____ Time _____

Received By: _____
(Sign and Print STAR= Title ID=)

Date: _____ Time _____

Purpose the item(s) were checked out / opened: _____

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(Sign and Print STAR= Title ID=)

Date: _____ Time _____

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(Sign and Print STAR= Title ID=)

Date: _____ Time _____

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(Sign and Print STAR= Title ID=)

Date: _____ Time _____

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Date: _____ Time _____

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Witness: _____

ACSO AHS Investigation ACSO_0001346



Office of the Sheriff
EVIDENCE SECTION
13101 E. Broncos Parkway
Centennial, CO 80112
Phone: 720-874-3646
Fax: 720-874-3644

CR# CT13-44545

☐ PETTY OFFENSE

☒ EVIDENCE

Date 12-18-13

☐ MISDEMEANOR

☐ FOUND PROPERTY

Offense Homicide

☒ FELONY

☐ SAFE KEEPING

Received this date from SCENE, whose address or location is:

5776 S. CROCKER ST. the following items listed:

(Tag # and Location for Official
Evidence Use Only)

NO.	QTY.	TAG#	LOC	Description of Item	Location Found
6	1	64328	124	TEACHER CONTACT INFORMATION	SCENE
				- NAME / WORK EMAIL ONLY	
7	1	64329	124	copy of STUDENT RECORD FOR	SCENE
				KARE PEARSON - MISSING THREAT ASSESSMENT	
8	1	64330	124	copy of [REDACTED]	SCENE
				([REDACTED])	
9	1	64331	124	TEACHER CONTACT INFORMATION	SCENE
				- HOME ADDRESS + PHONE	
10	1	64332	124	copy of STUDENT RECORD -	SCENE
				KARE PEARSON - DISCIPLINE	
				AND THREAT ASSESSMENT	

Signature of person from whom items were taken X Ben Lassane

Signature of person receiving items [Signature]
(Sign and Print)

07098
STAR#

CHAIN OF CUSTODY

I hereby acknowledge receipt for Items No. 6-10 which are listed at the top of this form.

Inventory Officer [Signature] #07098
(Sign and Print)

Date: 12-20-13 / Time 1200

Received By: Chelsea S. [Signature] #0826
(Sign and Print)

Date: 12/20/13 Time 1300

ACSO AHS Investigation ACSO_0001347

CR# _____

I hereby acknowledge receipt for Items No. _____ Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print STAR# Title ID#)

Date: _____ Time _____

Received By: _____
(Sign and Print STAR# Title ID#)

Date: _____ Time _____

Purpose the Item(s) were checked out / opened: _____

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☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

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(Sign and Print STAR# Title ID#)

Date: _____ Time _____

Received By: _____
(Sign and Print STAR# Title ID#)

Date: _____ Time _____

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(Sign and Print STAR# Title ID#)

Date: _____ Time _____

Received By: _____
(Sign and Print STAR# Title ID#)

Date: _____ Time _____

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(Sign and Print STAR# Title ID#)

Date: _____ Time _____

Received By: _____
(Sign and Print STAR# Title ID#)

Date: _____ Time _____

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Witness: _____

ACSO AHS Investigation ACSO_0001348

ACSO AHS Investigation ACSO 0001349

CR# _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

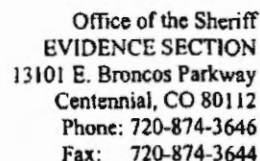
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Witness: _____

(Signature of Owner)



EVIDENCE

☐ FOUND PROPERTY

☐ **SAFE KEEPING**

(Tag # and Location for Official
Evidence Use Only)

Signature of person from whom items were taken N/A

Signature of person receiving items [Signature] EVANS 00203
(Sign and Print)

STAR#

I hereby acknowledge receipt for Items No. 1 which are listed at the top of this form.

