

**PALM BEACH POLICE DEPARTMENT  
PROPERTY RECEIPT**

DETECTIVE BUREAU

PBPD Form #52

SEARCH WARRANT RETURN

P11 of 5

<input type="checkbox"/> PROPERTY	<input type="checkbox"/> FOUND	<input type="checkbox"/> DECEASED (Probated)	<input type="checkbox"/> PERSONAL	<input type="checkbox"/> CONFISCATED	<input type="checkbox"/> DESTROY
<input type="checkbox"/> EVIDENCE	<input type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	
INCIDENT/CITATION NUMBER <i>05-268</i>	DATE/TIME RECOVERED <i>10-20-2008</i>	PROPERTY NUMBER (Leave Blank) <i>091021</i>	BIN NUMBER (Leave Blank)		

ADDRESS WHERE PROPERTY IMPOUNDED  
*258 FL Bldg*

DISCOVERED BY / D.O.B.	ADDRESS <i>Street City Zip</i>	PHONE NUMBER
OWNER / VICTIM'S NAME / D.O.B.	ADDRESS <i>Street City Zip</i>	PHONE NUMBER
SUSPECT'S NAME / D.O.B. <i>Eastern Jeff 72033</i>	ADDRESS <i>358 FL Bldg</i>	PHONE NUMBER
ADDTNL. SUSPECT / D.O.B.	ADDRESS <i>Street City Zip</i>	PHONE NUMBER

SPECIAL INSTRUCTIONS

FOUND PROPERTY 90 DAYS CLAIM   
NOT CLAIM

ITEM #	QUANTITY	VALUE	DESCRIPTION
✓ 1	1		Phone
✓ 2	2		Phone messages
✓ 3	3		File folders (documents)
✓ 4	1		Shredded paper
✓ 5	1		Orange file folder
✓ 6	✓		Orange message
✓ 7	✓		Orange message table
✓ 8	1		Black Envelope
✓ 9	99		Pictures
✓ 10	8		Photos
✓ 11	2		Photos
✓ 12	2		Photos
<b>TOTAL PACKAGE WEIGHT</b>			

I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

I hereby acknowledge that the above list represents all property impounded by me in the official performance of my duty as a police officer.

UNIT *D2*

RECEIVED BY	REASON	DATE/TIME RECEIVED
<i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>

the officer by whom this warrant was executed, do swear that the above inventory contains a true and detailed account of all the property taken by me, under the authority of this warrant.

Sworn to and subscribed before me this *21* day of October 2008.

**PALM BEACH POLICE DEPARTMENT**  
**PROPERTY RECEIPT**  
 SEARCH WARRANT RETURN

PAGE 2016  
 DETECTIVE BUREAU

PBPD Form #52

<input type="checkbox"/> PROPERTY	<input type="checkbox"/> FOUND	<input type="checkbox"/> DECEASED (Probated)	<input type="checkbox"/> PERSONAL	<input type="checkbox"/> CONFISCATED	<input type="checkbox"/> DESTROY
<input type="checkbox"/> EVIDENCE	<input type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	
INCIDENT/CITATION NUMBER <i>05-398</i>	DATE/TIME RECOVERED <i>10/30/05</i>	PROPERTY NUMBER (Leave Blank) <i>05-1074</i>	BIN NUMBER (Leave Blank)		
ADDRESS WHERE PROPERTY IMPOUNDED <i>358 El Brillo</i>					
DISCOVERED BY / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
OWNER / VICTIM'S NAME / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
SUSPECT'S NAME / D.O.B. <i>04-20-13</i> <i>Fosterhoff</i>	ADDRESS	Street	City	Zip	PHONE NUMBER
ADD'TNL SUSPECT / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
SPECIAL INSTRUCTIONS				FOUND PROPERTY 90 DAYS	CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>

ITEM #	QUANTITY	VALUE	DESCRIPTION
✓ 13	2	✓	VHS tapes from desk
✓ 14	2	* ✗	CDs from desk
✓ 15	2		Prints framed from desk
✓ 16	1	✓	CD-ROM from desk
✓ 17	1	✓	message book (framed)
✓ 18	3	✓	CDs from desk
✓ 19	1	* ✗	DVD from desk
✓ 20			Prints from desk
✓ 21	2		Framed Photos from desk
✓ 22	2		Prints from desk
✓ 23	3		Scrap on Rupee INF
✓ 24	2		Tools in Brown box
✓ 25	2		Prints from desk
<b>TOTAL PACKAGE WEIGHT</b>			

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UNIT *D2*

RECEIVED BY	REASON	DATE/TIME RECEIVED

• To be viewed

**PALM BEACH POLICE DEPARTMENT**  
**PROPERTY RECEIPT**  
SEARCH WARRANT RETURN

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DETECTIVE BUREAU

PBPD Form #52

<input type="checkbox"/> PROPERTY	<input type="checkbox"/> FOUND	<input type="checkbox"/> DECEASED (Probated)	<input type="checkbox"/> PERSONAL	<input type="checkbox"/> CONFISCATED	<input type="checkbox"/> DESTROY
<input type="checkbox"/> EVIDENCE	<input type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	
INCIDENT/CITATION NUMBER <i>05-368</i>	DATE/TIME RECOVERED <i>10-20-05</i>	PROPERTY NUMBER (Leave Blank) <i>05-1024</i>	BIN NUMBER (Leave Blank)		
ADDRESS WHERE PROPERTY IMPOUNDED <i>258 EL Brillo</i>					
DISCOVERED BY / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
OWNER / VICTIM'S NAME / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
SUSPECT'S NAME / D.O.B. <i>Eastern Tuff</i>	ADDRESS <i>358 EL Brillo</i>	Street	City	Zip	PHONE NUMBER
ADD'L SUSPECT / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
SPECIAL INSTRUCTIONS				FOUND PROPERTY 90 DAYS	CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>

ITEM #	QUANTITY	VALUE	DESCRIPTION
27	1	NOV	Shaded project, [REDACTED] [REDACTED] DESK
28	1	NOV	Small [REDACTED] [REDACTED] [REDACTED]
29	3	NOV	Small [REDACTED] [REDACTED] [REDACTED]
30	6	NOV	Small [REDACTED] [REDACTED] [REDACTED]
31	1	NOV	Small [REDACTED] [REDACTED] [REDACTED]
32	1	NOV	TRAVEL/AGENCY AGREEMENT, [REDACTED] [REDACTED] (COPIED)
33	1	NOV	NOTE FROM [REDACTED] [REDACTED] [REDACTED]
34	113	11	CD'S from [REDACTED] office of [REDACTED]
35	6		ZIP CD'S from [REDACTED] RETURN
36	2		2 mag Video tapes from Bank case RETURN
37	4		Compact flash cards from Bank case RETURN
38	1		Small [REDACTED] from Bank case - RETURN TO [REDACTED]
39	3		ZIP CD'S from Bank case RETURN
40	30		CD'S from [REDACTED] (has 34-40 from [REDACTED] Easthouse)
TOTAL PACKAGE WEIGHT			

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SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

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[REDACTED] UNIT *D2*

RECEIVED BY	REASON	DATE/TIME RECEIVED

\* TO BE VIEWED

**PALM BEACH POLICE DEPARTMENT  
PROPERTY RECEIPT**

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**DETECTIVE BUREAU**

PBPD Form #52

SEARCH WARRANT RETURN

<input type="checkbox"/> PROPERTY	<input type="checkbox"/> FOUND	<input type="checkbox"/> DECEASED (Probated)	<input type="checkbox"/> PERSONAL	<input type="checkbox"/> CONFISCATED	<input type="checkbox"/> DESTROY
<input type="checkbox"/> EVIDENCE	<input type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	
INCIDENT/CITATION NUMBER <b>05-368</b>	DATE/TIME RECOVERED <b>10-20-05</b>	PROPERTY NUMBER (Leave Blank) <b>05-1034</b>	BIN NUMBER (Leave Blank)		
ADDRESS WHERE PROPERTY IMPOUNDED <b>258 El Brillo</b>					
DISCOVERED BY / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
OWNER'S NAME / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
SUSPECT'S NAME / D.O.B. <b>Epstein Jeff</b>	ADDRESS <b>358 El Brillo</b>	Street	City	Zip	PHONE NUMBER
ADD'L. SUSPECT / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
SPECIAL INSTRUCTIONS				FOUND PROPERTY 90 DAYS	CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>

