

| | | | | | | | | | | | | | | | |
|--|--|---|---|---|--------------------------------------|-----------------------------------|--|--|--|---|----------------|--|--|--|--|
| HILLSBOROUGH COUNTY SHERIFF'S OFFICE INCIDENT REPORT | | | | PAGE 1 OF 8 | | | | 1. Case No. 07-201904 | | | Event No. | | | | |
| 2. Type of Incident DEATH INVESTIGATION | | | | | | | <input checked="" type="checkbox"/> Comm <input type="checkbox"/> Att <input type="checkbox"/> N/A <input type="checkbox"/> DV | | SIG CODE 320 | | 3. Statute No. | | | | |
| 4. Incident Date 04 05 07 1607 | | | | Time To Date 1607 | | | | 5. Report Date 04 05 07 1530 | | Time 1530 | | 6. Other Case No. Agency | | | |
| 7. Location of Incident Scene FISHHAWK SUBDIVISION 5922 TEALWATER PL. LITHIA, FL. 33547 | | | | | | | | 8. Grid 6762 | | 9. # Off | | <input type="checkbox"/> Gang <input type="checkbox"/> Juvenile | | | |
| 10. Location Type | | | | 11. Type of Weapon | | | | V/W Code | | VICTIM'S RELATIONSHIP TO OFFENDER: (VRTO) | | | | | |
| 01-Residence-Single 02-Apartment/Condo 03-Residence-Other 04-Hotel/Motel 05-Convenience Store 06-Gas Station 07-Liquor Store 08-Bar/Night Club 09-Supermarket 110-Dept/Discount Store 11-Specialty Store 12-Drug Store/Hospital 13-Bank/Financial Inst. 14-Commercial/Office Bldg. 15-Industrial 16-Storage 17-Govt/Public Bldg. | | | | 18-School/University 19-Jail/Prison 20-Religious Bldg. 21-Airport 22-Bus/Rail Terminal 23-Construction Site 24-Other Structure 25-Parking Lot/Garage 26-Highway/Roadway 27-Park/Woodlands/Field 28-Lake/Waterway 29-Motor Vehicle 30-Other Mobile 99-Other | | | | 00-N/A 01-Handgun 02-Rifle 03-Shotgun 04-Firearm 05-Knife/Cutting Instrument 06-Blunt Object 07-Hands/Fists/Foot 08-Poison 09-Explosives 10-Fire/Incendary | | VI-Victim CP-Complainant SB-Sexual Battery Victim MA-Missing Adult MC-Missing Child DC-Dependent Child WI-Witness NS-Neighborhood Survey FI-Further Information SP-Suspect AR-Arrested JV-Juvenile OW-Owner OT-Other AS-Associate | | 01-N/A 02-Undetermined 03-Spouse 04-Ex-Spouse 05-Co-inhabitant 06-Parent 07-Brother/Sister 08-Child 09-Step-Parent 10-Step-child 11-In-Law 12-Other Family 13-Student 14-Teacher 15-Child of Boyfriend/Girlfriend 16-Boyfriend/Girlfriend 17-Friend 18-Neighbor 19-Siter/Daycare Center 20-Employee 21-Employer 22-Landlord/Tenant 23-Acquaintance 99-Other | | | |
| <input checked="" type="checkbox"/> VI <input type="checkbox"/> CP | | 13. Name WINTER, JOHN DAVID | | | | | | VRTO 01 | Race W | Sex M | Age 39 | DOB 09 08 67 | | | |
| FL RES <input checked="" type="checkbox"/> Full <input type="checkbox"/> Part <input type="checkbox"/> Non <input type="checkbox"/> N/A | | Residence 5922 TEALWATER PL. LITHIA, FL. 33547 | | | | | | | INJ <input type="checkbox"/> | Res. Phone UNK | | | | | |
| | | Business NBC CHANNEL 8 | | | | | | | | Bus. Phone | | | | | |
| | | 14. Name | | | | | | VRTO | Race | Sex | Age | DOB | | | |
| FL RES <input type="checkbox"/> Full <input type="checkbox"/> Part <input type="checkbox"/> Non <input type="checkbox"/> N/A | | Residence | | | | | | | INJ <input type="checkbox"/> | Res. Phone | | | | | |
| | | Business | | | | | | | | Bus. Phone | | | | | |
| | | 15. Name | | | | | | VRTO | Race | Sex | Age | DOB | | | |
| FL RES <input type="checkbox"/> Full <input type="checkbox"/> Part <input type="checkbox"/> Non <input type="checkbox"/> N/A | | Residence | | | | | | | INJ <input type="checkbox"/> | Res. Phone | | | | | |
| | | Business | | | | | | | | Bus. Phone | | | | | |
| Arrest Date -Time | | Location of Arrest | | | | | | Charges | | | | | | | |
| | | 16. Name | | | | | | VRTO | Race | Sex | Age | DOB | | | |
| FL RES <input type="checkbox"/> Full <input type="checkbox"/> Part <input type="checkbox"/> Non <input type="checkbox"/> N/A | | Residence | | | | | | | INJ <input type="checkbox"/> | Res. Phone | | | | | |
| | | Business | | | | | | | | Bus. Phone | | | | | |
| Arrest Date -Time | | Location of Arrest | | | | | | Charges | | | | | | | |
| Reporting Officer DEP. R. WILSON | | PID 4223 | SQ 410 | Dist 4 | Editing Supervisor CPL T. LARSON | | PID 1838 | SQ 410 | Dist 4 | | | | | | |
| 20. <input type="checkbox"/> D1 <input type="checkbox"/> D3 <input checked="" type="checkbox"/> Person <input type="checkbox"/> Vice | | <input type="checkbox"/> Auto Theft | <input type="checkbox"/> Crime Analysis | <input type="checkbox"/> HRS | Date 04/05/07 | | <input type="checkbox"/> D2 <input type="checkbox"/> D4 <input type="checkbox"/> Property <input type="checkbox"/> Juvenile | <input type="checkbox"/> White Collar | <input type="checkbox"/> Reporting Officer | <input checked="" type="checkbox"/> Other | PIO | | | | |
| 21. <input checked="" type="checkbox"/> Active | | <input type="checkbox"/> Exceptionally Cleared | <input type="checkbox"/> Death of Offender | <input type="checkbox"/> Juvenile/No Custody | <input type="checkbox"/> Direct File | <input type="checkbox"/> Inactive | <input type="checkbox"/> Cleared by Arrest | <input type="checkbox"/> Extradition Declined | <input type="checkbox"/> Victim/Witness Refused to Cooperate | | | | | | |
| <input type="checkbox"/> Unfounded | | <input type="checkbox"/> Request for Prosecution | <input type="checkbox"/> Prosecution Declined | <input type="checkbox"/> Offender Charged with other Crimes | | | | | | Blotter | | | | | |