Date: 1223/3 / Time 1400

Date: 12/24/13 / Time 0800

ACSO AHS Investigation ACSO 0001351

CR# _____

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

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Witness: _____

(Signature of Owner)

ACSO AHS Investigation ACSO_0001352

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

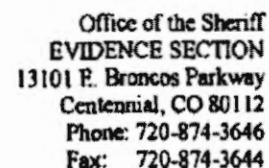
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Witness: _____



☐ SAFE KEEPING

2201 E DRY CREEK RD the following items listed:

ACSO 0001354

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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(Sign and Print / STAR# / Title / ID#)

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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(Sign and Print / STAR# / Title / ID#)

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Witness: _____

(Signature of Owner)

CR# 6713-44545I hereby acknowledge receipt for Items No. 1 which are listed on the other side of this form.Released By: [Signature] 07210Date: 12-24-13 / Time 1300Received By: [Signature] ShenaharomDate: 12/26/13 / Time 0800Purpose the Item(s) were checked out / opened: Working Copy Made☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office ☒ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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(Sign and Print / STAR# / Title / ID#)

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Witness: _____

ACSO AHS Investigation ACSO_0001357

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
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Purpose the Item(s) were checked out / opened: _____

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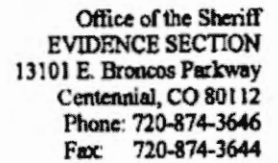
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Witness: _____

(Signature of Owner)



□ SAFE KEEPING

the following items listed:

ACSO AHS Investigation ACSO_0001360

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

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Witness: _____

(Signature of Owner)



Office of the Sheriff
EVIDENCE SECTION
13101 E. Broncos Parkway
Centennial, CO 80112
Phone: 720-874-3646
Fax: 720-874-3644

CR# CT13-00044545

☐ PETTY OFFENSE

☒ EVIDENCE

Date 12/13/2013

☐ MISDEMEANOR

☐ FOUND PROPERTY

Offense HOMICIDE

☒ FELONY

☐ SAFE KEEPING

Received this date from _____, whose address or location is:

2201 E DRY CREEK RD

the following items listed:

(Tag# and Location for Official
Evidence Use Only)

NO.	QTY.	TAG#	LOC	Description of Item	Location Found
1		64381	124	RED PLASTIC WATER BOTTLE (3-1)	NORTH CENTRAL LIBRARY FLOOR
2		64382		DAMAGED CARPET (3-2)	NORTH CENTRAL LIBRARY FLOOR
3		64383		WHITE BURNED CLOTH (3-3)	NORTH CENTRAL LIBRARY FLOOR
4		64384		GREEN LIVE SHOTGUN SHELL (3-4)	NORTH CENTRAL LIBRARY FLOOR
5		64385		BROKEN PIECES OF GREEN GLASS BOTTLE (3-5)	NORTH CENTRAL LIBRARY FLOOR
6		64386		BROKEN GREEN MOUNTAIN DEW GLASS BOTTLE (3-6)	NORTH CENTRAL LIBRARY FLOOR
7		64387		SAMPLE 3-7.1 OF DAMAGED CARPET (3-7)	NORTH CENTRAL LIBRARY FLOOR
8		64388		CARPET COMPARISON SAMPLE (3-8)	SOUTH WEST LIBRARY FLOOR
9		64389	H2C	LIQUID SAMPLE 3-1.1 (ONE VIAL)	RED PLASTIC WATER BOTTLE (3-1)
10		64390	H2C	LIQUID SAMPLE 3-6.1 (FOUR VIALS)	BROKEN GREEN MOUNTAIN DEW GLASS BOTTLE (3-6)
11		64391	124	TWO SWABS 3-5.1 OF INSIDE LIP	BROKEN GREEN GLASS BOTTLE NECK PIECE (3-5)

Signature of person from whom items were taken _____

Signature of person receiving items _____

(Sign and Print)

BAJDA, EWELINA 12060

STAR#

CHAIN OF CUSTODY

I hereby acknowledge receipt for Items No. 1-11 which are listed at the top of this form.