ITEM #	QUANTITY	VALUE	DESCRIPTION
✓ 41	11		Floppy disks from desk middle shelf RETURN
✓ 42	1	*	ZIP 1.1 drive disk from guest room RETURN
✓ 43	1		Power Cord for CPU from guest room
✓ 44	1		CPU from guest Bedroom
✓ 45	10		8mm video Tapes in guest Bedroom RETURN
✓ 46	1		maxell CD-R in guest bedroom RETURN
✓ 47	10	*	Disks in clear Box RETURN (OTHER)
✓ 48	7		ZIP Disks from guest room RETURN
✓ 49	1		items # 35-48 from guest bedroom RETURN
✓ 50	1		message book from guest house office RETURN
✓ 51	2		compact flash cards from
✓ 52	6		CD'S RETURN #49-51 RETURN
✓ 53	1		CPU from guest house office RETURN
			<b>TOTAL PACKAGE WEIGHT</b>

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SIGNATURE _____	DATE _____
	[Redacted Signature] <b>DZ</b> UNIT _____

RECEIVED BY	REASON	DATE/TIME RECEIVED
	✓	

\* TO BE VERIFIED









### PALM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

CONTRIBUTOR'S COPY

BPPD Form #52

<input type="checkbox"/> PROPERTY		<input type="checkbox"/> FOUND	<input type="checkbox"/> DECEASED (Probated)	<input type="checkbox"/> PERSONAL	<input type="checkbox"/> CONFISCATED	<input type="checkbox"/> DESTROY
<input type="checkbox"/> EVIDENCE		<input type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	
INCIDENT/CITATION NUMBER		DATE/TIME RECOVERED	PROPERTY NUMBER (Leave Blank)	BIN NUMBER (Leave Blank)		
ADDRESS WHERE PROPERTY IMPOUNDED		345 B COUNTY ROAD				
DISCOVERED BY / D.O.B.		KIMBERLY / (10-21-05)				
OWNER'S NAME / D.O.B.		ADDRESS Street City Zip				
SUSPECTS NAME / D.O.B.		ADDRESS Street City Zip PHONE NUMBER				
ADDTNL. SUSPECT / D.O.B.		ADDRESS Street City Zip PHONE NUMBER				
SPECIAL INSTRUCTIONS						
<input type="checkbox"/> CLAIM <input type="checkbox"/> FOUND PROPERTY <input type="checkbox"/> NOT CLAIM 90 DAYS						
ITEM #	QUANTITY	VALUE	DESCRIPTION			
			MIX PHONE MESSAGES FROM TRASH (10-21-05)			
			TOTAL PACKAGE WEIGHT			
I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.						
SIGNATURE		DATE	SIGNATURE		UNIT	
					02	
RECEIVED BY		REASON		DATE/TIME RECEIVED		





# JULM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

DETECTIVE BUREAU

PBPD Form #52

<input type="checkbox"/> PROPERTY		<input type="checkbox"/> FOUND		<input type="checkbox"/> DECEASED (Probated)		<input type="checkbox"/> PERSONAL		<input type="checkbox"/> CONFISCATED		<input type="checkbox"/> DESTROY		
<input type="checkbox"/> EVIDENCE		<input type="checkbox"/> TRIAL		<input type="checkbox"/> LABORATORY		<input type="checkbox"/> STOLEN/RECOVERED		<input type="checkbox"/> OTHER				
INCIDENT/CITATION NUMBER <i>05-278</i>			DATE/TIME RECOVERED <i>9/14/15 10:15 AM</i>			PROPERTY NUMBER (Leave Blank) <i>05-278</i>			BIN NUMBER (Leave Blank)			
ADDRESS WHERE PROPERTY IMPOUNDED <i>3200 1/24- [redacted]</i>												
D [redacted]			ADDRESS			Street			City		Zip	
OWNER'S NAME / D.O.B.			ADDRESS			Street			City		Zip	
SUSPECT'S NAME / D.O.B.			ADDRESS			Street			City		Zip	
ADDTNL. SUSPECT / D.O.B.			ADDRESS			Street			City		Zip	
SPECIAL INSTRUCTIONS									FOUND PROPERTY		CLAIM <input type="checkbox"/>	
									90 DAYS		NOT CLAIM <input type="checkbox"/>	
ITEM #	QUANTITY	VALUE	DESCRIPTION									
1	1		A/x mail - [redacted]									
2	1		white paper - GUYTAINIE [redacted]									
3	1		MESSAGE - BEACH [redacted]									
4	1		white paper - [redacted]									
5	1		MONTGOMERY COUNTY MD - TANUSZ LAWACIAK									
			<b>TOTAL PACKAGE WEIGHT</b>									
I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.						[redacted]						
SIGNATURE _____												
DATE _____												
RECEIVED BY			REASON			DATE/TIME RECEIVED						
<i>AKS [redacted]</i>			<i>6</i>			<i>04-24-15 1:10 PM</i>						





**.LM BEACH POLICE DEPARTME.  
PROPERTY RECEIPT**

DETECTIVE BUREAU

PBPD Form #52

<input type="checkbox"/> PROPERTY	<input type="checkbox"/> FOUND	<input type="checkbox"/> DECEASED (Probated)	<input type="checkbox"/> PERSONAL	<input type="checkbox"/> CONFISCATED	<input type="checkbox"/> DESTROY
<input checked="" type="checkbox"/> EVIDENCE	<input type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	
INCIDENT/CITATION NUMBER <i>05-302</i>	DATE/TIME RECOVERED <i>04-02-05 1015</i>	PROPERTY NUMBER (Leave Blank) <i>15-381</i>	BIN NUMBER (Leave Blank) <i>128552</i>		
ADDRESS WHERE PROPERTY IMPOUNDED <i>3300 E. DIVISION ST. FT. LAUDERDALE, FL 33304</i>					
DISCOVERED BY / D.O.B. [REDACTED]	ADDRESS <i>Street</i>	<i>City</i>	<i>Zip</i>	PHONE NUMBER	
OWNER'S NAME / D.O.B.	ADDRESS <i>Street</i>	<i>City</i>	<i>Zip</i>	PHONE NUMBER	
SUSPECT'S NAME / D.O.B. <i>01-20-13</i>	ADDRESS <i>Street</i>	<i>City</i>	<i>Zip</i>	PHONE NUMBER	
ADD'L. SUSPECT / D.O.B.	ADDRESS <i>Street</i>	<i>City</i>	<i>Zip</i>	PHONE NUMBER	
SPECIAL INSTRUCTIONS <i>PAGE 1 OF 2</i>				FOUND PROPERTY 90 DAYS	CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>

ITEM #	QUANTITY	VALUE	DESCRIPTION
1	1		white paper - [REDACTED]
2	1		[REDACTED]
3	1		[REDACTED]
4	1		[REDACTED]
5	1		MESSAGE - [REDACTED] white
6	1		white paper - [REDACTED]
7	1		[REDACTED]
8	1		[REDACTED]
9	1		[REDACTED]
10	1		[REDACTED]
11	1		MESSAGE - [REDACTED]
12	1		[REDACTED]
13	1		white paper - [REDACTED]
14	1		MESSAGE - [REDACTED]
<b>TOTAL PACKAGE WEIGHT</b>			