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| | | | | | |
|--|-----------|---------------------------------------|-------------|---------------------------------|---------------------|
| HILLSBOROUGH COUNTY SHERIFF'S OFFICE | | <input type="checkbox"/> Confidential | | 1. Case No. | |
| <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Supplement | | Page <u>3</u> of <u>8</u> | | 07-201904 | |
| 2-Type of Incident | | | | 8. Grid | 5. Report Date Time |
| 7. Location of Incident Scene | | | Victim Name | | |
| # | Name | VRTO | Race | Sex | Age DOB |
| FL RES <input type="checkbox"/> Full <input type="checkbox"/> Part <input type="checkbox"/> Non <input type="checkbox"/> N/A | Residence | | | INJ <input type="checkbox"/> | Res. Phone |
| | Business | | | | Bus. Phone |
| Arrest Date -Time | | Location of Arrest | | Charges | |
| # | Name | VRTO | Race | Sex | Age DOB |
| FL RES <input type="checkbox"/> Full <input type="checkbox"/> Part <input type="checkbox"/> Non <input type="checkbox"/> N/A | Residence | | | INJ <input type="checkbox"/> | Res. Phone |
| | Business | | | | Bus. Phone |
| Arrest Date -Time | | Location of Arrest | | Charges | |

Crime Scene / Narrative:

FISHHAWK SUBDIVISION, 5922 TEALWATER PL. LITHIA, FL. 33547, A SINGLE STORY TAN IN COLOR PRIVATE RESIDENCE LOCATED ON THE NORTHEAST CORNER OF THE INTERSECTION OF TEALRISE WAY AND TEALWATER PL. EAST OFF OSPREY RIDGE DR.

| | | | | | | | |
|-------------------|-----|----|------|--------------------|-----|----|------|
| Reporting Officer | PID | SQ | Dist | Editing Supervisor | PID | SQ | Dist |
|-------------------|-----|----|------|--------------------|-----|----|------|

| | | | | | | | |
|---|--|--|--|--|--|--|------|
| 20. <input type="checkbox"/> D1 <input type="checkbox"/> D3 <input type="checkbox"/> Persons <input type="checkbox"/> Vice <input type="checkbox"/> Auto Theft <input type="checkbox"/> Crime Analysis <input type="checkbox"/> HRS <input type="checkbox"/> D2 <input type="checkbox"/> D4 <input type="checkbox"/> Property <input type="checkbox"/> Juvenile <input type="checkbox"/> White Collar <input type="checkbox"/> Reporting Officer <input type="checkbox"/> Other _____ | | | | | | | Date |
| 21. <input type="checkbox"/> Active <input type="checkbox"/> Exceptionally Cleared <input type="checkbox"/> Death of Offender <input type="checkbox"/> Juvenile/No Custody <input type="checkbox"/> Direct File <input type="checkbox"/> Inactive <input type="checkbox"/> Cleared by Arrest <input type="checkbox"/> Extradition Declined <input type="checkbox"/> Victim/Witness Refused to Cooperate <input type="checkbox"/> Unfounded <input type="checkbox"/> Request for Prosecution <input type="checkbox"/> Prosecution Declined <input type="checkbox"/> Offender Charged with other Crimes | | | | | | | |

