

PROPERTY REC.

PALM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

CONTRIBUTOR'S COPY

PBPO Form #52

<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 checked="" type="checkbox"/> TRIAL	<input type="checkbox"/> [REDACTED]	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	
INCIDENT/CITATION NUMBER 05-368	DATE/TIME RECOVERED 4-1-05	PROPERTY NUMBER (Leave Blank) 05-2005	BIN NUMBER (Leave Blank) 128323		
ADDRESS WHERE PROPERTY IMPOUNDED 345 So. County Rd, Palm Beach 1205					
<input type="checkbox"/> UNCLAIMED BY CONTRIBUTOR	ADDRESS	Street	City	Zip	PHONE NUMBER
	Palm Beach Police				
OWNER'S NAME / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
SUSPECT'S NAME / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
EDSTEIN, JEFFREY	Palm Beach				
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
7	7		MAXELL VHS TAPES OF SURVEILLANCE during April 2005 at the [REDACTED] marked A
2	2		2 VHS marked B
3	1		VHS 04-02-05
4	1		VHS 04-03-05
5	1		VHS 04-04-05
6	1		VHS 04-5-05
7	1		VHS 06-21/22-05 (copy broken)
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 _____

RECEIVED BY	REASON	DATE/TIME RECEIVED
Y/S [Signature]	[Signature]	12-15-05 17205

MILM 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"/> [REDACTED]		<input type="checkbox"/> STOLEN/RECOVERED		<input type="checkbox"/> OTHER					
INCIDENT/CITATION NUMBER 05-368			DATE/TIME RECOVERED 03/18/05 1220hrs			PROPERTY NUMBER (Leave Blank) 65-257			BIN NUMBER (Leave Blank) 128452				
ADDRESS WHERE PROPERTY IMPOUNDED 315 SO County Road PB FL 33480													
DISCOVERED BY / D.O.B. [REDACTED]			ADDRESS Street City Zip			PHONE NUMBER							
OWNER'S NAME / D.O.B. [REDACTED]			ADDRESS Street City Zip PB FL 33480			PHONE NUMBER [REDACTED]							
SUSPECT'S NAME / D.O.B. w/m JEFFREY ERSTEIN 1/20/53			ADDRESS Street City Zip PB FL 33480			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		Signed photo line up										
			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 AM-8338				REASON 60				DATE/TIME RECEIVED 03-22-05 0704					

PALM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

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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	[REDACTED]	<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) #12 128521		
ADDRESS WHERE PROPERTY IMPOUNDED 305 S COUNTY ROAD PB					
[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. EVANS, Jeff 2053	[REDACTED]	[REDACTED]	[REDACTED]	Zip 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-US 360 DIGITAL RECORDER ASSIGNED TO DET [REDACTED]
			STATEMENT 1 - [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)
			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 by me in the official performance of my duty as a police officer.	
SIGNATURE	DATE	SIGNATURE	DATE
RECEIVED BY	REASON	[REDACTED]	[REDACTED]
AB8338	6/	[REDACTED]	11-10-05 1300hr

PALM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

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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 05268			DATE/TIME RECOVERED 111505 1830			PROPERTY NUMBER (Leave Blank) 65-1092			BIN NUMBER (Leave Blank) 129542				
ADDRESS WHERE PROPERTY IMPOUNDED 345 S COUNTY ROAD PALM BEACH													
RECOVERED BY [REDACTED]			ADDRESS PBPD			Street			City		Zip		
OWNER'S NAME / D.O.B.			ADDRESS			Street			City		Zip		
SUSPECT'S NAME / D.O.B. TERSTEN, JEFF			ADDRESS			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		SONY MICROCASSETTE STATEMENT [REDACTED]										
			[REDACTED] W/F [REDACTED]										
2	1		PHOTO LINE UP ([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 by me in the official performance of my duty as a police officer.							
SIGNATURE						DATE							
RECEIVED BY			REASON			DATE/TIME RECEIVED							
AD 8238			5			11-10-05 0731h							

PALM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

PBPD Form #52

CONTRIBUTOR'S COPY

<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 05-368	DATE/TIME RECOVERED 10/12/05 1700hrs	PROPERTY NUMBER (Leave Blank) 05-972	BIN NUMBER (Leave Blank) 128/41
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ADDRESS WHERE PROPERTY IMPOUNDED
345 S County Road Palm Beach

[REDACTED]	ADDRESS <i>Street</i> PBPD	City	Zip	PHONE NUMBER
-------------------	--------------------------------------	------	-----	--------------

OWNER'S NAME / D.O.B.	ADDRESS <i>Street</i>	City	Zip	PHONE NUMBER
-----------------------	-----------------------	------	-----	--------------

SUSPECT'S NAME / D.O.B. 1-20-73 EVSTEIN, JEFF	ADDRESS <i>Street</i> [REDACTED]	City PPB	Zip	PHONE NUMBER
--	--	--------------------	-----	--------------

ADDT'L. SUSPECT / D.O.B.	ADDRESS <i>Street</i>	City	Zip	PHONE NUMBER
--------------------------	-----------------------	------	-----	--------------

SPECIAL INSTRUCTIONS "PLEASE COPY"	FOUND PROPERTY 90 DAYS CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>
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ITEM #	QUANTITY	VALUE	DESCRIPTION
1	21	MS	SONY MICROCASSETTES - INTERVIEW WITH [REDACTED] DOB [REDACTED]
2	1		" " " " mark - P # 2
3	1		SONY MICROCASSETTE INTERVIEW WITH [REDACTED] DOB [REDACTED]
			TOTAL PACKAGE WEIGHT

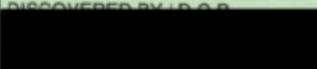
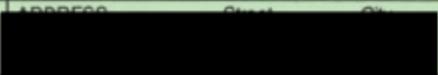
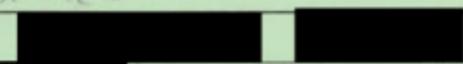
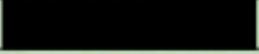
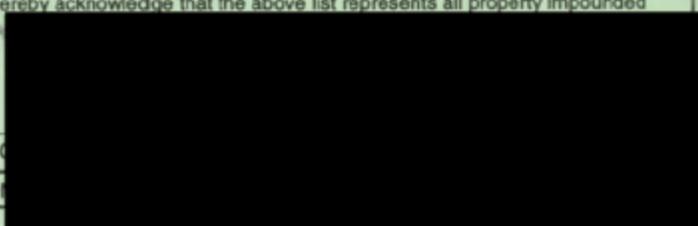
<p>I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.</p> <p>_____ SIGNATURE</p> <p>_____ DATE</p>	<p>I hereby acknowledge that the above list represents all property impounded by [REDACTED]</p> <p>_____ SIGNATURE</p>
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RECEIVED BY 4458 338	REASON 6	DATE 10-13-05 1200hr

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 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 100605 5:12	PROPERTY NUMBER (Leave Blank) 05-745	BIN NUMBER (Leave Blank) 128111		
ADDRESS WHERE PROPERTY IMPOUNDED 345 S COUNTY ROAD PALM BEACH					
DISCOVERED BY / D.O.B. 	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. ERSTAN JEFF	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	21		SONY MICROCASSETTES		
			(STATEMENT 		
			DOB 		
2	1		Statement 		
			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 by 		
SIGNATURE		DATE	SIGNATURE		
RECEIVED BY 138336		REASON			

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	2 v.d. 15
INCIDENT/CITATION NUMBER 05 368	DATE/TIME RECOVERED 110805 1521	PROPERTY NUMBER (Leave Blank) CC-1069	BIN NUMBER (Leave Blank) 138714		
ADDRESS WHERE PROPERTY IMPOUNDED 345 S COUNTY ROAD DB					
DISCOVERED BY / D.O.B. 	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. 1-2053 ERSTEIN JEFF	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		MAXELL VHS VIDEO CASSETTE STATEMENT w/f
2	1		MAXELL VHS VIDEO CASSETTE STATEMENT w/f
			TOTAL PACKAGE WEIGHT

<p>I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.</p> <p>_____ SIGNATURE</p> <p>_____ DATE</p>	<p>I hereby acknowledge that the above list represents all property impounded by me in the official performance of my duty as a police officer.</p> <p></p>
RECEIVED BY	REAS
AB 9 337	170415 113115

PALM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

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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 110705 1240			PROPERTY NUMBER (Leave Blank) 05-1064			BIN NUMBER (Leave Blank) 129542				
ADDRESS WHERE PROPERTY IMPOUNDED 345 S COUNTY ROAD													
DISCOVERED BY I.D.# [REDACTED]			ADDRESS PBPTD Street			City			Zip			PHONE NUMBER	
OWNER'S NAME / D.O.B.			ADDRESS Street			City			Zip			PHONE NUMBER	
SUSPECT'S NAME / D.O.B. 1-20-55 ERSTEIN JER			[REDACTED]			City PB			Zip 33480			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										
1	1		SONY MICROCASSETTE NC-90										
			STATEMENT [REDACTED]										
2	3		EMIL FROM COUNTY of Honolulu Div. of MOTOR VEHICLES/DRIVERS LICENSE										
			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 by me in the official performance of my duty as a police officer.							
SIGNATURE						DATE							
RECEIVED BY A/S 378						RECEIVED BY [REDACTED]							
						110705 1500							