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SIGNATURE _____	SIGNATURE [REDACTED]
DATE _____	DATE _____

RECEIVED BY	REASON	DATE/TIME RECEIVED





# LM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

DETECTIVE BUREAU

PBPD Form #52

<input type="checkbox"/> PROPERTY	<input type="checkbox"/> FOUND	<input type="checkbox"/> DECEASED (Probated)	<input type="checkbox"/> PERSONAL	<input type="checkbox"/> CONFISCATED	<input type="checkbox"/> DESTROY
<input checked="" type="checkbox"/> EVIDENCE	<input type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	
INCIDENT/CITATION NUMBER 15-367	DATE/TIME RECOVERED 04/12/05 0915	PROPERTY NUMBER (Leave Blank) 05-384	BIN NUMBER (Leave Blank) 128552		
ADDRESS WHERE PROPERTY IMPOUNDED 301 ...					
NAME	ADDRESS	Street	City	Zip	PHONE NUMBER
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
NAME	ADDRESS	Street	City	Zip	PHONE NUMBER
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
SUSPECT'S NAME / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
ADD'TNL. SUSPECT / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
SPECIAL INSTRUCTIONS				FOUND PROPERTY 90 DAYS	CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>

ITEM #	QUANTITY	VALUE	DESCRIPTION
1	1		MESSAGE FROM [REDACTED]
2	1		white paper - [REDACTED]
3	1		" " - [REDACTED] HAS A FRIEND
4	1		" " - [REDACTED] TO CONFIRM
5	1		MESSAGE FROM GEORGE DANSON
6	1		" " [REDACTED]
7	1		" " [REDACTED]
8	1		white paper - [REDACTED]
			TOTAL PACKAGE WEIGHT

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SIGNATURE	DATE	SIGNATURE	DATE/TIME RECEIVED
[REDACTED]		[REDACTED]	04-21-05 0700
RECEIVED BY	REASON		
[REDACTED]	[REDACTED]		

# LM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

DETECTIVE BUREAU

PBPD Form #52

<input type="checkbox"/> PROPERTY	<input type="checkbox"/> FOUND	<input type="checkbox"/> DECEASED (Probated)	<input type="checkbox"/> PERSONAL	<input type="checkbox"/> CONFISCATED	<input type="checkbox"/> DESTROY
<input checked="" type="checkbox"/> EVIDENCE	<input type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	
INCIDENT/CITATION NUMBER	DATE/TIME RECOVERED	PROPERTY NUMBER (Leave Blank)	BIN NUMBER (Leave Blank)		
	04/15/05 0915	15-286	128552		
ADDRESS WHERE PROPERTY IMPOUNDED					
DISCOVERED BY (D.O.B.)	ADDRESS	Street	City	Zip	PHONE NUMBER
[REDACTED]					
C	ADDRESS	Street	City	Zip	PHONE NUMBER
SUSPECT'S NAME / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
ADD'TNL. SUSPECT / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
SPECIAL INSTRUCTIONS				FOUND PROPERTY 90 DAYS	CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>

ITEM #	QUANTITY	VALUE	DESCRIPTION
1	1		Medical supplies
2	1		"727" letterhead
3	1		INDEX #422,000
4	1		AMAZON.COM [REDACTED]
5	1		nitro paper - Jem Inc
6	1		message from [REDACTED] 4/10/05
7	1		" " " Jem Inc 4/10/05
8	1		nit paper - [REDACTED]
9	1		" " - [REDACTED]
			<b>TOTAL PACKAGE WEIGHT</b>

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SIGNATURE	DATE
[REDACTED]	[REDACTED]
RECEIVED BY	REA
[REDACTED]	[REDACTED]









# LM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

CONTRIBUTOR'S COPY

PBPD Form #52

<input type="checkbox"/> PROPERTY	<input type="checkbox"/> FOUND	<input type="checkbox"/> DECEASED (Probated)	<input type="checkbox"/> PERSONAL	<input type="checkbox"/> CONFISCATED	<input type="checkbox"/> DESTROY
<input type="checkbox"/> EVIDENCE	<input type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	
INCIDENT/CITATION NUMBER	DATE/TIME RECOVERED	PROPERTY NUMBER (Leave Blank)	BIN NUMBER (Leave Blank)		
ADDRESS WHERE PROPERTY IMPOUNDED					
D [REDACTED]	ADDRESS	Street	City	Zip	PHONE NUMBER
OWNER'S NAME / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
SUSPECT'S NAME / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
ADD'L. SUSPECT / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
SPECIAL INSTRUCTIONS				FOUND PROPERTY 90 DAYS	CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>

ITEM #	QUANTITY	VALUE	DESCRIPTION
1	1		[REDACTED]
2	1		[REDACTED]
3	1		[REDACTED]
4	1		[REDACTED]
5	1		[REDACTED]
6	1		[REDACTED]
7	1		[REDACTED]
8	1		[REDACTED]
9	1		[REDACTED]
10	1		[REDACTED]
11	1		[REDACTED]
12	1		[REDACTED]
13	1		[REDACTED]
14	1		[REDACTED]
<b>TOTAL PACKAGE WEIGHT</b>			

I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.

I hereby acknowledge that I have received a copy of this receipt.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

RECEIVED BY	REASON	DATE/TIME RECEIVED











# LM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

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<input type="checkbox"/> PROPERTY	<input type="checkbox"/> FOUND	<input type="checkbox"/> DECEASED (Probated)	<input type="checkbox"/> PERSONAL	<input type="checkbox"/> CONFISCATED	<input type="checkbox"/> DESTROY
<input type="checkbox"/> EVIDENCE	<input type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	
INCIDENT/CITATION NUMBER <i>05-37</i>	DATE/TIME RECOVERED <i>04/21/05 9:15</i>	PROPERTY NUMBER (Leave Blank) <i>05-385</i>	BIN NUMBER (Leave Blank) <i>128552</i>		

ADDRESS WHERE PROPERTY IMPOUNDED

<b>OWNER'S NAME / D.O.B.</b> [REDACTED]	ADDRESS <i>Street City Zip</i>	PHONE NUMBER
<b>SUSPECT'S NAME / D.O.B.</b> <i>12/12/78</i>	ADDRESS <i>Street City Zip</i>	PHONE NUMBER
<b>ADDT'L. SUSPECT / D.O.B.</b>	ADDRESS <i>Street City Zip</i>	PHONE NUMBER

SPECIAL INSTRUCTIONS  
*04/21/05*

FOUND PROPERTY 90 DAYS CLAIM   
NOT CLAIM

ITEM #	QUANTITY	VALUE	DESCRIPTION
<i>1</i>	<i>1</i>		<i>white cap - [REDACTED]</i>
<i>2</i>	<i>1</i>		<i>" " [REDACTED]</i>
<i>3</i>	<i>1</i>		<i>" " [REDACTED] 2 little [REDACTED] on the boat</i>
<i>4</i>	<i>1</i>		<i>" " [REDACTED]</i>
<i>5</i>	<i>1</i>		<i>" " [REDACTED]</i>
<i>6</i>	<i>4</i>		
<b>TOTAL PACKAGE WEIGHT</b>			

I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

I hereby acknowledge that the above list represents all property impounded.