| HILLSBOROUGH COUNTY SHERIFF'S OFFICE Narrative | | <input type="checkbox"/> Confidential Page <u>4</u> of <u>8</u> | | 1. Case No. 07-201904 | |
|--|----------|--|----------|--------------------------|--|
| <input type="checkbox"/> Property Continuation | | | | | |
| Item # | Quantity | Description (Make, Model, Type, etc.) | Serial # | Value | |
| INVESTIGATION | | | | | |
| ON 04/05/07 AT 1547 HRS, WRITER ALONG WITH SGT. C. HASSELL #2539, AND DEP. A. DANIELS #7376, | | | | | |
| RESPONDED TO THE LISTED INCIDENT SCENE. WRITER CHECKED ALL THE EXTERIOR DOORS AND | | | | | |
| WINDOWS AND DETERMINED THAT THE RESIDENCE WAS SECURE. WRITER DID NOT HEAR ANY | | | | | |
| SOUNDS FROM WITHIN THE RESIDENCE AND DID NOT SEE ANY SIGNS OF MOVEMENT INSIDE. WRITER | | | | | |
| ALSO NOTED THAT THERE WERE NO VISABLE LIGHTS ON INSIDE THE RESIDENCE. WRITER HAD THE | | | | | |
| HCSO DISTRICT IV COMMAND POSITION ATTEMPT TO TELEPHONE THE RESIDENCE FROM THE | | | | | |
| DISPATCH CENTER. WRITER WAS ADVISED THAT THERE WAS NO ANSWER INSIDE THE RESIDENCE | | | | | |
| AND THE DISPATCHER INFORMED WRITER THAT THE PHONE WENT TO THE VOICE MAIL SYSTEM. | | | | | |
| WRITER NOTED THAT THERE WAS A VEHICLE IN THE DRIVEWAY OF THE RESIDENCE AND WRITER WAS | | | | | |
| INFORMED BY SGT. HASSELL THAT HE DETERMINED THAT THE VEHICLE BELONGED TO JOHN WINTER / | | | | | |
| VI #13. SGT. HASSELL WAS INTERVIEWING A FRIEND OF THE VICTIMS WHO HAD RESPONDED TO THE | | | | | |
| SCENE, SEE SUPPLEMENTAL REPORTS. SGT HASSELL INSTRUCTED WRITER AND DEP. DANIELS TO | | | | | |
| FORCE ENTRY INTO THE RESIDENCE IN ORDER TO CHECK ON THE WELL BEING OF JOHN WINTER. | | | | | |
| DEP. DANIELS KICKED THE FRONT DOOR IN AT WHICH TIME WRITER HEARD ONE GUNSHOT FROM | | | | | |
| INSIDE THE RESIDENCE. WRITER ALONG WITH DEP. DANIELS AND SGT. HASSELL ENTERED THE | | | | | |
| RESIDENCE AND CLEARED IT AT WHICH TIME JOHN WINTER WAS LOCATED IN THE GARAGE AREA. AS | | | | | |
| WRITER ENTERED THE GARAGE WRITER OBSERVED THAT JOHN WINTER WAS SITTING UP WITH A | | | | | |
| PISTOL LYING IN HIS LAP WITH HIS RIGHT HAND PARTIALLY ON THE FIREARM. WRITER ALSO NOTED | | | | | |
| THAT JOHN WINTER HAD SUFFERED AN APPARENT GUNSHOT WOUND TO HIS RIGHT TEMPEL AREA. | | | | | |
| WRITER SECURED THE FIREARM BY REMOVING IT FROM JOHN WINTER'S HAND AND PLACING ON THE | | | | | |
| FLOOR AWAY FROM THE BODY. WRITER REQUESTED EMS RESPOND TO THE SCENE AND HCFR | | | | | |