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 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>100505 1700</i>			PROPERTY NUMBER (Leave Blank) <i>15792</i>			BIN NUMBER (Leave Blank) <i>1811</i>			
ADDRESS WHERE PROPERTY IMPOUNDED <i>345 S COUNTY ROAD PALM BEACH</i>												
DISCOVERED BY / D.O.B. 			ADDRESS <i>PBPD</i>			Street			City		Zip	
OWNER'S NAME / D.O.B.			ADDRESS			Street			City		Zip	
SUSPECT'S NAME / D.O.B. <i>EPSTEIN JEFF</i>			ADDRESS 			Street			City		Zip	
ADD'L. SUSPECT / D.O.B.			ADDRESS			Street			City		Zip	
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>SONY MICROCASS... </i>									
<i>2</i>	<i>1</i>		<i>SONY MICROCASS... </i>									
			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 by						
SIGNATURE						DATE						
RECEIVED BY						REASON						
<i>100505</i>						<i>100505</i>						

PALM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

PBPD Form #52

CONTRIBUTOR'S COPY

<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 10-4-05 1617			PROPERTY NUMBER (Leave Blank) 05-937			BIN NUMBER (Leave Blank) 128141				
ADDRESS WHERE PROPERTY IMPOUNDED 345 S. COUNTY ROAD PALM BEACH FL													
DISCOVERED BY / D.O.B. 			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. 1-2053 EPSTEIN, JEFF						PB City Zip			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										
1	1		SONY MICROCASSETTE STATEMENT										
2	1		SONY MICROCASSETTE VOICEMAIL										
3	1		SONY MICROCASSETTE VOICEMAIL MESSAGE ()										
4	1		SONY MICROCASSETTE follow phone call										
			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 by me in the official performance of my duty as a police officer.							
SIGNATURE						DATE							
RECEIVED BY						REAS							
05 937													

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 checked="" type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	2/18/85
INCIDENT/CITATION NUMBER 05-368	DATE/TIME RECOVERED 10-3-05 2100	PROPERTY NUMBER (Leave Blank) 05-929	BIN NUMBER (Leave Blank) 122719		
ADDRESS WHERE PROPERTY IMPOUNDED 345 Scanny Road Palm Beach FL 33411-7209					
DISCOVERED BY / D.O.B. [REDACTED]	ADDRESS Street City Zip PB PD			PHONE NUMBER	
OWNER'S NAME / D.O.B.	ADDRESS Street City Zip			PHONE NUMBER	
SUSPECT'S NAME / D.O.B. FERSTEIN, JEFF 1-20-53	ADDRESS [REDACTED] PB Zip			PHONE NUMBER	
ADD'L. SUSPECT / D.O.B.	ADDRESS Street City Zip			PHONE NUMBER	
SPECIAL INSTRUCTIONS PLEASE COPY				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 [REDACTED])
4	1		SONY MICROCASSETTE ([REDACTED] to [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 by [REDACTED]	
SIGNATURE		DATE	
RECEIVED BY [REDACTED]		REASON [REDACTED]	

PALM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

300

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 010406 1:20PM	PROPERTY NUMBER (Leave Blank) 06-21	BIN NUMBER (Leave Blank) 128/41
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ADDRESS WHERE PROPERTY IMPOUNDED
345 S. COUNTY ROAD Palm Beach, FL

DISCOVERED BY / D.O.B. 	ADDRESS <i>Street</i> PBPD <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. 01-20-53 EDSTIEN, JEFF	ADDRESS 	PHONE NUMBER
ADDT'L. SUSPECT / D.O.B.	ADDRESS <i>Street</i> <i>City</i> <i>Zip</i>	PHONE NUMBER

SPECIAL INSTRUCTIONS

FOUND PROPERTY 90 DAYS CLAIM
NOT CLAIM

ITEM #	QUANTITY	VALUE	DESCRIPTION
1	1		SONY MICROCASSETTE (TAPE)
			STATEMENT
			DUB
			TOTAL PACKAGE WEIGHT

<p>I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.</p> <p>SIGNATURE _____ DATE _____</p>	<p>I hereby acknowledge that the above list represents all property impounded</p> <p></p>
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RECEIVED BY YAS 8378	RECEIVED BY AS
	DATE 01-05-06 0730

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 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 010406 1:20PM			PROPERTY NUMBER (Leave Blank) 06-21			BIN NUMBER (Leave Blank) 128/41		
ADDRESS WHERE PROPERTY IMPOUNDED 345 S COUNTY ROAD PALM BEACH, FL											
DISCOVERED BY / D.O.B. 			ADDRESS <i>Street City Zip</i> PBPD			PHONE NUMBER					
OWNER'S NAME / D.O.B.			ADDRESS <i>Street City Zip</i>			PHONE NUMBER					
SUSPECT'S NAME / D.O.B. 01-20-83 ERIKEN JEFF			ADDRESS <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 (TAPED STATEMENT DOB)								
			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						RECEIVED BY					
AS 8773						01-05-06 6:30 PM					

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 checked="" type="checkbox"/> TRIAL		<input type="checkbox"/> LABORATORY		<input type="checkbox"/> STOLEN/RECOVERED		<input type="checkbox"/> OTHER		12952			
INCIDENT/CITATION NUMBER 05-368			DATE/TIME RECOVERED 010605 1050			PROPERTY NUMBER (Leave Blank) 26-24			BIN NUMBER (Leave Blank) 12814				
ADDRESS WHERE PROPERTY IMPOUNDED [REDACTED] BOCA RATON, FL													
DISCOVERED BY / D.O.B. [REDACTED]			ADDRESS [REDACTED] Street			City [REDACTED]			Zip [REDACTED]			PHONE NUMBER	
OWNER'S NAME / D.O.B. [REDACTED]			ADDRESS [REDACTED] Street			City MIAMI			Zip [REDACTED]			PHONE NUMBER	
SUSPECT'S NAME / D.O.B. ERSTEN JEH 1-2053			ADDRESS [REDACTED] Street			City PB			Zip [REDACTED]			PHONE NUMBER	
ADD'TNL. SUSPECT / D.O.B.			ADDRESS [REDACTED] 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			GREEN FOLDER MARKED "[REDACTED]" WHICH CONTAINS PAPERWORK.										
			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 by me in the official performance of my duty as a police officer.							
SIGNATURE						DATE			SI [REDACTED]				
RECEIVED BY						REASON							
[REDACTED]						[REDACTED]							

**PALM BEACH POLICE DEPARTMENT
PROPERTY RECEIPT**

Pg 1 of 6
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 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 10-20-2005	PROPERTY NUMBER (Leave Blank) 05-1024	BIN NUMBER (Leave Blank)		
ADDRESS WHERE PROPERTY IMPOUNDED [REDACTED]					
DISCOVERED BY [REDACTED]	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. Epstein Jeff 1-20-53	ADDRESS	Street	City	Zip	PHONE NUMBER
ADDITIONAL 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		Phone message book (kitchen)
✓ 2	2		Phone message book (office off kitchen)
✓ 3	3		file folders (messages) w/ 2 more files (Purse)
✓ 4	1		shreddered paper ^{marked} [REDACTED]
✓ 5	1		orange file folder marked "message"
* items 2-5 from office off kitchen			
✓ 6	✓		Beige message table off from closet ^{RETURN}
✓ 7	✓		Brown message table → foyer
✓ 8	1		Black Framed photo of nude girl *
✓ 9	99		Pictures in frame ← 10-10-02 from [REDACTED] *
✓ 10	1		↑ from yellow/blue room off kitchen (1/4 box)
✓ 11	8		Photos from office off pool area *
✓ 12	2		Photos from table on left → kitchen seen off
✓ 13	2		Photos table on right → pool area
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 by me in the official performance of my duty as a police officer.

SIGNATURE _____ DATE _____

SIGNATURE [REDACTED] DATE _____

RECEIVED BY	REASON
[REDACTED]	[REDACTED]
I, [REDACTED] 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 2005.	

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

PAGE 2 of 6 **5**

DETECTIVE BUREAU

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 05-368	DATE/TIME RECOVERED 10-20-05	PROPERTY NUMBER (Leave Blank) 05-1024	BIN NUMBER (Leave Blank) Lab		
ADDRESS [REDACTED]					
OWNER/VICTIM'S NAME / D.O.B.		ADDRESS	Street	City	Zip
SUSPECT'S NAME / D.O.B. Fostein, Jeff		ADDRESS	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
✓ 13	2	✓	VHS tapes from Credenza ^{on top} by pool
✓ 14	2	*	CD's marked Happy Birthday ↑ Credenza ^{on top} by pool (2)
✓ 15	3		Photos framed from Cabana *
✓ 16	1	✓	message book 1st floor S/W corner (top)
✓ 17	1	✓	message book (from inside)
✓ 18	3	✓	CD's from desk
✓ 19	1	*	DVD from desk (Items # 18, 19, 20, 21)
✓ 20	unfigured		Photos from desk from 1st floor S.W.
✓ 21	2		Framed Photos from desk
✓ 22	2	✓	framed Photos from table in S/W corner office
✓ 23	3		Soap on Rope (NE Bedroom (white room))
✓ 24	2		Twin Torpedo in Brown box
✓ 25	2		Soap on Rope (middle Bedroom (bedroom))
✓ 26	1		large framed Picture (from foyer into Master Bedroom)
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 by me in the official performance of my duty as a police officer.

