

Name and Title of Person From Whom Received: SU Address: _____
 Owner
 Other City, State, Zip: _____ Phone: _____
 Address From Where Obtained: ANNI FRONTIER ST # 7 Reason Obtained: Homicide evidence Time/Dte Obtained: 4-3-06

ITEM NUMBER	PROPERTY TAG NUMBER	DESCRIPTION OF ARTICLES	TIME COLLECTED	DISP.
1	9186	Swab containing possible DNA evidence Location Found: SWH-582 Toyota Exterior Passenger Door Handle	1933 hrs	
2	9187	Swab containing possible DNA evidence Location Found: SWH-582 Toyota Interior passenger door handle	1930 hrs	
3	9188	Swab containing possible DNA evidence Location Found: Hood latch for Toyota SWH-582	1937 hrs	
4	9189	Swab containing possible DNA evidence Location Found: Left battery cable to Toyota SWH-582	1941 hrs	
5	9190	Swab containing possible DNA evidence Location Found: Right battery cable to Toyota SWH-582	1943 hrs	

ITEM NUMBER	DATE	RELEASED BY	RECEIVED BY	PURPOSE OF CHANGE OF CUSTODY
1-5	4-3-06	Signature: _____ Name, Title: _____	Signature: <u>Bill Tuson</u> Name, Title: <u>BILL TUSON - SGT</u>	COLLECTED AS POSSIBLE EVIDENCE
1-5	4-3-06	Signature: <u>Bill Tuson</u> Name, Title: <u>BILL TUSON - SGT</u>	Signature: <u>Jermy Hawkins</u> Name, Title: <u>Jermy Hawkins/IC</u>	TOT CUSTODIAN
1-5	04-04-06	Signature: <u>Jermy Hawkins</u> Name, Title: <u>Jermy Hawkins/IC</u>	Signature: <u>M. Wiegand</u> Name, Title: <u>M. Wiegand INV.</u>	Transport to crime lab

40IN19 3/03 LOCATION Table LEDGER NUMBER: 06-73

EXHIBIT

31

CHAIN OF CUSTODY (Continued)

ITEM NUMBER	DATE	RELEASED BY	RECEIVED BY	PURPOSE OR CHANGE OF CUSTODY
1-5	4-4-02	<i>[Signature]</i> Name, Title: <i>[Signature]</i>	<i>[Signature]</i> Name, Title: <i>[Signature]</i>	TOT Crime Lab
1-5	5/25/04	STATE Crime Lab Name, Title:	<i>[Signature]</i> Name, Title: <i>[Signature]</i>	Transport from Crime Lab to CASO
1-5	05/25/06	<i>[Signature]</i> Name, Title: <i>[Signature]</i>	<i>[Signature]</i> Name, Title: <i>[Signature]</i>	TOT Evidence Custodian
		Signature: Name, Title:	Signature: Name, Title:	
		Signature: Name, Title:	Signature: Name, Title:	
		Signature: Name, Title:	Signature: Name, Title:	
		Signature: Name, Title:	Signature: Name, Title:	
		Signature: Name, Title:	Signature: Name, Title:	
		Signature: Name, Title:	Signature: Name, Title:	

Item #	Date	Name	Address	Relationship

FINAL DISPOSAL AUTHORITY

ITEMS _____ ON THIS DOCUMENT, PERTAINING TO THE INVESTIGATION INVOLVING
 Name, Address _____
 NO LONGER REQUIRED AS EVIDENCE AND MAY BE DISPOSED OF AS INDICATED ABOVE. (If articles must be retained, do not sign, but explain in separate correspondence.) If/are

Typed/Printed Name and Title _____ Signature _____ Date _____

WITNESS TO DESTRUCTION OF EVIDENCE

The article(s) listed at item number(s) _____ was/were destroyed by
 the evidence custodian, in my presence, on the date indicated above.

Printed Name _____ Signature _____ Date _____ Printed Name _____ Signature _____ Date _____