| | | | | | |
|--|-----------|---------------------------------------|-------------|---------------------------------|---------------------|
| HILLSBOROUGH COUNTY SHERIFF'S OFFICE | | <input type="checkbox"/> Confidential | | 1. Case No. | |
| <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Supplement | | Page <u>5</u> of <u>8</u> | | 07-201904 | |
| 2-Type of Incident | | | | 8. Grid | 5. Report Date Time |
| 7. Location of Incident Scene | | | Victim Name | | |
| # | Name | VRTO | Race | Sex | Age DOB |
| FL RES <input type="checkbox"/> Full <input type="checkbox"/> Part <input type="checkbox"/> Non <input type="checkbox"/> N/A | Residence | | | INJ <input type="checkbox"/> | Res. Phone |
| | Business | | | | Bus. Phone |
| Arrest Date -Time | | Location of Arrest | | Charges | |
| # | Name | VRTO | Race | Sex | Age DOB |
| FL RES <input type="checkbox"/> Full <input type="checkbox"/> Part <input type="checkbox"/> Non <input type="checkbox"/> N/A | Residence | | | INJ <input type="checkbox"/> | Res. Phone |
| | Business | | | | Bus. Phone |
| Arrest Date -Time | | Location of Arrest | | Charges | |

Crime Scene / Narrative:

RESCUE #27, RESPONDED AND PRONOUNCED JOHN WINTER AS DECEASED. WRITER OBTAINED A COPY OF THE EMS RUN SHEET AND SUPPLIED IT TO THE MEDICAL EXAMINER INVESTIGATOR UPON HER ARRIVAL AT THE SCENE. WRITER THEN ASSISTED WITH SECURING THE SCENE UNTIL HOMICIDE DET. L. CROISSANT #3417, CRIME SCENE DET. C. SACKMAN #437 AND MEO INVESTIGATOR AMANDA WHIDDEN RESPONDED AND PROCESSED THE SCENE. WRITER COMPLETED A MEDICAL EXAMINERS REPORT AND GAVE A COPY OF THE FORM TO AMANDA WHIDDEN. THE VICTIM WAS REMOVED FROM THE SCENE BY THE MEDICAL EXAMINERS TRANSPORT SERVICE. ONCE THE SCENE WAS PROCESSED IT WAS RELEASED TO THE VICTIMS WIFE, SEE SUPPLEMENTAL REPORT. THIS CONCLUDES WRITERS PORTION OF THIS INVESTIGATION.