Inventory Officer: _____

BAJDA, EWELINA 12060

(Sign and Print/STAR#)

Date: 20 Dec 2013 / Time 1545

Received By: _____

(Sign and Print/STAR#)

Date: 12/30/13 / Time 1600

CT13-00044545

AC805 (Rev 03/09)

ACSO AHS Investigation

ACSO_0001362

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

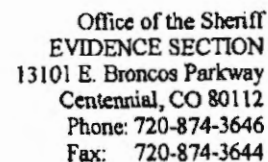
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Witness: _____

(Signature of Owner)



8 EVIDENCE

☐ FOUND PROPERTY

☐ SAFE KEEPING

13101 E BRONCOS PK PKWY the following items listed:

[illegible]

Signature of person receiving items  BAJDA, EWELINA 12060
(Sign and Print) STAR#

I hereby acknowledge receipt for Items No. 1-2 which are listed at the top of this form.

Date: 30 DEC 2013 / Time 1545

Date: 12/30/13 / Time 1600

ACSO 0001364

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

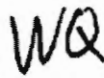
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Witness: _____



ACSO AHS Investigation ACSO 0001366

CR# _____

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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Witness: _____

(Signature of Owner)

CR# _____

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(Sign and Print / STAR# / Title / ID#)

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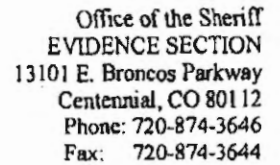
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Witness: _____

(Signature of Owner)



ACSO 0001370

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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(Sign and Print / STAR# / Title / ID#)

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(Sign and Print / STAR# / Title / ID#)

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Witness: _____

CR= _____

I hereby acknowledge receipt for Items No. _____ Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print STAR# Title ID#)

Date: _____ Time _____

Received By: _____
(Sign and Print STAR# Title ID#)

Date: _____ Time _____

Purpose the Item(s) were checked out opened: _____

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I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print STAR# Title ID#)

Date: _____ Time _____

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Date: _____ Time _____

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Released By: _____
(Sign and Print STAR# Title ID#)

Date: _____ Time _____

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Date: _____ Time _____

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Witness: _____

ACSO AHS Investigation ACSO_0001373

CR# _____

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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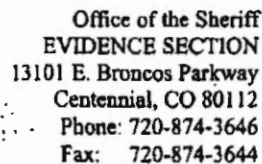
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Witness: _____

(Signature of Owner)



☐ **SAFE KEEPING**

ACSO AHS Investigation ACSO 0001376

CR# _____

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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Witness: _____

(Signature of Owner)

ACSO AHS Investigation ACSO_0001377

CR# _____

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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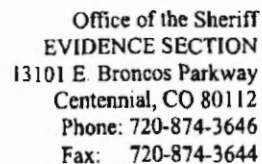
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Witness: _____

(Signature of Owner)



~~4~~ EVIDENCE

□ FOUND PROPERTY

☐ SAFE KEEPING

9195 E Mineral Ave. STE: 300 Centennial, CO 80112 the following items listed:

[illegible]

Kim Johnston

STAR#

CHAIN OF CUSTODY

(Sign and Print/STAR#)

Date: 01/22/14 / Time 16:15

(Sign and Print/STAR#)

Date: 1/23/14 / Time 0800

ACSO AHS Investigation ACSO 0001380

CR# _____

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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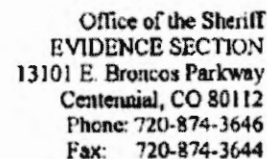
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Witness: _____

(Signature of Owner)

ACSO AHS Investigation ACSO_0001381



☐ **SAFE KEEPING**

the following items listed:

CHAIN OF CUSTODY

ACSO AHS Investigation ACSO 0001382

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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(Sign and Print / STAR# / Title / ID#)

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Witness: _____

(Signature of Owner)

ACSO AHS Investigation ACSO 0001384

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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Date: _____ / Time _____