SIGNATURE _____ DATE _____

[REDACTED SIGNATURE]

RECEIVED BY	REA

• To be viewed

PROPERTY RECEIPT
SEARCH WARRANT RETURN

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	(lab)

INCIDENT/CITATION NUMBER 05-368	DATE/TIME RECOVERED 10-20-05	PROPERTY NUMBER (Leave Blank) 05-1024	BIN NUMBER (Leave Blank)
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ADDRESS WHERE PROPERTY IMPOUNDED

OWNER / VICTIM'S NAME / D.O.B. ADDRESS Street City Zip PHONE NUMBER

SUSPECT'S NAME / D.O.B. 01-20-53 Epstein Jeff ADDRESS Street City Zip PHONE NUMBER

ADDITNL 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	NCV	SCHOOL TRANSCRIPT, [REDACTED] MASTER BEDROOM DESK
✓ 28	1	NCV	BOTTLE OF TOY TULY, MASTER BEDROOM CROWNZA MASTER BEDROOM
✓ 29	3	NCV	VIDEOTAPES 1/2", SEX IN CITY, LATIN JANINE, I LOVE LESBIANS FOUR, [REDACTED] MASTER BEDROOM
✓ 30	6	NCV	FRAMED PHOTOS FROM MENS BATHROOM - MASTER BEDROOM
✓ 31	1	NCV	GREEN MASSAGE TABLE, MENS BATHROOM - MASTER BEDROOM
✓ 32	1	NCV	THIRTY RENTAL AGREEMENT FROM CHEVROLET SUBURBAN (COPIED)
✓ 33	1	NCV	NOTE FROM [REDACTED] FROM CHEVROLET SUBURBAN.
✓ 34	11	NCV	CD'S from office of kitchen
✓ 35	6	NCV	ZIP CD'S from Book case RETURN
✓ 36	2	NCV	8MM Video tapes from Bookcase RETURN
✓ 37	4	NCV	Compact flash cards from Book case RETURN
✓ 38	1	NCV	flash card from camera on book case - RETURN TO OWNER
✓ 39	3	NCV	ZIP CD'S from Book case RETURN
✓ 40	30	NCV	CD'S from Book case (items 34-40 from guest house) RETURN
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 by me in the official performance of my duty as a police officer.

SIGNATURE	DATE	SIGNATURE
		[REDACTED]

RECEIVED BY	REASON

• To be viewed

**PALM BEACH POLICE DEPARTMENT
PROPERTY RECEIPT**

PAGE 4 of 6

DETECTIVE BUREAU

PSPD 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 checked="" type="checkbox"/> EVIDENCE	<input type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	Lab
INCIDENT/CITATION NUMBER 05-368	DATE/TIME RECOVERED 10-20-05	PROPERTY NUMBER (Leave Blank) 05-1024	BIN NUMBER (Leave Blank)		
ADDRESS WHERE FOUND					
DISCOVERED BY					
OWNER'S NAME / D.O.B.		ADDRESS Street	City	Zip	PHONE NUMBER
SUSPECT'S NAME / D.O.B. 01-20-53 Epstein, Jeff		ADDRESS 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
✓ 41	11	✓	Floppy disks from desk middle shelf RETURN
✓ 42	1	*	ZIP 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 (COPIES)
✓ 47	10	*	Disks in clear Box RETURN
✓ 48	7		ZIP Disks from guest room RETURN
✓ 49	1		items # 35-48 from guest bedroom RETURN
✓ 50	1		message book from guesthouse office RETURN
✓ 51	2		compact flash cards from RETURN
✓ 52	6		CD's RETURN #49-54 RETURN
✓ 53	1		CPU from guesthouse office RETURN
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 from me and that I have received a copy of this receipt.	
SIGNATURE		DATE	
RECEIVED BY		RECEIVED BY	

• TO BE VIEWED

**PALM BEACH POLICE DEPARTMENT
PROPERTY RECEIPT**

PAGE 6 of 6

DETECTIVE BUREAU

PBPD Form #52

SLW 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 checked="" type="checkbox"/> EVIDENCE	<input checked="" type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	<i>Lab</i>
--	---	-------------------------------------	---	--------------------------------	------------

INCIDENT/CITATION NUMBER <i>05-</i>	DATE/TIME RECOVERED <i>10 2005 1410</i>	PROPERTY NUMBER (Leave Blank) <i>05-1024</i>	BIN NUMBER (Leave Blank)
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ADDRESS [REDACTED]

[REDACTED]	ADDRESS	Street	City	Zip	PHONE NUMBER
------------	---------	--------	------	-----	--------------

OWNER'S NAME / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
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SUSPECT'S NAME / D.O.B. <i>1-20-53</i>	ADDRESS	Street	City	Zip	PHONE NUMBER
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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"/>
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ITEM #	QUANTITY	VALUE	DESCRIPTION	
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<i>96</i>			GREEN PHOTO FRAME with NAKED GIRL	<i>Return</i>
<i>97</i>				<i>Return</i>
<i>98</i>				<i>Return</i>
<i>99</i>				<i>Return</i>
<i>100</i>				<i>Return</i>
<i>101</i>				<i>Return</i>
<i>102</i>				<i>Return</i>
<i>103</i>				<i>Return</i>
<i>104</i>				<i>Return</i>
<i>105</i>				<i>Return</i>
<i>106</i>				<i>Return</i>
<i>107</i>				<i>Return</i>
<i>108</i>				<i>Return</i>
<i>109</i>				<i>Return</i>
<i>110</i>				<i>Return</i>

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
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RECEIVED BY <i>AB #338</i>	REA <i>6</i>
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I hereby acknowledge that the above list represents all property impounded

[REDACTED]

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

Pg 1 of 5
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 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 10-20-2005	PROPERTY NUMBER (Leave Blank) 05-1024	BIN NUMBER (Leave Blank)		
ADDRESS WHERE PROPERTY IMPOUNDED [REDACTED]					
DI [REDACTED]	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. 1-20-53 Epstein Jeff	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		Phone message book (kitchen)
✓ 2	2		Phone message book (office off kitchen)
✓ 3	3		file folder (messages) w/ 2 more files (Purple)
✓ 4	1		shredded paper ^{marked} off [REDACTED]
✓ 5	1		orange file folder marked "message"
* items 2-5 from office off kitchen			
✓ 6	✓		Beige message table off from closet ^{RETURN}
✓ 7	✓		Brown message table → foyer
✓ 8	✓		Black Framed photo of nude girl
✓ 9	✓	99	Pictures in frame items 6-8 from above
✓ 10	✓		↑ from yellow/blue room off kitchen (1A foyer)
✓ 11	8		Photos from office off pool area
✓ 12	2		Photos from table on left → kitchen room
✓ 13	2		Photos table on right → pool area
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 by me in the official performance of my duty as a police officer.	
SIGNATURE	DATE	SIGNATURE	DATE
[REDACTED]		[REDACTED]	
RECEIVED BY	REASON		
I, [REDACTED] the officer by whom this warrant was executed, do swear that the above inventory contains a true and detailed list of the property taken under the authority of this warrant.	[REDACTED]		
Sworn to and subscribed before me this 21 day of October 2005.	[REDACTED]		

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

PAGE 2 of 6
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 05-368	DATE/TIME RECOVERED 10-20-05	PROPERTY NUMBER (Leave Blank) 05-1024	BIN NUMBER (Leave Blank) Lab		
ADDRESS WHERE PROPERTY IMPOUNDED [REDACTED]					
OWNER / VICTIM'S NAME / D.O.B.		ADDRESS	Street	City	Zip
SUSPECT'S NAME / D.O.B. 01-20-53 Einstein Jeff		ADDRESS	Street	City	Zip
ADDITNL. 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
✓ 13	2	✓	VHS tapes From Credenza ^{on top} By Pool
✓ 14	2	*	CD's marked Happy Birthday ↑ Credenza ^{by pool}
✓ 15	3		Photos framed From Cabana
✓ 16	1	✓	message book 1 st Floor, S/W corner (top 2/3)
✓ 17	1	✓	message book (from inside)
✓ 18	3	✓	CD's From desk
✓ 19	1	*	DV from desk (Items # 18, 19, 20, 21)
✓ 20		unframed	Photos from desk from 1 st floor S.W.
✓ 21	2		framed Photos from desk
✓ 22	2	✓	framed Photos from table in S/W corner office
✓ 23	3		Soap on Rope (NE Bedroom (white room))
✓ 24	2		Twin Torpedo in Brown box
✓ 25	2		Soap on Rope (middle Bedroom) (white room)
✓ 26	1		large framed Picture (from foyer into Master Bedroom)
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		REA	

• To be viewed

PROPERTY RECEIPT
SEARCH WARRANT RETURN

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	lab
INCIDENT/CITATION NUMBER 05-368	DATE/TIME RECOVERED 10-20-05	PROPERTY NUMBER (Leave Blank) 05-1024	BIN NUMBER (Leave Blank)		
ADDRESS WHERE PROPERTY IMPOUNDED					
DISPOSER	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. 01-20-53 Epstein Jeff	ADDRESS	Street	City	Zip	PHONE NUMBER
ADDTNL. 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
✓ 27	1	NCV	School transcript, [redacted] MASTER BEDROOM DESK
✓ 28	1	NCV	BOTTLE OF JOY JELLY, MASTER BEDROOM CREDENZA MASTER BEDROOM (2)
✓ 29	3	NCV	VIDEOTAPES 1/2", SEX IN CITY, EATIN JANINE, HOWE LESBIANS FOUR. MASTER BEDROOM
✓ 30	6	NCV	FRAMED PHOTOS FROM MEN'S BATHROOM - MASTER BEDROOM
✓ 31	1	NCV	GREEN MASSAGE TABLE, MEN'S BATHROOM - MASTER BEDROOM
✓ 32	1	NCV	THIRTY RENTAL AGREEMENT FROM CHEVROLET SUBURBAN (COPIED)
✓ 33	1	NCV	NOTE FROM [redacted] FROM CHEVROLET SUBURBAN.
✓ 34	11	NCV	CD'S from office of kitchen
✓ 35	6	NCV	ZIP CD'S from Bookcase RETURN
✓ 36	2	NCV	8mm Video tapes from Bookcase RETURN
✓ 37	4	NCV	Compact flash cards from Bookcase RETURN
✓ 38	1	NCV	Flash card from camera on bookcase RETURN TO OWNER
✓ 39	3	NCV	ZIP CD'S from Bookcase RETURN
✓ 40	30	NCV	CD'S from Bookcase (items 35-40 from Guesthouse) RETURN
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 by me in the official performance of my duty as a police officer.