| | | | | | | | |
|-------------------|-----|----|------|--------------------|-----|----|------|
| Reporting Officer | PID | SQ | Dist | Editing Supervisor | PID | SQ | Dist |
|-------------------|-----|----|------|--------------------|-----|----|------|

| | | | | | | | |
|---|--|--|--|--|--|--|------|
| 20. <input type="checkbox"/> D1 <input type="checkbox"/> D3 <input type="checkbox"/> Persons <input type="checkbox"/> Vice <input type="checkbox"/> Auto Theft <input type="checkbox"/> Crime Analysis <input type="checkbox"/> HRS <input type="checkbox"/> D2 <input type="checkbox"/> D4 <input type="checkbox"/> Property <input type="checkbox"/> Juvenile <input type="checkbox"/> White Collar <input type="checkbox"/> Reporting Officer <input type="checkbox"/> Other _____ | | | | | | | Date |
| 21. <input type="checkbox"/> Active <input type="checkbox"/> Exceptionally Cleared <input type="checkbox"/> Death of Offender <input type="checkbox"/> Juvenile/No Custody <input type="checkbox"/> Direct File <input type="checkbox"/> Inactive <input type="checkbox"/> Cleared by Arrest <input type="checkbox"/> Extradition Declined <input type="checkbox"/> Victim/Witness Refused to Cooperate <input type="checkbox"/> Unfounded <input type="checkbox"/> Request for Prosecution <input type="checkbox"/> Prosecution Declined <input type="checkbox"/> Offender Charged with other Crimes | | | | | | | |

PAGE 7 OF 8 PAGES

HILLSBOROUGH COUNTY MEDICAL EXAMINER DEPARTMENT

401 South Morgan St., Tampa, FL 33601
Ph: (813) 272-6377 Fax: (813) 272-6268

07-201904
DEATH INVESTIGATION
Page 1
(Revised: 12-11-00)

| | | |
|---|---|---|
| Law Enforcement Information | Agency: <input checked="" type="checkbox"/> HCSO <input type="checkbox"/> TPD <input type="checkbox"/> FHP <input type="checkbox"/> TTPD <input type="checkbox"/> PCPD <input type="checkbox"/> USFPD <input type="checkbox"/> TIAPD <input type="checkbox"/> FMP <input type="checkbox"/> OSI <input type="checkbox"/> Other: | Agency Report Number: 07-201904 |
| Lead Investigator: Name: DET. L. CROISSANT | District: SOD ID #: 3917 | Contact Ph #: 247-8661 |

| Action | Date | Time | Remarks | EMS Responded to Scene? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
|--|-----------------|-------------|--|---|
| MEO Notified <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | 04/05/07 | 1612 | AMANDA WHITEHEAD | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Pathologist @ Scene? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | Police Photos? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | ** If yes, attach EMS run sheet |

| | | |
|-----------------------------|---|-----------------------------------|
| Decedent Information | Name: (L, F, M) WINTER, JOHN DAVID | Age / Race / Sex: 39' W' M |
| Address: | 5922 TEALWATER PL. LITHIA, FL. 33547 | |
| DOB: 04/08/67 | SS#: [REDACTED] | Occupation: [REDACTED] |
| | <input type="checkbox"/> Never Married <input type="checkbox"/> Divorced <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Unk | |

| | |
|-----------------------------|--|
| Body Location | Address: 5922 TEALWATER PL. LITHIA FL. 33547 |
| Decedent identification by: | <input type="checkbox"/> Family at scene, Who? <input type="checkbox"/> Driver's License or ID Card <input checked="" type="checkbox"/> Other: WORK ID |

| | | |
|--|----------------------------|---------------------------|
| Next Of Kin Information | Name: WINTER, KAREN | Relationship: WIFE |
| Notified of Death: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Address: [REDACTED] | Telephone #: UNK |
| Notified Body @ MEO: <input type="checkbox"/> Yes <input type="checkbox"/> No | [REDACTED] | |