[REDACTED]

<b>RECEIVED BY</b> <i>788723</i>	<b>REASON</b> <i>AS</i>	<b>DATE/TIME</b> <i>04-21-05 07:06</i>







# PALM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

DETECTIVE BUREAU

PBPD Form #52

<input type="checkbox"/> PROPERTY		<input type="checkbox"/> FOUND		<input type="checkbox"/> DECEASED (Probated)		<input type="checkbox"/> PERSONAL		<input type="checkbox"/> CONFISCATED		<input type="checkbox"/> DESTROY					
<input type="checkbox"/> EVIDENCE		<input type="checkbox"/> TRIAL		<input type="checkbox"/> LABORATORY		<input type="checkbox"/> STOLEN/RECOVERED		<input type="checkbox"/> OTHER							
INCIDENT/CITATION NUMBER <b>05-368</b>			DATE/TIME RECOVERED <b>093005 940A</b>			PROPERTY NUMBER (Leave Blank) <b>5715</b>			BIN NUMBER (Leave Blank) <b>12</b>						
ADDRESS WHERE PROPERTY IMPOUNDED <b>345 S COUNTY ROAD PALM BEACH</b>															
DISCOVERED BY (D.O.B.) 			ADDRESS <b>PBPD</b>			Street			City			Zip			
OWNER'S NAME / D.O.B.			ADDRESS			Street			City			Zip			
SUSPECT'S NAME / D.O.B. <b>12053</b> <b>EPSON JEFFREY</b>			ADDRESS <b>385 FL BRILL RD</b>			Street			City			Zip			
ADD'L. SUSPECT / D.O.B.			ADDRESS			Street			City			Zip			
SPECIAL INSTRUCTIONS									FOUND PROPERTY 90 DAYS			CLAIM <input type="checkbox"/>		NOT CLAIM <input type="checkbox"/>	
ITEM #	QUANTITY	VALUE	DESCRIPTION												
1	1		Piece of PAPER WITH ANDREW STEWART'S NAME (TRASH 92005)												
			<b>TOTAL PACKAGE WEIGHT</b>												
I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.															
SIGNATURE						DATE									
RECEIVED BY			REASON			DATE/TIME RECEIVED									
<b>7-23-05</b>			<b>5</b>			<b>093005</b>									



**PALM BEACH POLICE DEPARTMENT  
PROPERTY RECEIPT**

*bc*  
DETECTIVE BUREAU

BPBD Form #52

<input type="checkbox"/> PROPERTY	<input type="checkbox"/> FOUND	<input type="checkbox"/> DECEASED (Probated)	<input type="checkbox"/> PERSONAL	<input type="checkbox"/> CONFISCATED	<input type="checkbox"/> DESTROY
<input checked="" type="checkbox"/> EVIDENCE	<input type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	
INCIDENT/CITATION NUMBER <i>09-368</i>	DATE/TIME RECOVERED <i>4-1-05</i>	PROPERTY NUMBER (Leave Blank) <i>09-205</i>	BIN NUMBER (Leave Blank) <i>127323</i>		

ADDRESS WHERE PROPERTY IMPOUNDED  
*345 So. County Rd, Palm Beach 1305*

	ADDRESS <i>Palm Beach Police</i>	City	Zip	PHONE NUMBER
	ADDRESS	City	Zip	PHONE NUMBER
SUSPECT'S NAME / D.O.B. <i>STEVEN TERRY</i>	ADDRESS <i>3459 Palms Palm Beach</i>	City	Zip	PHONE NUMBER
ADD'TNL. SUSPECT / D.O.B.	ADDRESS	City	Zip	PHONE NUMBER

SPECIAL INSTRUCTIONS

FOUND PROPERTY 90 DAYS CLAIM   
NOT CLAIM

ITEM #	QUANTITY	VALUE	DESCRIPTION
<i>7</i>	<i>7</i>		<i>MAXELL VHS TAPE OF SURVEILLANCE during April 2005 - <del>4/1/05 to 4/1/05</del> video A</i>
<i>2</i>	<i>1</i>		<i>2 VHS marked B</i>
<i>3</i>	<i>1</i>		<i>VHS 04-02-05</i>
<i>4</i>	<i>1</i>		<i>VHS 04-03-05</i>
<i>5</i>	<i>1</i>		<i>VHS 04-04-05</i>
<i>10</i>	<i>1</i>		<i>VHS 04-05-05</i>
<i>7</i>	<i>1</i>		<i>VHS 06-21/22-05 (broken)</i>
<b>TOTAL PACKAGE WEIGHT</b>			

I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

RECEIVED BY	REASON	DATE/TIME RECEIVED
<i>Y/S 8728</i>	<i>B</i>	<i>12-11-05 1:33:15</i>











# PALM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

DETECTIVE BUREAU

PBPD Form #52

<input type="checkbox"/> PROPERTY	<input type="checkbox"/> FOUND	<input type="checkbox"/> DECEASED (Probated)	<input type="checkbox"/> PERSONAL	<input type="checkbox"/> CONFISCATED	<input type="checkbox"/> DESTROY
<input type="checkbox"/> EVIDENCE	<input type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	2 VHS
INCIDENT/CITATION NUMBER 05368	DATE/TIME RECOVERED 110805 1521	PROPERTY NUMBER (Leave Blank) 05-1049	BIN NUMBER (Leave Blank) 119714		
ADDRESS WHERE PROPERTY IMPOUNDED 305 S COUNTY ROAD PB					
DISCOVERED BY [REDACTED]	ADDRESS PBPD	Street	City	Zip	PHONE NUMBER
OWNER'S NAME / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
SUSPECT'S NAME / D.O.B. EASTEN, JEFF	ADDRESS 558 EL BIRLE	Street	City	Zip	PHONE NUMBER
ADDTNL. SUSPECT / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
SPECIAL INSTRUCTIONS				FOUND PROPERTY 90 DAYS	CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>

ITEM #	QUANTITY	VALUE	DESCRIPTION
1	1		MAXELL VHS VIDEOCASSETTE STATEMENT [REDACTED]
2	1		MAXELL VHS VIDEOCASSETTE STATEMENT [REDACTED]
			<b>TOTAL PACKAGE WEIGHT</b>

I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

[REDACTED]

RECEIVED BY	REASON	DATE/TIME RECEIVED
[REDACTED]	[REDACTED]	11/9/05 17:15

# PALM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

DETECTIVE BUREAU

PBPD Form #52

<input type="checkbox"/> PROPERTY		<input type="checkbox"/> FOUND		<input type="checkbox"/> DECEASED (Probated)		<input type="checkbox"/> PERSONAL		<input type="checkbox"/> CONFISCATED		<input type="checkbox"/> DESTROY		
<input type="checkbox"/> EVIDENCE		<input type="checkbox"/> TRIAL		<input type="checkbox"/> LABORATORY		<input type="checkbox"/> STOLEN/RECOVERED		<input type="checkbox"/> OTHER				
INCIDENT/CITATION NUMBER <b>05-368</b>			DATE/TIME RECOVERED <b>110705 1240</b>			PROPERTY NUMBER (Leave Blank) <b>05-10611</b>			BIN NUMBER (Leave Blank) <b>15952</b>			
ADDRESS WHERE PROPERTY IMPOUNDED <b>345 S. COUNTY ROAD</b>												
DISCOVERED <b>DET [REDACTED]</b>		ADDRESS <b>DBPD</b>			Street		City		Zip		PHONE NUMBER	
OWNER'S NAME / D.O.B.		ADDRESS			Street		City		Zip		PHONE NUMBER	
SUSPECT'S NAME / D.O.B. <b>ERSTEIN JEFF 12055</b>		ADDRESS <b>258 EL BUELLO</b>			Street		City <b>PB</b>		Zip <b>33430</b>		PHONE NUMBER	
ADDT'L. SUSPECT / D.O.B.		ADDRESS			Street		City		Zip		PHONE NUMBER	
SPECIAL INSTRUCTIONS									FOUND PROPERTY 90 DAYS		CLAIM <input type="checkbox"/>	NOT CLAIM <input type="checkbox"/>
ITEM #	QUANTITY	VALUE	DESCRIPTION									
<b>1</b>	<b>1</b>		<b>SONY MICROCASSETTE NR-90</b>									
			<b>STATEMENT [REDACTED]</b>									
<b>2</b>	<b>3</b>		<b>EMAIL FROM County of Honolulu Div. of MOTOR VEHICLES/DRIVERS LICENSE</b>									
			<b>TOTAL PACKAGE WEIGHT</b>									
I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.												
SIGNATURE						DATE						
RECEIVED BY <b>A/B 237A</b>			REASON <b>[REDACTED]</b>			DATE/TIME RECEIVED <b>110705 1500H</b>						

