

ORIGINAL	OFFICE COPY	<h1>EXHIBIT BOOK</h1> <small>A. B. N. 43 408 613 180</small>	C.O.P.S. EVENT NO. 	1c D 890125
POLICE STATION: <u>STIB</u> 1a		OFFENDER: <u>13/1232</u> 1b	EXHIBIT ROOM REF: _____	
PARTICULARS		DESCRIPTION	RECORD OF MOVEMENT	
Date received: <u>31-12-13</u> 2a	CASH: \$ <u>NIL</u> 4a		DATE/TIME	SIGNATURE/REG'D No.
Offence: <u>MURDER</u> 2b			IN 5a OUT	PURPOSE TAKEN/ SEAL NO. 5c
Date of Offence:	①	<u>A12345 DIGITAL RECORDER</u> 4c	<u>12-15PM 31-12-13</u> <u>12-15PM 31-12-13</u>	<u>ENTERED FOR DOWNLOAD</u> <u>ADD ②. ITEM ① RTS.</u> <u>HANDED TO DSC BLOGGS</u>
Owner's Name:	4b	[REDACTED]	<u>3-15PM 31-12-13</u> <u>4PM 31-12-13</u>	
Address:		[REDACTED] 4d x 4e		[REDACTED]
O.I.C. of Case: <u>DSC BLOGGS</u> 2c		<u>E.R. VANDYK</u> <u>SGT [REDACTED]</u>		<u>J. BLOGGS</u> <u>DSC [REDACTED]</u>
Registered No.:	②	<u>BLUE STIB USB DRIVE '31-12-13 13/1232'</u>		
2nd Officer:	4f	[REDACTED]		
Registered No.:		[REDACTED] x 4e		
Station: <u>SCC HOMICIDE</u> 2d		<u>E.R. VANDYK</u>		
Charge Ref:		<u>SERGEANT [REDACTED]</u> 4g		
If drugs, Gross weight:				
Security Bag No.				
Analyst Cert.				
Photocopied: YES <input type="checkbox"/> NO <input type="checkbox"/>				
by:				
Photographed: YES <input type="checkbox"/> NO <input type="checkbox"/>				
by:				
Date: _____ Job No. _____				
Search Warrant Ref. No.				
RECEIPT		DISPOSAL DETAILS		
Name:		Date of Remand/Final Hearing:		
Address:		Date may be disposed:	How to be disposed:	
Handed personally <input type="checkbox"/> Posted <input type="checkbox"/>		Signature of Recipient:		
Not required <input checked="" type="checkbox"/> 3a		Address:		
Signature: [REDACTED]		Date:	Destroyed by:	
Name: <u>E.R. VANDYK</u>		Witness (Signature & Name):		
Rank: <u>SGT</u>		Rank/Title:		
Date: <u>31-12-13</u> 3b		File No.		