

COPY

FOLLOW UP REPORT

AGENCY NAME SNOHOMISH POLICE DEPARTMENT		INCIDENT CLASSIFICATION Arson 1		CASE NUMBER HH 2010 0172	
NAME OF ORIGINAL VICTIM(S) Tan Line				REPORT DATE 05/06/2014	
TYPE OF ORIGINAL REPORT Arson 1		ORIGINAL DATE 02/04/2014	RECLASSIFY TO	CONNECTING REPORT NUMBER(S)	

INVESTIGATION: On 05/06/2014 I spoke with DPA Cornell about this investigation and processed his request for a copy of any investigative notes or other items pertaining to this case. As I made copies of the investigative notes, I located two DVD discs of scene photographs I had obtained from Snohomish County Fire Chief Simmons around March of 2014. I made copies of the disc and provided them to DPA Cornell and entered the original copies into evidence, see attached property room report.

Copy of all notes and items from investigative file is attached for reference.

Detective David Fontenot #1540
05/06/2014

RECEIVED

MAY 06 2014

PROSECUTING ATTORNEY
FOR SNOHOMISH COUNTY

BY _____
FOR _____

I certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing statement is true and correct.

OFFICER NAME / NUMBER Detective David Fontenot #1540		APPROVED BY <i>[Signature]</i>	
IBR CLEARANCE: () ARR/A () EXC/A () INSUFF/ CLO () ARR/J () EXC/J () OTHER/ CLO () UNF	COPIES MADE FOR: () PA () CPS () JUV () PAT () DSHS () MH	() COURT: CAS / EVG / SOUTH / EVT () DET: PREC / CTH / SPEC () OTHER:	DATA ENTRY

EVIDENCE ~~RE COPY~~ ORIGINAL

SHADED AREAS FOR PROPERTY ROOM USE

USE FOR EVIDENCE /PROPERTY BOOKED INTO EVIDENCE

SNOHOMISH COUNTY SHERIFF'S OFFICE REGIONAL EVIDENCE DIVISION		TYPE OF OFFENSE Arson 1		AGENCY ID	AGENCY CASE NUMBER HH 2010 0172	
<input type="checkbox"/> VIC <input checked="" type="checkbox"/> SUS <input type="checkbox"/> WIT <input type="checkbox"/> COMP Shavlik, Lori		DOB	<input type="checkbox"/> VIC <input type="checkbox"/> SUS <input type="checkbox"/> WIT <input type="checkbox"/> COMP		DOB	
BROUGHT TO <input checked="" type="checkbox"/> PROPERTY ROOM <input type="checkbox"/> PRECINCT <input type="checkbox"/> OTHER		COLLECTING OFFICER: NAME # <u>D Fontenot</u> DATE <u>05/06/2014</u> TIME <u>1513 Hrs.</u> SIGNATURE _____		TRANSPORTING OFFICER NAME <u>Same</u> DATE _____ TIME _____ SIGNATURE _____		
ACTION NUMBER: 3 - EVIDENCE; 5 FOUND; 10 - SAFEKEEPING		EVIDENCE -- WILL BE HELD UNTIL COURT DISPOSITION OR AUTHORIZATION FROM OFFICER FOUND AND SAFEKEEPING - WILL BE HELD FOR 60 DAYS OR 60 DAYS PAST OWNER NOTIFICATION EXCEPT FOR ITEM(S) ENTERED BY COURT ORDER				
ITEM #	ITEM	SERIAL / OAN	BRAND NAME	STORAGE LOCATION		
ACTION# 3	CD's of scene photographs by Fire	WHERE FOUND Snohomish Fire Chief Simmons		WEIGHT - PROPERTY RM ONLY		
	MODEL / CALIBER					
	FURTHER DESCRIPTION (IF WEAPON, INDICATE BARREL LENGTH, ACTION, FINISH) Scene photographs from fire call on 02/04/2010					
OWNER'S NAME		ADDRESS	CITY	ZIP	PHONE #	
OTHER REMARKS / ADDITIONAL INFORMATION / SPECIAL INSTRUCTIONS					BAR CODE GOES HERE	
ITEM #	ITEM	SERIAL / OAN	BRAND NAME	STORAGE LOCATION		
ACTION#	MODEL / CALIBER	WHERE FOUND		WEIGHT - PROPERTY RM ONLY		
	FURTHER DESCRIPTION (IF WEAPON, INDICATE BARREL LENGTH, ACTION, FINISH)					
OWNER'S NAME		ADDRESS	CITY	ZIP	PHONE #	
OTHER REMARKS / ADDITIONAL INFORMATION / SPECIAL INSTRUCTIONS					BAR CODE GOES HERE	
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Agency Case Number

EVIDENCE CONTROL USE ONLY:

TRANSPORTED BY: PERSONNEL #:	RECEIVED BY EVIDENCE CONTROL NAME# _____ # _____	NCIC/WACIC <input type="checkbox"/> DATE _____	NCIC/WACIC + <input type="checkbox"/> DATE _____	CAD/RMS CHECKED <input type="checkbox"/>
DATE: _____	DATE/TIME: _____	NCIC/WACIC - <input type="checkbox"/> DATE _____		
INPUT <input type="checkbox"/> DATE: _____	LETTER SENT <input type="checkbox"/> DATE: _____	FINAL UPDATE <input type="checkbox"/> DATE: _____		