**PALM BEACH POLICE DEPARTMENT  
PROPERTY RECEIPT**

EVIDENCE CUSTODIAN  
022669

PBPD Form #52

<input type="checkbox"/> PROPERTY	<input type="checkbox"/> FOUND	<input type="checkbox"/> DECEASED (Probated)	<input type="checkbox"/> PERSONAL	<input type="checkbox"/> CONFISCATED	<input type="checkbox"/> DESTROY
<input checked="" type="checkbox"/> EVIDENCE	<input checked="" type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	
INCIDENT/CITATION NUMBER <b>05368</b>	DATE/TIME RECOVERED <b>033005 4:00PM</b>	PROPERTY NUMBER (Leave Blank) <b>05-294</b>	BIN NUMBER (Leave Blank) <b>128137</b>		
ADDRESS WHERE PROPERTY IMPOUNDED <b>4200 AUSTRALIAN AVE. WPB FL (HIGHRIDGE FAMILY CENTER)</b>					
ADDRESS Street City Zip			PHONE NUMBER		
ADDRESS Street City Zip			PHONE NUMBER		
ADDRESS Street City Zip			PHONE NUMBER		
ADDRESS Street City Zip			PHONE NUMBER		
SPECIAL INSTRUCTIONS				FOUND PROPERTY	CLAIM <input type="checkbox"/>
				90 DAYS	NOT CLAIM <input type="checkbox"/>

ITEM #	QUANTITY	VALUE	DESCRIPTION
1	1		AUDIO TAPE "MAXELL" CONTROL CALL #2 S-H
2	1		MICRO TAPE- [REDACTED]
<p><i>* Note # 2 is blank</i></p>			
<b>TOTAL PACKAGE WEIGHT</b>			

I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

RECEIVED BY	REASON	DATE/TIME RECEIVED
[REDACTED]	Invest	03-31-05 0700
[REDACTED]	Return Evidence Rm.	08-08-05 1000
[REDACTED]	for filing	8-16-05 1530
[REDACTED]	for filing	09-20-05 1445
[REDACTED]	Copy for Sgt [REDACTED]	9-30-05 2:15PM



# PALM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

DETECTIVE BUREAU

PBPD Form #52

<input type="checkbox"/> PROPERTY		<input type="checkbox"/> FOUND		<input type="checkbox"/> DECEASED (Probated)		<input type="checkbox"/> PERSONAL		<input type="checkbox"/> CONFISCATED		<input type="checkbox"/> DESTROY			
<input checked="" type="checkbox"/> EVIDENCE		<input type="checkbox"/> TRIAL		<input type="checkbox"/> LABORATORY		<input type="checkbox"/> STOLEN/RECOVERED		<input type="checkbox"/> OTHER					
INCIDENT/CITATION NUMBER <i>05-308</i>			DATE/TIME RECOVERED <i>10/25/17 03</i>			PROPERTY NUMBER (Leave Blank)			BIN NUMBER (Leave Blank)				
ADDRESS WHERE PROPERTY IMPOUNDED <i>345 COUNTY ROAD PALM BEACH</i>													
DISCOVERED BY <i>[REDACTED]</i>		ADDRESS <i>[REDACTED]</i>			Street		City		Zip		PHONE NUMBER		
OWNER'S NAME / D.O.B.		ADDRESS			Street		City		Zip		PHONE NUMBER		
SUSPECT'S NAME / D.O.B.		ADDRESS			Street		City		Zip		PHONE NUMBER		
ADD'TNL. SUSPECT / D.O.B.		ADDRESS			Street		City		Zip		PHONE NUMBER		
SPECIAL INSTRUCTIONS <i>PLEASE COPY</i>									FOUND PROPERTY 90 DAYS			CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>	
ITEM #	QUANTITY	VALUE	DESCRIPTION										
<i>1</i>	<i>1</i>		<i>Small miscellaneous - [REDACTED]</i>										
<i>2</i>	<i>1</i>		<i>Small miscellaneous - [REDACTED]</i>										
			<b>TOTAL PACKAGE WEIGHT</b>										
I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.						<i>[REDACTED]</i>							
SIGNATURE			DATE										
RECEIVED BY			REAS										





# PALM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

DETECTIVE BUREAU

PBPD Form #52

<input type="checkbox"/> PROPERTY	<input type="checkbox"/> FOUND	<input type="checkbox"/> DECEASED (Probated)	<input type="checkbox"/> PERSONAL	<input type="checkbox"/> CONFISCATED	<input type="checkbox"/> DESTROY
<input checked="" type="checkbox"/> EVIDENCE	<input type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	
INCIDENT/CITATION NUMBER <b>05-368</b>	DATE/TIME RECOVERED <b>10-30-05 2100</b>	PROPERTY NUMBER (Leave Blank) <b>115-929</b>	BIN NUMBER (Leave Blank) <b>127719</b>		
ADDRESS WHERE PROPERTY IMPOUNDED <b>345 S. COCONUT ROAD PALM BEACH</b>					
DISCOVERED BY <b>DET [REDACTED]</b>	ADDRESS <b>PB PD</b>			PHONE NUMBER	
OWNER'S NAME <b>[REDACTED]</b>	ADDRESS <b>[REDACTED]</b>			PHONE NUMBER	
SUSPECT'S NAME / D.O.B. <b>ROBERT J. JAK [REDACTED]</b>	ADDRESS <b>358 EL BIRALO PB</b>			PHONE NUMBER	
ADDT'L. SUSPECT / D.O.B.	ADDRESS			PHONE NUMBER	
SPECIAL INSTRUCTIONS <b>PLEASE COPY</b>				FOUND PROPERTY 90 DAYS	CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>

ITEM #	QUANTITY	VALUE	DESCRIPTION
1	1		MAXELL VHS T160 CASSETTE [REDACTED]
2	1		SONY MICROCASSETTES (STATEMENT [REDACTED])
3	1		SONY MICROCASSETTE [REDACTED] to station
4	1		SONY MICROCASSETTE [REDACTED]
TOTAL PACKAGE WEIGHT			<b>1</b>

I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

RECEIVED BY	REASON	DATE/TIME RECEIVED
<b>[REDACTED]</b>	<b>[REDACTED]</b>	<b>10-30-05 6:30P</b>







# PALM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

DETECTIVE BUREAU

PBPD Form #52

<input type="checkbox"/> PROPERTY		<input type="checkbox"/> FOUND		<input type="checkbox"/> DECEASED (Probated)		<input type="checkbox"/> PERSONAL		<input type="checkbox"/> CONFISCATED		<input type="checkbox"/> DESTROY			
<input checked="" type="checkbox"/> EVIDENCE		<input checked="" type="checkbox"/> TRIAL		<input type="checkbox"/> LABORATORY		<input type="checkbox"/> STOLEN/RECOVERED		<input type="checkbox"/> OTHER					
INCIDENT/CITATION NUMBER 05-368			DATE/TIME RECOVERED 111005 1005			PROPERTY NUMBER (Leave Blank) 05-1079			BIN NUMBER (Leave Blank) #2 128521				
ADDRESS WHERE PROPERTY IMPOUNDED 305 S COUNTY ROAD PB													
DISCOVERED BY / D.O.B. DET [REDACTED]		ADDRESS Street City Zip				PHONE NUMBER							
OWNER'S NAME / D.O.B.		ADDRESS Street City Zip				PHONE NUMBER							
SUSPECT'S NAME / D.O.B. EUSTON, Jeff -2055		ADDRESS 358 El Brillo PB				PHONE NUMBER							
ADDT'L. SUSPECT / D.O.B.		ADDRESS Street City Zip				PHONE NUMBER							
SPECIAL INSTRUCTIONS PLEASE DOWNLOAD AND RETURN									FOUND PROPERTY 90 DAYS			CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>	

ITEM #	QUANTITY	VALUE	DESCRIPTION
1	1		PANASONIC RR-US360 DIGITAL RECORDER ASSIGNED TO DET [REDACTED]
			STATEMENT A - [REDACTED] W/M [REDACTED]
			FOLDER 2 - DET [REDACTED] PROVIDING DATE AND TIME OF CALL
			FOLDER 3 - [REDACTED] W/M [REDACTED]
2	1		CD - (copy of recordings from #1)
<b>TOTAL PACKAGE WEIGHT</b>			

I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.