SIGNATURE	DATE	SIGNATURE
RECEIVED BY	REASON	

• TO BE VIEWED

**PALM BEACH POLICE DEPARTMENT
PROPERTY RECEIPT**

Page 4 of 6

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 checked="" type="checkbox"/> EVIDENCE	<input type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	Lab
INCIDENT/CITATION NUMBER 05-368	DATE/TIME RECOVERED 10-20-05	PROPERTY NUMBER (Leave Blank) 05-1024	BIN NUMBER (Leave Blank)		
ADDRESS WHERE PROPERTY IMPOUNDED 258 E1 Brillo					
[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. 01/20/53 Epstein, Jeff	[REDACTED]		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 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 (COPIED)
✓ 48	7		ZIP DISKS from guest room RETURN
✓ 49	1		items # 35-48 from guest bedroom message book from guesthouse office RETURN
✓ 50	1		message book RETURN
✓ 51	2		Compact flash cards from
✓ 52	6		CD's RETURN #49-51 from guesthouse office
✓ 53	1		CPU from guesthouse office RETURN
			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		REA	

• TO BE VIEWED

MIL BEACH POLICE DEPARTMENT PROPERTY RECEIPT

DETECTIVE BUREAU

PBPO 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>09/31/05 0915hrs</i>	PROPERTY NUMBER (Leave Blank) <i>05-378</i>	BIN NUMBER (Leave Blank) <i>12652</i>		
ADDRESS WHERE PROPERTY IMPOUNDED <i>33130/345 S. County Rd</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>EPSTEIN JEFFREY w/m 01-20-52</i>	ADDRESS [REDACTED]	<i>City</i>	<i>Zip</i>	PHONE NUMBER	
ADDT'L. SUSPECT / D.O.B.	ADDRESS <i>Street</i>	<i>City</i>	<i>Zip</i>	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>A/x mail - [REDACTED]</i>
<i>2</i>	<i>1</i>		<i>white paper - GHLISLAINE MAXWELL</i>
<i>3</i>	<i>1</i>		<i>MESSAGE - [REDACTED]</i>
<i>4</i>	<i>1</i>		<i>white paper - [REDACTED]</i>
<i>5</i>	<i>1</i>		<i>MONTGOMERY COUNTY, MD - [REDACTED]</i>
TOTAL PACKAGE WEIGHT			

<p>I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.</p> <p>SIGNATURE _____ DATE _____</p>	<p>I hereby acknowledge that the above list represents all property impounded by me in the official performance of my duty as a police officer.</p> <p>[REDACTED]</p>
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RECEIVED BY	REASON	DATE/TIME RECEIVED
<i>ABR338</i>	<i>6</i>	<i>04-21-05 1700hrs</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 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)		
	04-01-05 0915	05-280	128552		

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 90 DAYS CLAIM
NOT CLAIM

ITEM #	QUANTITY	VALUE	DESCRIPTION
1	1		white paper - [REDACTED]
2	1		yellow receipt - [REDACTED]
3	1		white paper - "left message for [REDACTED]"
4	1		" - "Buy I think you [REDACTED]"
5	1		" - FLIGHT INFO 04/01/05
6	1		" - "H. [REDACTED]"
			TOTAL PACKAGE WEIGHT

<p>I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.</p> <p>_____ SIGNATURE</p> <p>_____ DATE</p>	<p>I hereby acknowledge that the above list represents all property impounded by me in the official performance of my duty as a police officer.</p> <p>[REDACTED]</p>
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RECEIVED BY	REASON	DATE/TIME RECEIVED
753 6778	B	04-21-05 0700

PALM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

Pg = 2 of 2
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 <i>05-368</i>	DATE/TIME RECOVERED <i>04-08-05 0915</i>	PROPERTY NUMBER (Leave Blank) <i>05-381</i>	BIN NUMBER (Leave Blank) <i>128552</i>
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ADDRESS WHERE PROPERTY IMPOUNDED
[REDACTED]

DISCOVERED BY / D.O.B. [REDACTED]	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.	ADDRESS <i>Street City Zip</i>	PHONE NUMBER
ADD'TNL. SUSPECT / D.O.B.	ADDRESS <i>Street City Zip</i>	PHONE NUMBER

SPECIAL INSTRUCTIONS <i>PAGE 2 OF 2</i>	FOUND PROPERTY 90 DAYS CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>
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ITEM #	QUANTITY	VALUE	DESCRIPTION
15	1		message from [REDACTED] 4/1/05
16	1		" " " has quat 2x8
17	1		white paper - [REDACTED] w/friends
18	1		" " w/#'s
19	1		white paper - [REDACTED]
20	1		" " "
21	1		" " [REDACTED]
22	1		" " DENIS MURPHY
23	1		phone # print out.
			TOTAL PACKAGE WEIGHT

<p>I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.</p> <p>_____ SIGNATURE</p> <p>_____ DATE</p>	<p>I hereby acknowledge that the above list represents all property impounded by me in the official performance of my duty as a police officer.</p> <p>[REDACTED]</p>
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RECEIVED BY	REASON	DATE/TIME RECEIVED
<i>AS8378</i>	<i>+</i>	<i>04-21-05 0700</i>

LM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

Pg 1 of 2
DETECTIVE BUREAU

PBPO 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 04-08-05 0915	PROPERTY NUMBER (Leave Blank) 05-381	BIN NUMBER (Leave Blank) 128552		
ADDRESS WHERE PROPERTY IMPOUNDED [REDACTED] PG, FL 33420					
DISCOVERED BY / D.O.B. [REDACTED]	ADDRESS [REDACTED]	Street	City	Zip	PHONE NUMBER
OWNER'S NAME / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
SUSPECT'S NAME / D.O.B. 01-20-73 EPSTEIN JEFFERY W/M	ADDRESS Same as above	Street	City	Zip	PHONE NUMBER
ADDT'L. SUSPECT / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER

SPECIAL INSTRUCTIONS PAGE 1 OF 2	FOUND PROPERTY 90 DAYS	CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>
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ITEM #	QUANTITY	VALUE	DESCRIPTION
1	1		white paper - [REDACTED] @ 1 PM - photos
2	1		" Jet Blue receipt
3	1		" [REDACTED] to confirm
4	1		" [REDACTED]
5	1		MESSAGE - [REDACTED] 4/1/05
6	1		white paper - [REDACTED] w/ [REDACTED]
7	1		" " - [REDACTED] Friday - [REDACTED] 11 AM
8	1		" " - [REDACTED]
9	1		" " - [REDACTED] on Saturday
10	1		" " - GIRL FROM ST. BARTHS...
11	1		MESSAGE - GIBSLAINE
12	1		" " [REDACTED] 4/1/05 [REDACTED]
13	1		white paper - [REDACTED] @ 5:30
14	1		MESSAGE - [REDACTED] 4/1/05
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.	I hereby acknowledge that the above list represents all property impounded by me in the official performance of my duty as a police officer.
SIGNATURE	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 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>04/11/05 0915</i>	PROPERTY NUMBER (Leave Blank) <i>05-383</i>	BIN NUMBER (Leave Blank) <i>128552</i>		
ADDRESS WHERE PROPERTY IMPOUNDED <i>[REDACTED] PB FI 33410</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>120/53</i> <i>E. Steven Jefferson</i>	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"/>
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ITEM #	QUANTITY	VALUE	DESCRIPTION
1	12		white paper - EXPENDITURES
2	1		" " " [REDACTED] WILL BE HERE @ 1:30"
3	1		" " " [REDACTED] FOR ME @ 3:00"
4	1		" " " [REDACTED] TATOO"
5	1		" " " LEFT MESSAGE FOR [REDACTED]"
6	1		" " " [REDACTED] CAN'T BE HERE"
7	1		" " " MASON WILL CALL @ 11:30"
8	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 by me in the official performance of my duty as a police officer.
SIGNATURE	DATE
<i>AKS 8338</i>	<i>ES</i>

RECEIVED BY	REASON	DATE/TIME RECEIVED
<i>AKS 8338</i>	<i>ES</i>	<i>04-21-05 0700pm</i>

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
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<input checked="" type="checkbox"/> EVIDENCE	<input type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER
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INCIDENT/CITATION NUMBER <i>05 362</i>	DATE/TIME RECOVERED <i>04-11-05 0915 hrs</i>	PROPERTY NUMBER (Leave Blank) <i>05-382</i>	BIN NUMBER (Leave Blank) <i>128552</i>
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ADDRESS WHERE PROPERTY IMPOUNDED
[REDACTED] *FL 33110*