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Witness: _____

(Signature of Owner)

CR# _____

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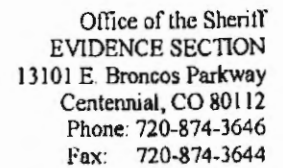
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Witness: _____

ACSO AHS Investigation ACSO_0001387



☐ SAFE KEEPING

13101 E BRNCOS PK _____ the following items listed:

ACSO 0001388

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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Witness: _____

(Signature of Owner)

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Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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(Sign and Print / STAR# / Title / ID#)

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Date: _____ / Time _____

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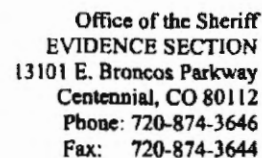
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Witness: _____

(Signature of Owner)



EVIDENCE

☐ **FOUND PROPERTY**

☐ SAFE KEEPING

(Tag # and Location for Official
Evidence Use Only)

Signature of person from whom items were taken N/A
Signature of person receiving items K McCauley 03077
(Sign and Print) STAR#

ACSO AHS Investigation ACSO 0001392

CR# _____

I hereby acknowledge receipt for Items No. / Tag No. : _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

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I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

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(Sign and Print / STAR# / Title / ID#)

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(Sign and Print / STAR# / Title / ID#)

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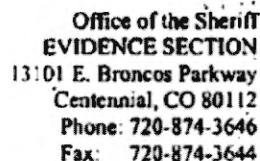
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Witness: _____

ACSO AHS Investigation ACSO_0001393



~~3~~ EVIDENCE

☐ FOUND PROPERTY

~~1~~ FELONY

□ SAFE KEEPING

13101 E Broncos Pkwy

the following items listed:

(Tag # and Location for Official
Evidence Use Only)

Signature of person from whom items were taken

Signature of person receiving items

(Sign and Print)

03077

STAR#

CHAIN OF CUSTODY

I hereby acknowledge receipt for Items No. 1 which are listed at the top of this form.

Inventory Officer:

(Sign and Print) **START**

03077

Date: 5/4/14

Time 1415

Received By:

(Sign and Print) STAR#

Date: 5/2/17

/ Time 1520

ACSO AHS Investigation ACSO 0001394

CR# _____

I hereby acknowledge receipt for Items No. / Tag No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

☐ The item(s) will not be returned to the Arapahoe County Sheriff's Office

☐ The item(s) will be returned to the Arapahoe County Sheriff's Office.

I hereby acknowledge receipt for Items No. _____ which are listed on the other side of this form.

Released By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Received By: _____
(Sign and Print / STAR# / Title / ID#)

Date: _____ / Time _____

Purpose the Item(s) were checked out / opened: _____

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BY RECEIVING THE ITEM(S) LISTED ON THIS FORM, THE RECEIVER AGREES TO SAFEGUARD THE ITEMS AND MAINTAIN CHAIN OF CUSTODY WHILE THE ITEM IS IN THEIR CONTROL & CUSTODY. UPON RETURNING THE ITEM(S) TO THE ARAPAHOE COUNTY SHERIFF'S OFFICE, THE ORIGINAL PACKAGING MUST BE INCLUDED WITH THE ITEM(S) AND THE ITEMS MUST BE PACKAGED AND RE-SUBMITTED IN ACCORDANCE WITH CURRENT STANDARDS OF THE ARAPAHOE COUNTY SHERIFF'S OFFICE.

I do not hold the Sheriff's Office responsible for any items which were reported missing that have not been recovered. I also waive my right to a complete inventory of all items recovered by the Sheriff's Office. The Arapahoe County Sheriff's Office does not warranty any items and by receiving the items, the receiver acknowledges that the Arapahoe County Sheriff's Office makes no representations of the items and shall be held harmless from any liability as to the items condition.

Witness: _____

(Signature of Owner)

ACSO AHS Investigation ACSO_0001395