I hereby acknowledge that the above list represents all property impounded by [REDACTED]

SIGNATURE	DATE	REASON	DATE/TIME RECEIVED
AKS 338	6/	6/	11-10-05 1300hr



# PALM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

PBPD Form #52

DETECTIVE BUREAU

<input type="checkbox"/> PROPERTY	<input type="checkbox"/> FOUND	<input type="checkbox"/> DECEASED (Probated)	<input type="checkbox"/> PERSONAL	<input type="checkbox"/> CONFISCATED	<input type="checkbox"/> DESTROY
<input checked="" type="checkbox"/> EVIDENCE	<input checked="" type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	
INCIDENT/CITATION NUMBER <b>05268</b>	DATE/TIME RECOVERED <b>111505 1830</b>	PROPERTY NUMBER (Leave Blank) <b>05-1092</b>	BIN NUMBER (Leave Blank) <b>129542</b>		
ADDRESS WHERE PROPERTY IMPOUNDED <b>345 S COUNTY ROAD PALM BEACH</b>					
DISCOVERED BY <b>DET [REDACTED]</b>	ADDRESS <b>PBPD Street City Zip</b>			PHONE NUMBER	
OWNER'S NAME / D.O.B.	ADDRESS <i>Street City Zip</i>			PHONE NUMBER	
SUSPECT'S NAME / D.O.B. <b>EPSTEIN, JEFF 1-0-33</b>	ADDRESS <b>358 FL BELL</b> <i>Street City Zip</i>			PHONE NUMBER	
ADD'L. SUSPECT / D.O.B.	ADDRESS <i>Street City Zip</i>			PHONE NUMBER	
SPECIAL INSTRUCTIONS				FOUND PROPERTY 90 DAYS	CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>

ITEM #	QUANTITY	VALUE	DESCRIPTION
1	1		SONY MICROCASSETTE STATEMENT [REDACTED] [REDACTED] W/F [REDACTED]
2	1		PHOTO LINE UP ([REDACTED])
<b>TOTAL PACKAGE WEIGHT</b>			

I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

RECEIVED BY	REASON	DATE/TIME RECEIVED
<b>AD 5338</b>	<b>5</b>	<b>11-16-05 1730</b>

# PALM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

PBPD Form #52

DETECTIVE BUREAU

<input checked="" type="checkbox"/> PROPERTY	<input type="checkbox"/> FOUND	<input type="checkbox"/> DECEASED (Probated)	<input type="checkbox"/> PERSONAL	<input type="checkbox"/> CONFISCATED	<input type="checkbox"/> DESTROY
<input checked="" type="checkbox"/> EVIDENCE	<input type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	
INCIDENT/CITATION NUMBER <b>05-368</b>	DATE/TIME RECOVERED <b>100605 5:12</b>	PROPERTY NUMBER (Leave Blank) <b>05-145</b>	BIN NUMBER (Leave Blank) <b>128411</b>		
ADDRESS WHERE PROPERTY IMPOUNDED <b>243 S COUNTY ROAD PALM BEACH</b>					
DISCOVERED BY <b>[REDACTED]</b>	ADDRESS	Street	City	Zip	PHONE NUMBER
OWNER'S NAME / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
SUSPECT'S NAME / D.O.B. <b>ERSTEN JEFF</b>	ADDRESS	Street	City	Zip	PHONE NUMBER
ADD'TNL. SUSPECT / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
SPECIAL INSTRUCTIONS				FOUND PROPERTY 90 DAYS	CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>

ITEM #	QUANTITY	VALUE	DESCRIPTION
1	21		SONY MICROCASSETTES (STATEMENT DOB [REDACTED])
2	1		[REDACTED]
			<b>TOTAL PACKAGE WEIGHT</b>

I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**[REDACTED]**

RECEIVED BY	REASON	DATE/TIME RECEIVED
<b>[REDACTED]</b>	<b>[REDACTED]</b>	<b>[REDACTED]</b>







# LM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

CONTRIBUTOR'S COPY

PBPD Form #52

<input type="checkbox"/> PROPERTY		<input type="checkbox"/> FOUND		<input type="checkbox"/> DECEASED (Probated)		<input type="checkbox"/> PERSONAL		<input type="checkbox"/> CONFISCATED		<input type="checkbox"/> DESTROY			
<input type="checkbox"/> EVIDENCE		<input type="checkbox"/> TRIAL		<input type="checkbox"/> LABORATORY		<input type="checkbox"/> STOLEN/RECOVERED		<input type="checkbox"/> OTHER					
INCIDENT/CITATION NUMBER			DATE/TIME RECOVERED			PROPERTY NUMBER (Leave Blank)			BIN NUMBER (Leave Blank)				
ADDRESS WHERE PROPERTY IMPOUNDED													
DISCOVERED BY / D.O.B.		ADDRESS				Street		City		Zip		PHONE NUMBER	
OWNER'S NAME / D.O.B.		ADDRESS				Street		City		Zip		PHONE NUMBER	
SUSPECT'S NAME / D.O.B.		ADDRESS				Street		City		Zip		PHONE NUMBER	
ADD'TNL. SUSPECT / D.O.B.		ADDRESS				Street		City		Zip		PHONE NUMBER	
SPECIAL INSTRUCTIONS									FOUND PROPERTY		CLAIM <input type="checkbox"/>		
									90 DAYS		NOT CLAIM <input type="checkbox"/>		
ITEM #	QUANTITY	VALUE	DESCRIPTION										
1	1		[REDACTED]										
2	1		[REDACTED]										
3	1		[REDACTED]										
4	1		[REDACTED]										
5	1		[REDACTED]										
6	4		[REDACTED]										
			<b>TOTAL PACKAGE WEIGHT</b>										
I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.						[REDACTED]							
SIGNATURE				DATE		SIGNATURE				ID#		UNIT	
RECEIVED BY			REASON				DATE/TIME RECEIVED						
[REDACTED]			[REDACTED]				[REDACTED]						



