DISCOVERED BY / D.O.B. [REDACTED]	ADDRESS <i>FL 33110</i>	Street	City	Zip	PHONE NUMBER
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OWNER'S NAME / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
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SUSPECT'S NAME / D.O.B. <i>12-03</i> <i>E. Stein Jeffrey w/m</i>	ADDRESS <i>3 rd Ave</i>	Street	City	Zip	PHONE NUMBER
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ADD'L. SUSPECT / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
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SPECIAL INSTRUCTIONS	FOUND PROPERTY 90 DAYS	CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>
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ITEM #	QUANTITY	VALUE	DESCRIPTION
<i>1</i>	<i>5</i>		<i>message printouts</i>
<i>2</i>	<i>1</i>		<i>white paper - [REDACTED]</i>
<i>3</i>	<i>1</i>		<i>message - Mr. Madeline</i>
<i>4</i>	<i>1</i>		<i>message - [REDACTED]</i>
<i>5</i>	<i>1</i>		<i>" [REDACTED]</i>
<i>6</i>	<i>1</i>		<i>" [REDACTED]</i>
<i>7</i>	<i>1</i>		<i>" [REDACTED]</i>
<i>8</i>	<i>1</i>		<i>clear plastic stick</i>
			<i>possibly broken off object</i>
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 by me in the official performance of my duty as a police officer.
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SIGNATURE	DATE
[REDACTED]	[REDACTED]

RECEIVED BY	REASON	DATE/TIME RECEIVED
<i>PS 8728</i>	<i>15</i>	<i>04-21-05 0700h</i>

LM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

DETECTIVE BUREAU

PBPO 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>05 386</i>			DATE/TIME RECOVERED <i>04/15/05 0915</i>			PROPERTY NUMBER (Leave Blank) <i>05-386</i>			BIN NUMBER (Leave Blank) <i>128552</i>		
ADDRESS WHERE PROPERTY IMPOUNDED <i>[REDACTED]</i>											
DISCOVERED BY / D.O.B. <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. <i>01/20/53</i> <i>EPSTEIN, JEFFREY W/M</i>			ADDRESS <i>Same as above</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>MEDICAL SUPPLIES</i>								
<i>2</i>	<i>1</i>		<i>"727" letterhead</i>								
<i>3</i>	<i>1</i>		<i>INVOICE #42700</i>								
<i>4</i>	<i>1</i>		<i>AMAZON.COM [REDACTED]</i>								
<i>5</i>	<i>1</i>		<i>white paper - [REDACTED]</i>								
<i>6</i>	<i>1</i>		<i>message FROM [REDACTED] 4/4/05</i>								
<i>7</i>	<i>1</i>		<i>" " [REDACTED] 4/4/05</i>								
<i>8</i>	<i>1</i>		<i>white paper - [REDACTED]</i>								
<i>9</i>	<i>1</i>		<i>" " - [REDACTED]</i>								
			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 by me in the official performance of my duty as a police officer.					
SIGNATURE						DATE					
RECEIVED BY			REASON			DATE/TIME RECEIVED					
<i>[Signature]</i>			<i>TS</i>			<i>04-21-05 0700H</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 checked="" type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	

INCIDENT/CITATION NUMBER <i>05-312</i>	DATE/TIME RECOVERED <i>09/21/05 0915HRS</i>	PROPERTY NUMBER (Leave Blank) <i>05-378</i>	BIN NUMBER (Leave Blank) <i>12132</i>
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ADDRESS WHERE PROPERTY IMPOUNDED
[REDACTED] *124 - [REDACTED] Rd*

DISCOVERED BY / D.O.B. [REDACTED]	ADDRESS <i>Street City Zip</i>	PHONE NUMBER
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OWNER'S NAME / D.O.B. [REDACTED]	ADDRESS <i>Street City Zip</i>	PHONE NUMBER
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SUSPECT'S NAME / D.O.B. <i>01-20-82</i> <i>EPSTEIN JEFFREY</i>	ADDRESS [REDACTED] <i>FL 33410</i>	PHONE NUMBER
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ADDT'L. SUSPECT / D.O.B.	ADDRESS <i>Street City Zip</i>	PHONE NUMBER
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SPECIAL INSTRUCTIONS

FOUND PROPERTY 90 DAYS CLAIM
NOT CLAIM

ITEM #	QUANTITY	VALUE	DESCRIPTION
<i>1</i>	<i>1</i>		<i>A/X MAIL - [REDACTED]</i>
<i>2</i>	<i>1</i>		<i>white paper - CHRISTINE MAXWELL</i>
<i>3</i>	<i>1</i>		<i>MESSAGE - [REDACTED]</i>
<i>4</i>	<i>1</i>		<i>white paper - [REDACTED]</i>
<i>5</i>	<i>1</i>		<i>MONTGOMERY COUNTY, MD - [REDACTED]</i>
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 by me in the official performance of my duty as a police officer.

SIGNATURE _____ DATE _____

[REDACTED]

RECEIVED BY	REASON	DATE/TIME RECEIVED
<i>ABEZZE</i>	<i>B</i>	<i>04-21-05 0700H</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	DATE/TIME RECOVERED <i>04-21-05 0715</i>	PROPERTY NUMBER (Leave Blank) <i>05-280</i>	BIN NUMBER (Leave Blank) <i>128552</i>
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ADDRESS WHERE PROPERTY IMPOUNDED

DISCOVERED BY / D.O.B. [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'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"/>
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ITEM #	QUANTITY	VALUE	DESCRIPTION
1	1		[REDACTED]
2	1		[REDACTED]
3	1		[REDACTED]
4	1		[REDACTED]
5	1		[REDACTED]
6	1		[REDACTED]
			TOTAL PACKAGE WEIGHT

<p>I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.</p> <p>_____ SIGNATURE</p> <p>_____ DATE</p>	<p>I hereby acknowledge that the above list represents all property impounded by me in the official performance of my duty as a police officer.</p> <p>[REDACTED]</p>
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RECEIVED BY	REASON	DATE/TIME RECEIVED
<i>J.P. [REDACTED]</i>	<i>B</i>	<i>04-21-05 0715</i>

PALM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

CONTRIBUTOR'S COPY

PBPD Form #62

<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>04-08-05 0915</i>	PROPERTY NUMBER (Leave Blank) <i>05-381</i>	BIN NUMBER (Leave Blank) <i>128552</i>
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ADDRESS WHERE PROPERTY IMPOUNDED [REDACTED]					
[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'TNL. SUSPECT / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER

SPECIAL INSTRUCTIONS <i>PAGE 2 OF 2</i>	FOUND PROPERTY 90 DAYS	CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>
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ITEM #	QUANTITY	VALUE	DESCRIPTION
<i>15</i>	<i>1</i>		<i>Message from [REDACTED] 4/6/05</i>
<i>16</i>	<i>1</i>		<i>" " " has good 2x8</i>
<i>17</i>	<i>1</i>		<i>white paper - [REDACTED] w/ friends</i>
<i>18</i>	<i>1</i>		<i>" " w/ #'s</i>
<i>19</i>	<i>1</i>		<i>white paper - [REDACTED]</i>
<i>20</i>	<i>1</i>		<i>" " " "</i>
<i>21</i>	<i>1</i>		<i>" " [REDACTED]</i>
<i>22</i>	<i>1</i>		<i>" " DENIS MURPHY</i>
<i>23</i>	<i>1</i>		<i>phone # print out.</i>
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 from the [REDACTED] and that I have received a copy of this receipt.
SIGNATURE _____	SIGNATURE [REDACTED]
DATE _____	DATE _____

RECEIVED BY	REASON	DATE/TIME RECEIVED
<i>AS 8778</i>	<i>←</i>	<i>04-21-05 0700</i>

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
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<input checked="" type="checkbox"/> EVIDENCE	<input checked="" type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER
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INCIDENT/CITATION NUMBER <i>05-362</i>	DATE/TIME RECOVERED <i>04-08-05 0915</i>	PROPERTY NUMBER (Leave Blank) <i>05-381</i>	BIN NUMBER (Leave Blank) <i>128552</i>
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ADDRESS WHERE PROPERTY IMPOUNDED
[REDACTED]

DISCOVERED BY / D.O.B. [REDACTED]	ADDRESS <i>2 FL 3343</i>	Street	City	Zip	PHONE NUMBER
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OWNER'S NAME / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
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SUSPECT'S NAME / D.O.B. <i>01-20-73</i>	ADDRESS	Street	City	Zip	PHONE NUMBER
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ADD'TNL. SUSPECT / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
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SPECIAL INSTRUCTIONS
PAGE 1 OF 2

FOUND PROPERTY 90 DAYS	CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>
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ITEM #	QUANTITY	VALUE	DESCRIPTION
1	1		white paper - [REDACTED] 8 1 PM - photos
2	1		" Jet Blue receipt
3	1		" [REDACTED] to confirm
4	1		" [REDACTED]
5	1		MESSAGE - [REDACTED] 4/1/05
6	1		white paper - [REDACTED]
7	1		" " - [REDACTED] FRIDAY - [REDACTED] 11 AM
8	1		" " - [REDACTED]
9	1		" " - [REDACTED] on Saturday
10	1		" " - [REDACTED] 21. BARTON
11	1		MESSAGE - [REDACTED]
12	1		" " [REDACTED] 4/1/05 [REDACTED]
13	1		white paper - [REDACTED] 5:30
14	1		MESSAGE - [REDACTED] 4/1/05
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 _____

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

[REDACTED SIGNATURE]

RECEIVED BY	REASON	DATE/TIME RECEIVED

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 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>04/11/05 0915</i>	PROPERTY NUMBER (Leave Blank) <i>05-383</i>	BIN NUMBER (Leave Blank) <i>128552</i>		
ADDRESS WHERE PROPERTY IMPOUNDED <i>[REDACTED] PB FL 331</i>					
DISCOVERED BY / D.O.B. <i>[REDACTED]</i>	ADDRESS	Street	City	Zip	PHONE NUMBER
<i>[REDACTED]</i>	ADDRESS	Street	City	Zip	PHONE NUMBER
SUSPECT'S NAME / D.O.B. <i>[REDACTED]</i>	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	12		white paper - EXPENDITURES
2	1		" " " [REDACTED] will be here @ 11:30"
3	1		" " " [REDACTED] FOR MESS 300"
4	1		" " " [REDACTED] TATED"
5	1		" " " LEFT MESSAGE FOR [REDACTED]"
6	1		" " " [REDACTED] CAN'T BE HERE"
7	1		" " " MASON WILL CALL @ 11:30"
8	1		" " " [REDACTED]"
TOTAL PACKAGE WEIGHT			

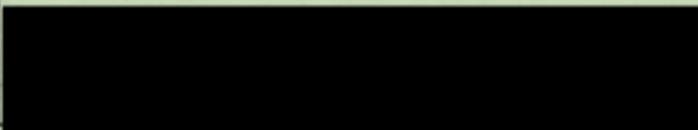
I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.	I hereby acknowledge that the above list represents all property impounded by me in the official performance of my duty as a police officer.
SIGNATURE _____ DATE _____	[REDACTED]

RECEIVED BY	REASON	DATE/TIME RECEIVED
<i>1158338</i>	<i>[REDACTED]</i>	<i>04-21-05</i>

MIL BEACH POLICE DEPARTMENT PROPERTY RECEIPT

CONTRIBUTOR'S COPY

PRPD 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>15-268</i>			DATE/TIME RECOVERED <i>04/12/05 0915</i>			PROPERTY NUMBER (Leave Blank) <i>05-384</i>			BIN NUMBER (Leave Blank) <i>128552</i>				
ADDRESS WHERE PROPERTY IMPOUNDED <i>3000 N. ...</i>													
DISCOVERED BY / D.O.B. 			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>...</i>			ADDRESS <i>Street City Zip</i>			PHONE NUMBER							
ADDT'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										
<i>1</i>	<i>1</i>		<i>MESSAGE FROM [Redacted]</i>										
<i>2</i>	<i>1</i>		<i>white paper - [Redacted]</i>										
<i>3</i>	<i>1</i>		<i>" - [Redacted] HAS A FRIEND"</i>										
<i>4</i>	<i>1</i>		<i>" - [Redacted] TO CONFIDENT"</i>										
<i>5</i>	<i>1</i>		<i>MESSAGE FROM GEORGE DAUNSON</i>										
<i>6</i>	<i>1</i>		<i>" [Redacted]</i>										
<i>7</i>	<i>1</i>		<i>" [Redacted]</i>										
<i>8</i>	<i>1</i>		<i>white paper - [Redacted]</i>										
			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 by me in the official performance of my duty as a police officer.							
SIGNATURE _____						DATE _____ 							
RECEIVED BY <i>MS 8338</i>			REASON <i>F</i>			DATE/TIME RECEIVED <i>04-21-05 0700</i>							

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 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>05-386</i>			DATE/TIME RECOVERED <i>04/15/05 0915</i>			PROPERTY NUMBER (Leave Blank) <i>05-386</i>			BIN NUMBER (Leave Blank) <i>128552</i>			
ADDRESS WHERE PROPERTY IMPOUNDED <i>322 E. 3rd St</i>												
DISCOVERED BY / D.O.B. <i>[REDACTED]</i>			ADDRESS <i>[REDACTED]</i>			Street			City		Zip	
OWNER'S NAME / D.O.B. <i>[REDACTED]</i>			ADDRESS <i>[REDACTED]</i>			Street			City		Zip	
SUSPECT'S NAME / D.O.B. <i>[REDACTED]</i>			ADDRESS <i>[REDACTED]</i>			Street			City		Zip	
ADDT'L. SUSPECT / D.O.B. <i>[REDACTED]</i>			ADDRESS <i>[REDACTED]</i>			Street			City		Zip	
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		INVOICE #42200									
4	1		AMAZON.COM <i>[REDACTED]</i>									
5	1		white paper - <i>[REDACTED]</i>									
6	1		message FROM <i>[REDACTED]</i> 4/15/05									
7	1		" " " <i>[REDACTED]</i> 4/15/05									
8	1		white paper - <i>[REDACTED]</i>									
9	1		" " " <i>[REDACTED]</i>									
			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 by me in the official performance of my duty as a police officer.						
SIGNATURE <i>[REDACTED]</i>						DATE <i>[REDACTED]</i>						
RECEIVED BY <i>[REDACTED]</i>				REASON <i>[REDACTED]</i>				DATE/TIME RECEIVED <i>04-21-05 0200K</i>				

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 checked="" type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	

INCIDENT/CITATION NUMBER <i>05-388</i>	DATE/TIME RECOVERED <i>04/13/05 9:15</i>	PROPERTY NUMBER (Leave Blank) <i>05-385</i>	BIN NUMBER (Leave Blank) <i>128552</i>
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ADDRESS WHERE PROPERTY IMPOUNDED
PB FC 33-150

DISCOVERED BY / D.O.B. 	ADDRESS <i>Street City Zip</i>	PHONE NUMBER
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	ADDRESS <i>Street City Zip</i>	PHONE NUMBER
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SUSPECT'S NAME / D.O.B. <i>1-20-53 F. P. TAIN, Jeffrey w/m</i>	ADDRESS <i>Same as above</i>	PHONE NUMBER
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ADD'L. SUSPECT / D.O.B.	ADDRESS <i>Street City Zip</i>	PHONE NUMBER
-------------------------	-----------------------------------	--------------

SPECIAL INSTRUCTIONS <i>04/13/05</i>	FOUND PROPERTY CLAIM <input type="checkbox"/> 90 DAYS NOT CLAIM <input type="checkbox"/>
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ITEM #	QUANTITY	VALUE	DESCRIPTION
<i>1</i>	<i>1</i>		<i>white paper -</i>
<i>2</i>	<i>1</i>		<i>" " " " " "</i>
<i>3</i>	<i>1</i>		<i>" " " " " "</i> <i>LITTLE GIRL ON THE BOAT</i>
<i>4</i>	<i>1</i>		<i>" " " " " "</i>
<i>5</i>	<i>1</i>		<i>" " " " " "</i>
<i>6</i>	<i>4</i>		
TOTAL PACKAGE WEIGHT			

<p>I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.</p> <p>_____ SIGNATURE</p> <p>_____ DATE</p>	<p>I hereby acknowledge that the above list represents all property impounded by me in the official performance of my duty as a police officer.</p> <p></p>
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RECEIVED BY	REASON	DATE/TIME RECEIVED
<i>745 8228</i>	<i>ES</i>	<i>04-21-05 0700</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 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 092105 1323			PROPERTY NUMBER (Leave Blank) 05-874			BIN NUMBER (Leave Blank) 129111				
ADDRESS WHERE PROPERTY IMPOUNDED 345 S. COUNTY ROAD PALM BEACH, FL													
DISCOVERED BY / D.O.B. 			ADDRESS PBPD			City KB			Zip KB			PHONE NUMBER	
OWNER'S NAME / D.O.B.			ADDRESS			City			Zip			PHONE NUMBER	
SUSPECT'S NAME / D.O.B. 12053 EDSTEIN JEFFREY			ADDRESS 			City KB			Zip KB			PHONE NUMBER	
ADD'TNL. SUSPECT / D.O.B.			ADDRESS			City			Zip			PHONE NUMBER	
SPECIAL INSTRUCTIONS									FOUND PROPERTY 90 DAYS			CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>	
ITEM #	QUANTITY	VALUE	DESCRIPTION										
1			MISC DOCUMENTS (TRAIL 09-21-05)										
			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.						I hereby acknowledge that the above list represents all property impounded							
SIGNATURE						DATE							
RECEIVED BY AB8338						REAS 							

PALM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

JB
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 <i>05-368</i>	DATE/TIME RECOVERED <i>4-1-05</i>	PROPERTY NUMBER (Leave Blank) <i>05-2005</i>	BIN NUMBER (Leave Blank) <i>128323</i>		
ADDRESS WHERE PROPERTY IMPOUNDED <i>345 So. County Rd, Palm Beach 1205</i>					
DISCOVERED BY / D.O.B. 	ADDRESS <i>Palm Beach Police</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>ERSTEIN, JEFFREY</i>	ADDRESS 	Street	City <i>Palm Beach</i>	Zip	PHONE NUMBER
ADD'L. 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
<i>7</i>	<i>7</i>		<i>MAXELL VHS TAPES OF SURVEILLANCE during April 2005 at the scene marked 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>6</i>	<i>1</i>		<i>VHS 04-5-05</i>
<i>7</i>	<i>1</i>		<i>VHS 06-21/22-05 (tape broken)</i>
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 by me in the official performance of my duty as a police officer.	
SIGNATURE		DATE	
RECEIVED BY	RECEIVED BY	DATE	DATE
<i>Y/B 6328</i>	<i>ES</i>	<i>12-15-05</i>	<i>173015</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 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 05368			DATE/TIME RECOVERED 101805 1140			PROPERTY NUMBER (Leave Blank) 05-1005			BIN NUMBER (Leave Blank) 129442				
ADDRESS WHERE PROPERTY IMPOUNDED 345 S. COUNTY ROAD PALM BEACH													
[REDACTED]			ADDRESS <i>Street</i> PR3PI			<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. 1-20-53 ERSTEIN, JEFF			[REDACTED]			<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									FOUND PROPERTY 90 DAYS			CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>	
ITEM #	QUANTITY	VALUE	DESCRIPTION										
1			MISC. PAPERWORK (TRASH 101805 DET KRAUEL)										
			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 by me in the official performance of my duty as a police officer.							
SIGNATURE						DATE							
RECEIVED BY						RECEIVED BY							
MS 8778						10/18/05							