# PALM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

CONTRIBUTOR'S COPY

PBPD Form #52

<input type="checkbox"/> PROPERTY		<input type="checkbox"/> FOUND		<input type="checkbox"/> DECEASED (Probated)		<input type="checkbox"/> PERSONAL		<input type="checkbox"/> CONFISCATED		<input type="checkbox"/> DESTROY	
<input type="checkbox"/> EVIDENCE		<input type="checkbox"/> TRIAL		<input type="checkbox"/> LABORATORY		<input type="checkbox"/> STOLEN/RECOVERED		<input type="checkbox"/> OTHER			
INCIDENT/CITATION NUMBER <i>13-2168</i>			DATE/TIME RECOVERED <i>10-14-15/1928</i>			PROPERTY NUMBER (Leave Blank) <i>15-743</i>			BIN NUMBER (Leave Blank) <i>12-1512</i>		
ADDRESS WHERE PROPERTY IMPOUNDED <i>2292 E. Prillway Palm Beach, FL 33450</i>											
DISCOVERED BY <i>[Redacted]</i>		ADDRESS <i>Street City Zip</i>			PHONE NUMBER						
OWNER'S NAME / D.O.B.		ADDRESS <i>Street City Zip</i>			PHONE NUMBER						
SUSPECT'S NAME / D.O.B. <i>11/30/73</i> <i>Artem Jeffrey</i>		ADDRESS <i>2292 E Prillway Palm Beach</i>			PHONE NUMBER						
ADD'L. SUSPECT / D.O.B.		ADDRESS <i>Street City Zip</i>			PHONE NUMBER						
SPECIAL INSTRUCTIONS								FOUND PROPERTY		CLAIM <input type="checkbox"/>	
								90 DAYS		NOT CLAIM <input type="checkbox"/>	
ITEM #	QUANTITY	VALUE	DESCRIPTION								
<i>1</i>			<i>MAKING PIECES OF PAPERS / DOCUMENTATION REMOVED FROM TRUCK AT 2292 E Prillway</i>								
			<b>TOTAL PACKAGE WEIGHT</b>								
I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.								[Redacted Signature]			
SIGNATURE				DATE							
RECEIVED BY			REASON			DATE/TIME RECEIVED					
<i>[Signature]</i>			<i>[Reason]</i>			<i>10-14-15 1928</i>					



# PALM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

CONTRIBUTOR'S COPY

FBPD Form #52

<input type="checkbox"/> PROPERTY	<input type="checkbox"/> FOUND	<input type="checkbox"/> DECEASED (Probated)	<input type="checkbox"/> PERSONAL	<input type="checkbox"/> CONFISCATED	<input type="checkbox"/> DESTROY
<input checked="" type="checkbox"/> EVIDENCE	<input checked="" type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	
INCIDENT/CITATION NUMBER <i>05-368</i>	DATE/TIME RECOVERED <i>4-1-05</i>	PROPERTY NUMBER (Leave Blank) <i>15125</i>	BIN NUMBER (Leave Blank) <i>1003</i>		
ADDRESS WHERE PROPERTY IMPOUNDED <i>745 So. County Rd, Palm Beach</i>					
DISCOVERED BY / D.O.B. <i>PC [REDACTED]</i>	ADDRESS <i>Palm Beach Police</i>	Street	City	Zip	PHONE NUMBER
OWNER'S NAME	ADDRESS	Street	City	Zip	PHONE NUMBER
SUSPECT'S NAME / D.O.B. <i>SISTEN, TERRY</i>	ADDRESS <i>3049 Fr. No. Palm Beach</i>	Street	City	Zip	PHONE NUMBER
ADD'L. SUSPECT / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
SPECIAL INSTRUCTIONS				FOUND PROPERTY 90 DAYS	CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>

ITEM #	QUANTITY	VALUE	DESCRIPTION
<i>1</i>	<i>1</i>		<i>MAXELL VHS TAPE OF SURVEILLANCE CHASING</i>
	<i>1</i>		<i>April 2005 - <del>XXXXXXXXXX</del></i>
<i>2</i>	<i>1</i>		<i>VHS TAPE B</i>
<i>3</i>	<i>1</i>		<i>VHS TAPE</i>
<i>4</i>	<i>1</i>		<i>VHS 04-07-05</i>
<i>5</i>	<i>1</i>		<i>VHS 04-07-05</i>
<i>6</i>	<i>1</i>		<i>VHS 04-05-05</i>
<i>7</i>	<i>1</i>		<i>VHS 06-21/05-05</i>
<b>TOTAL PACKAGE WEIGHT</b>			

I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

RECEIVED BY	REASON	DATE/TIME RECEIVED
<i>YIKR721</i>	<i>K</i>	<i>12-</i>



# PALM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

CONTRIBUTOR'S COPY

PBPD Form #52

<input type="checkbox"/> PROPERTY	<input type="checkbox"/> FOUND	<input type="checkbox"/> DECEASED (Probated)	<input type="checkbox"/> PERSONAL	<input type="checkbox"/> CONFISCATED	<input type="checkbox"/> DESTROY
<input type="checkbox"/> EVIDENCE	<input type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	
INCIDENT/CITATION NUMBER <i>09 268</i>	DATE/TIME RECOVERED <i>11/04/10 1005</i>	PROPERTY NUMBER (Leave Blank)	BIN NUMBER (Leave Blank)		
ADDRESS WHERE PROPERTY IMPOUNDED <i>2015 15th Court Palm Beach P.B.</i>					
DISCOVERED BY <i>DET [REDACTED]</i>	ADDRESS	Street	City	Zip	PHONE NUMBER
OWNER'S NAME / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
SUSPECT'S NAME / D.O.B. <i>FRANKIE [REDACTED]</i>	ADDRESS	Street	City	Zip	PHONE NUMBER
ADDT'L. SUSPECT / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
SPECIAL INSTRUCTIONS <i>PLEASE RETURN TO [REDACTED]</i>				FOUND PROPERTY 90 DAYS	CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>

ITEM #	QUANTITY	VALUE	DESCRIPTION
<i>1</i>	<i>1</i>		<i>PANASONIC RR US 360</i>
			<i>DIGITAL MICROPHONE M-1000</i>
			<i>10 [REDACTED]</i>
			<i>STATEMENT 1 - ALBERTO VERGARA</i>
			<i>WIN [REDACTED]</i>
			<i>PHONE 2 - [REDACTED]</i>
			<i>RECORDING DATE AND TIME OF CALL</i>
			<i>PHONE 3 - [REDACTED]</i>
<i>2</i>			<i>[REDACTED]</i>
<b>TOTAL PACKAGE WEIGHT</b>			

I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

RECEIVED BY	REASON	DATE/TIME RECEIVED
<i>[REDACTED]</i>	<i>[REDACTED]</i>	<i>[REDACTED]</i>



# PALM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

CONTRIBUTOR'S COPY

PBPD Form #52

<input type="checkbox"/> PROPERTY		<input type="checkbox"/> FOUND		<input type="checkbox"/> DECEASED (Probated)		<input type="checkbox"/> PERSONAL		<input type="checkbox"/> CONFISCATED		<input type="checkbox"/> DESTROY		
<input checked="" type="checkbox"/> EVIDENCE		<input type="checkbox"/> TRIAL		<input type="checkbox"/> LABORATORY		<input type="checkbox"/> STOLEN/RECOVERED		<input type="checkbox"/> OTHER				
INCIDENT/CITATION NUMBER <i>05268</i>			DATE/TIME RECOVERED <i>11/15/05 15:30</i>			PROPERTY NUMBER (Leave Blank) <i>2</i>			BIN NUMBER (Leave Blank)			
ADDRESS WHERE PROPERTY IMPOUNDED <i>202 S COUNTY ROAD 111 W PALM BEACH</i>												
DISCOVERED BY / D.O.B. <i>DET [REDACTED]</i>			ADDRESS <i>1070</i>			Street		City		Zip		PHONE NUMBER
OWNER'S NAME / D.O.B.			ADDRESS			Street		City		Zip		PHONE NUMBER
SUSPECT'S NAME / D.O.B. <i>LESTER, JEFF</i>			ADDRESS <i>323 S W PALM BLVD</i>			Street		City		Zip		PHONE NUMBER
ADD'TNL. SUSPECT / D.O.B.			ADDRESS			Street		City		Zip		PHONE NUMBER
SPECIAL INSTRUCTIONS									FOUND PROPERTY 90 DAYS		CLAIM <input type="checkbox"/>	
											NOT CLAIM <input type="checkbox"/>	
ITEM #	QUANTITY	VALUE	DESCRIPTION									
<i>1</i>	<i>1</i>		<i>SONY MICROCAMERA [REDACTED]</i>									
			<i>[REDACTED] w/ [REDACTED]</i>									
<i>2</i>	<i>1</i>		<i>PHOTO LINE CO [REDACTED]</i>									
			<b>TOTAL PACKAGE WEIGHT</b>									
I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.						[REDACTED]						
SIGNATURE			DATE									
RECEIVED BY			REASON			DATE/TIME RECEIVED						