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	2 Videos
INCIDENT/CITATION NUMBER 05-368	DATE/TIME RECOVERED 110805 1521	PROPERTY NUMBER (Leave Blank) 05-1069	BIN NUMBER (Leave Blank) 128714		

ADDRESS WHERE PROPERTY IMPOUNDED
345 S COUNTY ROAD DB

DISCOVERED BY / D.O.B. 	ADDRESS PBPD <small>Street City Zip</small>	PHONE NUMBER
OWNER'S NAME / D.O.B. 	ADDRESS <small>Street City Zip</small>	PHONE NUMBER
SUSPECT'S NAME / D.O.B. 1-2053 ERSTEIN JRF	ADDRESS 	PHONE NUMBER
ADD'LNL. SUSPECT / D.O.B.	ADDRESS <small>Street City Zip</small>	PHONE NUMBER

SPECIAL INSTRUCTIONS

FOUND PROPERTY 90 DAYS CLAIM
NOT CLAIM

ITEM #	QUANTITY	VALUE	DESCRIPTION
1	1		MAXELL VHS VIDEO CASSETTE STATEMENT N/F
2	1		MAXELL VHS VIDEO CASSETTE STATEMENT N/F
			TOTAL PACKAGE WEIGHT

<p>I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.</p> <p>SIGNATURE _____ DATE _____</p> <p>RECEIVED BY AKS 9337</p>	<p>I hereby acknowledge that the above list represents all property impounded</p> <p></p> <p>RECEIVED BY _____ DATE _____</p>
---	---

PALM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

DETECTIVE BUREAU

PPBD 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 110705 1240	PROPERTY NUMBER (Leave Blank) 05-1064	BIN NUMBER (Leave Blank) 129542		
ADDRESS WHERE PROPERTY IMPOUNDED 345 S. COUNTY ROAD					
DISCOVERED BY / D.O.B. 	ADDRESS PBPTD <small>Street</small>	City	Zip	PHONE NUMBER	
OWNER'S NAME / D.O.B.	ADDRESS <small>Street</small>	City	Zip	PHONE NUMBER	
SUSPECT'S NAME / D.O.B. 1-20-53 ERSTEIN JEFF	ADDRESS	City B	Zip 33480	PHONE NUMBER	
ADDT'L. SUSPECT / D.O.B.	ADDRESS <small>Street</small>	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		SONY MICROCASSETTE NK-90
			STATEMENT
2	3		EMAIL FROM COUNTY OF HONOLULU DIV. OF MOTOR VEHICLES/DRIVERS LICENSE
TOTAL PACKAGE WEIGHT			

<p>I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.</p>	<p>I hereby acknowledge that the above list represents all property impounded by me in the official performance of my duty as a police officer.</p>
SIGNATURE _____	DATE _____
RECEIVED BY	RE/
A 158378	B
	110705 1300

LM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

CONTRIBUTOR'S COPY

PBPD Form #52

<input type="checkbox"/> PROPERTY		<input checked="" 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 05-368			DATE/TIME RECOVERED 03152005			PROPERTY NUMBER (Leave Blank) 05-243			BIN NUMBER (Leave Blank) 128137				
ADDRESS WHERE PROPERTY IMPOUNDED [REDACTED]													
DISCOVERED BY / D.O.B. [REDACTED]			ADDRESS <i>Street City Zip</i>			PHONE NUMBER							
OWNER'S NAME / D.O.B. [REDACTED]			ADDRESS <i>Street City Zip</i>			PHONE NUMBER [REDACTED]							
SUSPECT'S NAME / D.O.B. [REDACTED]			ADDRESS <i>Street City Zip</i>			PHONE NUMBER							
ADD'L. SUSPECT / D.O.B. [REDACTED]			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		AUDIO TAPE #1 } [REDACTED]										
2	1		AUDIO TAPE #2 } [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 by me in the official performance of my duty as a police officer.							
SIGNATURE _____						[REDACTED]							
DATE _____						[REDACTED]							
RECEIVED BY 338				REASON 6				DATE/TIME RECEIVED 03-17-05 0700					

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 05-368	DATE/TIME RECOVERED 01906 1100	PROPERTY NUMBER (Leave Blank) 06-57	BIN NUMBER (Leave Blank) 178141		

ADDRESS WHERE PROPERTY FOUND [REDACTED] PALM BEACH GDNS. FL				
ADDRESS	Street	City	Zip	PHONE NUMBER
OWNER'S NAME / D.O.B.	ADDRESS	Street	City	Zip
SUSPECT'S NAME / D.O.B. EPSTEIN, Jeff 1-2055	ADDRESS	358 [REDACTED]	Zip	PHONE NUMBER
ADD'L. SUSPECT / D.O.B.	ADDRESS	[REDACTED]	Zip	PHONE NUMBER

SPECIAL INSTRUCTIONS

FOUND PROPERTY 90 DAYS CLAIM
NOT CLAIM

ITEM #	QUANTITY	VALUE	DESCRIPTION
1	1		MICRO CASSETTE SONY MC-90 STATEMENT W/F [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	[REDACTED]	
RECEIVED BY	RE		
AB 8338	6/1		

**PALM BEACH POLICE DEPARTMENT
PROPERTY RECEIPT**

EVIDENCE CUSTODIAN
022669

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 05368	DATE/TIME RECOVERED 033005 4:00PM	PROPERTY NUMBER (Leave Blank) 05-294	BIN NUMBER (Leave Blank) 128137
--	---	--	---

ADDRESS WHERE PROPERTY IMPOUNDED
[REDACTED] WPB FL [REDACTED]

ADDRESS [REDACTED]	Street	City	Zip	PHONE NUMBER
------------------------------	--------	------	-----	--------------

ADDRESS [REDACTED] UF [REDACTED]	Street	City	Zip	PHONE NUMBER
--	--------	------	-----	--------------

SUSPECT'S NAME / D.O.B. [REDACTED]	ADDRESS	Street	City	Zip	PHONE NUMBER
--	---------	--------	------	-----	--------------

ADD'TNL. SUSPECT / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
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SPECIAL INSTRUCTIONS	FOUND PROPERTY 90 DAYS	CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>
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ITEM #	QUANTITY	VALUE	DESCRIPTION
1	1		AUDIO TAPE "MAXELL" CONTROL CALL #2 [REDACTED]
2	1		MICRO TAPE- [REDACTED]
<div style="position: absolute; top: 50%; left: 50%; transform: translate(-50%, -50%); font-size: 2em;"> * Note # 2 is blank </div>			
			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 by me in the official performance of my duty as a police officer.
SIGNATURE _____	DATE _____

RECEIVED BY	REASON	DATE/TIME RECEIVED
AB8338	65	03-31-05 6700V
MP 8055	Invest	08 08 05 1000
PAID #2220	Return to [REDACTED] Rm.	8-16-05 1530
AB8338	copied both #1 for [REDACTED] for filing	09-20-05 1445 AS
[Signature]	Copy for [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 checked="" type="checkbox"/> TRIAL	<input type="checkbox"/> LABORATORY	<input type="checkbox"/> STOLEN/RECOVERED	<input type="checkbox"/> OTHER	2 Pkgs
INCIDENT/CITATION NUMBER 05-368	DATE/TIME RECOVERED 110405 4:05 pm	PROPERTY NUMBER (Leave Blank) 05-1052	BIN NUMBER (Leave Blank) 128714-#1		
ADDRESS WHERE PROPERTY IMPOUNDED 345 S COUNTY ROAD PALM BEACH, FL 128141-#2					
DISCOVERED BY / D.O.B. [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. 1-20-53 EPSTEIN, JEFF	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		MAXELL T160 VIDEOCASSETTE ([REDACTED])
2	1		SONY MICROCASSETTE MC-90 (PHONE CALL)
			TOTAL PACKAGE WEIGHT

<p>I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.</p> <p>SIGNATURE _____ DATE _____</p> <p>RECEIVED BY _____</p>	<p>I hereby acknowledge that the above list represents all property impounded</p> <p>[REDACTED]</p> <p>RECEIVED BY _____ DATE _____</p> <p>11-07-05 0730h</p>
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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 100505 1708			PROPERTY NUMBER (Leave Blank) 05-142			BIN NUMBER (Leave Blank) 138141		
ADDRESS WHERE PROPERTY IMPOUNDED 345 S COUNTY ROAD PALM BEACH											
[REDACTED]			ADDRESS		<i>Street</i>		<i>City</i>		<i>Zip</i>		PHONE NUMBER
[REDACTED]			ADDRESS		<i>Street</i>		<i>City</i>		<i>Zip</i>		PHONE NUMBER
SUSPECT'S NAME / D.O.B. EPSTEIN, JEFF			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 Please copy								FOUND PROPERTY 90 DAYS		CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>	
ITEM #	QUANTITY	VALUE	DESCRIPTION								
1	1		SONY MICROCASSETTE SLIDEMAT								
2	1		SONY MICROCASSETTE SLIDEMAT								
			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					
RECEIVED BY						RECEIVED BY					
268238						6					

PALM BEACH POLICE DEPARTMENT PROPERTY RECEIPT

DETECTIVE BUREAU

PRPD 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 10-4-05 1617	PROPERTY NUMBER (Leave Blank) 05-937	BIN NUMBER (Leave Blank) 128141
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ADDRESS WHERE PROPERTY IMPOUNDED
345 S. COUNTY ROAD PALM BEACH FL

	ADDRESS <i>Street</i> PBPD	City	Zip	PHONE NUMBER
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	ADDRESS <i>Street</i>	City	Zip	PHONE NUMBER
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SUSPECT'S NAME / D.O.B. 1-2053 EPSTAN, JEFF	ADDRESS <i>Street</i> 	City PB	Zip	PHONE NUMBER
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ADDT'L. SUSPECT / D.O.B.	ADDRESS <i>Street</i>	City	Zip	PHONE NUMBER
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SPECIAL INSTRUCTIONS	FOUND PROPERTY <input type="checkbox"/> CLAIM <input type="checkbox"/> 90 DAYS NOT CLAIM <input type="checkbox"/>
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ITEM #	QUANTITY	VALUE	DESCRIPTION
1	1		SONY MICROCASSETTE STATEMENT
2	1		SONY MICROCASSETTE VOICEMAIL
3	1		SONY MICROCASSETTE VOICE MAIL MESSAGE
4	1		SONY MICROCASSETTE follow phone call
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

I hereby acknowledge that the above list represents all property impounded by the office of the Palm Beach Police Department.

RECEIVED BY YB 833E	REASON C

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	2 PK 65
INCIDENT/CITATION NUMBER 05-368	DATE/TIME RECOVERED 10-3-05 2100	PROPERTY NUMBER (Leave Blank) 05-929	BIN NUMBER (Leave Blank) 128719		
ADDRESS WHERE PROPERTY IMPOUNDED 345 SCOURY ROAD PALM BEACH 33411-1204					
DISCOVERED BY (D.O.B.)	ADDRESS	Street	City	Zip	PHONE NUMBER
	PBPD				
SUSPECT'S NAME / D.O.B. 1-20-53 EPSTEIN, JEFF	ADDRESS	Street	City	Zip	PHONE NUMBER
			PB		
ADDT'L. SUSPECT / D.O.B.	ADDRESS	Street	City	Zip	PHONE NUMBER
SPECIAL INSTRUCTIONS PLEASE COPY				FOUND PROPERTY	CLAIM <input type="checkbox"/>
				90 DAYS	NOT CLAIM <input type="checkbox"/>

ITEM #	QUANTITY	VALUE	DESCRIPTION
1	1		MAXELL VHS T-160 CASSETTE
2	1		SONY MICROCASSETTES (STATEMENT
3	1		SONY MICROCASSETTE
4	1		SONY MICROCASSETTE
			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

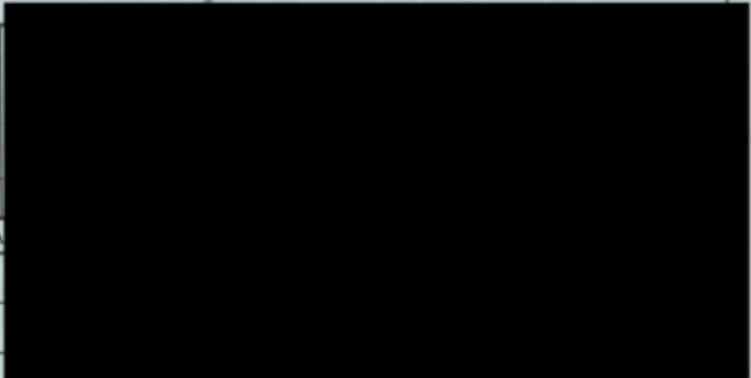
DATE

RECEIVED BY

REA

AB 8338

6



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 03/18/05 1220hrs	PROPERTY NUMBER (Leave Blank) 05-257	BIN NUMBER (Leave Blank) 128452
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ADDRESS WHERE PROPERTY IMPOUNDED
315 SO COUNTY ROAD PB FL 33480

DISCOVERED BY / D.O.B. [REDACTED]	ADDRESS <i>Street City Zip</i>	PHONE NUMBER
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[REDACTED]	ADDRESS <i>Street City Zip</i> WPB FL 33480	PHONE NUMBER [REDACTED]
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SUSPECT'S NAME / D.O.B. <i>w/m</i> JEFFREY E. EPSTEIN 1/20/53	ADDRESS <i>Street City Zip</i> PB FL 33480	PHONE NUMBER
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ADDT'L. SUSPECT / D.O.B.	ADDRESS <i>Street City Zip</i>	PHONE NUMBER
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SPECIAL INSTRUCTIONS	FOUND PROPERTY 90 DAYS CLAIM <input type="checkbox"/> NCT CLAIM <input type="checkbox"/>
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ITEM #	QUANTITY	VALUE	DESCRIPTION
1	1		Signed photo line up
<div style="position: absolute; top: 50%; left: 50%; transform: translate(-50%, -50%); opacity: 0.5; font-size: 4em;">/</div>			
			TOTAL PACKAGE WEIGHT

<p>I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.</p> <p>_____ SIGNATURE</p> <p>_____ DATE</p>	<p>I hereby acknowledge that the above list represents all property impounded</p> <p>[REDACTED]</p>
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RECEIVED BY AM 8238	REAR 5	DATE 03-22-05 0704
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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 345 S COUNTY ROAD PB					
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. EPSTEIN, Jeff				Zip PB	PHONE NUMBER
ADD'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-US 360 DIGITAL RECORDER ASSIGNED TO DET
			STATEMENT 1 - W/M
			FOLDER 2 - DET PROVIDING DATE AND TIME OF CALL
			FOLDER 3 - W/M
2	1		CD - (copy of recordings from #1)
TOTAL PACKAGE WEIGHT			

<p>I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.</p> <p>_____ SIGNATURE</p> <p>_____ DATE</p>	<p>I hereby acknowledge that the above list represents all property impounded by the Palm Beach Police Department.</p> <p></p>
RECEIVED BY	REAS
AB9338	6/

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 05368	DATE/TIME RECOVERED 111505 1830	PROPERTY NUMBER (Leave Blank) 05-1092	BIN NUMBER (Leave Blank) 129542		
ADDRESS WHERE PROPERTY IMPOUNDED 345 S. COUNTY ROAD PALM BEACH					
DISCOVERED BY / D.O.B. 	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. 1-20-53 EPSTEIN, JEFF				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		SONY MICROCASSETTE STATEMENT
			w/f
2	1		PHOTO LINE UP ()
			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 by me in the official performance of my duty as a police officer.

SIGNATURE

DATE

RECEIVED BY

AD 8338

5

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 10/06/05 5:12	PROPERTY NUMBER (Leave Blank) 05-745	BIN NUMBER (Leave Blank) 128141
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ADDRESS WHERE PROPERTY IMPOUNDED
345 S. COUNTY ROAD PALM BEACH

	ADDRESS <small>Street</small> PBPD	City	Zip	PHONE NUMBER
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	ADDRESS <small>Street</small>	City	Zip	PHONE NUMBER
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SUSPECT'S NAME / D.O.B. ERSTEIN, JEFF 01-28-53		City (ROAD)	Zip	PHONE NUMBER
--	--	-----------------------	-----	--------------

ADDT'L. SUSPECT / D.O.B.		City	Zip	PHONE NUMBER
--------------------------	--	------	-----	--------------

SPECIAL INSTRUCTIONS	FOUND PROPERTY 90 DAYS <input type="checkbox"/> CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>
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ITEM #	QUANTITY	VALUE	DESCRIPTION
1	21		SONY MICROCASSETTES (STATEMENT DOB Statement #2
2	1		" " Statement #2
			TOTAL PACKAGE WEIGHT

<p>I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.</p> <p>_____ SIGNATURE</p> <p>_____ DATE</p>	<p>I hereby acknowledge that the above list represents all property impounded by me in the official performance of my duty as a police officer.</p>
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RECEIVED BY	REAR
AG 8328	5

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 10/12/05 1700HRS	PROPERTY NUMBER (Leave Blank) 05-972	BIN NUMBER (Leave Blank) 128141		

ADDRESS WHERE PROPERTY IMPOUNDED
345 S. COUNTY ROAD PALM BEACH

RECOVERED BY [REDACTED]	ADDRESS <i>Street</i> PBPD	City	Zip	PHONE NUMBER
OWNER'S NAME / D.O.B.	ADDRESS <i>Street</i>	City	Zip	PHONE NUMBER
SUSPECT'S NAME / D.O.B. EPSTEIN, JEFF 1-20-53	ADDRESS <i>Street</i> [REDACTED]	City PB	Zip	PHONE NUMBER
ADD'LNL. SUSPECT / D.O.B.	ADDRESS <i>Street</i>	City	Zip	PHONE NUMBER

SPECIAL INSTRUCTIONS "PLEASE COPY"	FOUND PROPERTY 90 DAYS CLAIM <input type="checkbox"/> NOT CLAIM <input type="checkbox"/>
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ITEM #	QUANTITY	VALUE	DESCRIPTION
1	21	MS	SONY MICROCASSETTES INTERVIEW WITH [REDACTED] DOB [REDACTED]
2	1		" " " " mark-8 #2
3	1		SONY MICROCASSETTE INTERVIEW WITH [REDACTED] DOB [REDACTED]
TOTAL PACKAGE WEIGHT			

<p>I hereby acknowledge that the above list represents all property taken from me and that I have received a copy of this receipt.</p> <p>SIGNATURE _____ DATE _____</p> <p>RECEIVED BY 4158338</p>	<p>I hereby acknowledge that the above list represents all property impounded by me in the official performance of my duty as a police officer.</p> <p>[REDACTED]</p> <p>RECEIVED BY _____ DATE _____</p>
--	---