# PALM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

CONTRIBUTOR'S COPY

PBPD Form #52

<input type="checkbox"/> PROPERTY	<input type="checkbox"/> FOUND	<input type="checkbox"/> DECEASED (Probated)	<input type="checkbox"/> PERSONAL	<input type="checkbox"/> CONFISCATED	<input type="checkbox"/> DESTROY
<input type="checkbox"/> EVIDENCE	<input type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	
INCIDENT/CITATION NUMBER <i>09 368</i>	DATE/TIME RECOVERED <i>11/02/05 11:21</i>	PROPERTY NUMBER (Leave Blank)	BIN NUMBER (Leave Blank) <i>214</i>		
ADDRESS WHERE PROPERTY IMPOUNDED <i>24 COUNTY ROAD 100</i>					
DISCOVERED <i>[REDACTED]</i>	ADDRESS	Street	City	Zip	PHONE NUMBER
OWNER'S NAME / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
SUSPECT'S NAME / D.O.B. <i>FRANKIE</i>	ADDRESS	Street	City	Zip	PHONE NUMBER
ADD'TNL. SUSPECT / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
SPECIAL INSTRUCTIONS				FOUND PROPERTY 90 DAYS	CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>

ITEM #	QUANTITY	VALUE	DESCRIPTION
<i>1</i>	<i>1</i>		<i>WHEEL VHS VIDEO CASSETTE</i>
			<i>[REDACTED] [REDACTED] w/e</i>
<i>2</i>	<i>1</i>		<i>WHEEL VHS VIDEO CASSETTE</i>
			<i>[REDACTED] [REDACTED] w/e</i>
			<b>TOTAL PACKAGE WEIGHT</b>

I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

[REDACTED] impounded  
UNIT *D2*

RECEIVED BY	REASON	DATE/TIME RECEIVED

# PALM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

CONTRIBUTOR'S COPY

PBPD Form #52

<input type="checkbox"/> PROPERTY	<input type="checkbox"/> FOUND	<input type="checkbox"/> DECEASED (Probated)	<input type="checkbox"/> PERSONAL	<input type="checkbox"/> CONFISCATED	<input type="checkbox"/> DESTROY
<input checked="" type="checkbox"/> EVIDENCE	<input type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	
INCIDENT/CITATION NUMBER <i>05-368</i>	DATE/TIME RECOVERED <i>110705 1240</i>	PROPERTY NUMBER (Leave Blank)	BIN NUMBER (Leave Blank)		
ADDRESS WHERE PROPERTY IMPOUNDED <i>245 S COUNTY ROAD</i>					
DISCOVERED BY (D.O.B.) <i>[REDACTED]</i>	ADDRESS	Street	City	Zip	PHONE NUMBER
OWNER'S NAME / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
SUSPECT'S NAME / D.O.B. <i>[REDACTED]</i>	ADDRESS	Street	City	Zip	PHONE NUMBER
ADD'T'L. SUSPECT / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
SPECIAL INSTRUCTIONS					FOUND PROPERTY 90 DAYS CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>

ITEM #	QUANTITY	VALUE	DESCRIPTION
<i>1</i>	<i>1</i>		<i>ONE MICROPROCESSOR PC-90</i>
			<i>[REDACTED]</i>
<i>2</i>	<i>3</i>		<i>TWO FROM COUNTY OF HIGHLAND DIV OF</i>
			<i>MOBILE VEHICLES/DRIVERS LICENSE</i>
			<b>TOTAL PACKAGE WEIGHT</b>

I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.

SIGNATURE		DATE	<i>[REDACTED]</i>
RECEIVED BY	REASON	DATE/TIME RECEIVED	





















# PALM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

DETECTIVE BUREAU

PBPD Form #52

<input type="checkbox"/> PROPERTY		<input type="checkbox"/> FOUND		<input type="checkbox"/> DECEASED (Probated)		<input type="checkbox"/> PERSONAL		<input type="checkbox"/> CONFISCATED		<input type="checkbox"/> DESTROY	
<input checked="" type="checkbox"/> EVIDENCE		<input type="checkbox"/> TRIAL		<input type="checkbox"/> LABORATORY		<input type="checkbox"/> STOLEN/RECOVERED		<input type="checkbox"/> OTHER		# 1285	
INCIDENT/CITATION NUMBER <i>05-368</i>			DATE/TIME RECOVERED <i>10-20-05 9:37AM</i>			PROPERTY NUMBER (Leave Blank) <i>LS-1080</i>			BIN NUMBER (Leave Blank) <i>128141-1</i>		
ADDRESS WHERE PROPERTY IMPOUNDED <i>358 AL 7th St</i>											
OWNER'S NAME / D.O.B.			ADDRESS <i>[Redacted]</i>			Street City Zip			PHONE NUMBER		
SUSPECT'S NAME / D.O.B.			ADDRESS <i>[Redacted]</i>			Street City Zip			PHONE NUMBER		
ADD'TNL SUSPECT / D.O.B.			ADDRESS <i>[Redacted]</i>			Street City Zip			PHONE NUMBER		
SPECIAL INSTRUCTIONS <i>#2...</i>									FOUND PROPERTY 90 DAYS		CLAIM <input type="checkbox"/>
											NOT CLAIM <input type="checkbox"/>
ITEM #	QUANTITY	VALUE	DESCRIPTION								
<i>1</i>	<i>1</i>	<i>UV</i>	<i>...</i>								
<i>2</i>	<i>1</i>	<i>UV</i>	<i>...</i>								
<i>3</i>	<i>1</i>		<i>...</i>								
			<b>TOTAL PACKAGE WEIGHT</b>								
I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.						[Redacted Signature]					
SIGNATURE						DATE					
RECEIVED BY <i>[Signature]</i>			REASON <i>[Signature]</i>			DATE/TIME RECEIVED <i>11-16-05 14:00</i>					

EFTA\_00016846

EFTA00167284







PROPERTY RECEIPT

DETECTIVE BUREAU

PBPD Form #52

<input type="checkbox"/> PROPERTY	<input type="checkbox"/> FOUND	<input type="checkbox"/> DECEASED (Probated)	<input type="checkbox"/> PERSONAL	<input type="checkbox"/> CONFISCATED	<input type="checkbox"/> DESTROY
<input checked="" type="checkbox"/> EVIDENCE	<input type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	
INCIDENT/CITATION NUMBER 05-246	DATE/TIME RECOVERED 3/13/03	PROPERTY NUMBER (Leave Blank) 15-243	BIN NUMBER (Leave Blank) 138137		
[REDACTED]					
DISCOVERED BY / D.O.B. [REDACTED]	ADDRESS Street City Zip	PHONE NUMBER			
[REDACTED]					
SUSPECT'S NAME / D.O.B.	ADDRESS Street City Zip	PHONE NUMBER			
ADDT'NL. SUSPECT / D.O.B.	ADDRESS Street City Zip	PHONE NUMBER			
SPECIAL INSTRUCTIONS				FOUND PROPERTY 90 DAYS	CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>
ITEM #	QUANTITY	VALUE	DESCRIPTION		
1	1		[REDACTED]		
2	1		[REDACTED]		
/					
TOTAL PACKAGE WEIGHT					
I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.			I hereby acknowledge that the above list represents all property impounded.		
SIGNATURE			DATE		
RECEIVED BY		REASON		DATE/TIME RECEIVED	
[REDACTED]		6		03-17-05 6:20 PM	