| | | |
|---------------------------------|--|--------------------------|
| Body Found By: | Name: DET. K. WILSON 4223 | Relationship: N/A |
| Telephone # 813-247-0455 | Address: 508 3380 ST. SE. RUSKIN, FL. 33570 | |

| | |
|---------------------------------|---|
| Apparent Manner of Death | <input type="checkbox"/> Natural <input type="checkbox"/> Homicide <input checked="" type="checkbox"/> Suicide <input type="checkbox"/> Undetermined <input type="checkbox"/> Accident |
| | <input type="checkbox"/> Traffic-Crash <input type="checkbox"/> Hit and Run <input checked="" type="checkbox"/> Found Dead <input type="checkbox"/> Witnessed Death |

| | | |
|--|--|---|
| Date/Time of Death: 04/05/07 - 1618 | Last Known Alive Date/Time: 04/05/07 - 1550 | Last Known Alive By: FONTAINE, ROBERT W. |
|--|--|---|

| | | | |
|---|---|---|---|
| Expected Death? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | History of Falls/Injuries (Old or Recent): Y/N | Long term effects of injury: Y/N | Alcohol/Drug/Tobacco Use: Y/N (Circle Item(s)) |
|---|---|---|---|

| | |
|--|--|
| Injury/Crash Specifics: 04/05/07 1607 | Description of Loc (Woods, Residence, etc.): RESIDENTIAL GARAGE |
|--|--|

| |
|--|
| Location of Injury? (Address): 5922 TEALWATER PL. LITHIA, FL. 33547 |
|--|

| | |
|--|---|
| History of Diseases and Operations: UNK | Prescription/Non-prescription drugs: UNK |
|--|---|

| | |
|---|---|
| Personal Physician Name/Ph: UNK | Sign DC?: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Cause of Death personal physician will list on DC: N/A | |

BODY SPECIFICS

| | | |
|---|--|---|
| Position of Body: | Signs of Decomposition: | Signs of Death: |
| <input type="checkbox"/> Lying on Side Left / Right <input type="checkbox"/> Lying on Back <input type="checkbox"/> Lying on Stomach <input checked="" type="checkbox"/> Seated <input type="checkbox"/> Other: | Y/N Odor Y/N Skin Slippage / Blisters Y/N Discoloration Black / Green / Marbling Y/N Insect Activity: Flies / Fly Eggs / Maggots / Other: | Y/N Muscles Stiff (Rigor Mortis) Y/N Pooling of Blood in Body (Lividity) Y/N Other (Blood, Vomit, Feces, Foaming at mouth, Insect/Pet activity) Temperature of Torso to Touch: <input checked="" type="checkbox"/> Warm <input type="checkbox"/> Cool |

SCENE SPECIFICS

| | |
|---|--|
| <input type="checkbox"/> Weapon(s): PISTOL | Type/Location: .45 CAL 5922 TEALWATER PL. LITHIA, FL. 33547 |
| <input type="checkbox"/> Luggage | Type/Location: |
| <input type="checkbox"/> Drug paraphernalia | Type/Location: |
| <input type="checkbox"/> Other: | Type/Location: |

PAGE 8 OF 8 PAGES 07-201904

HILLSBOROUGH COUNTY MEDICAL EXAMINER DEPARTMENT

DEATH INVESTIGATION

401 South Morgan St., Tampa, FL 33601
Ph: (813) 272-6377 Fax: (813) 272-6268

Page 2
(Revised: 12-11-00)

Decedent's Name: WINTER JOHN D. Agency Report Number: 07-201904

DESCRIPTION OF CIRCUMSTANCES: (Include how the incident or crash is thought to have occurred, decedent's activity at the time of the incident or crash, the type of place, and the sequence of events). If extra pages are used, indicate number here:

THE DECEDENT WAS FOUND SITTING ON THE FLOOR WITHIN THE ENCLOSED GARAGE WITH A PISTOL IN HIS HAND. THE DECEDENT HAD AN APPARENT SELF INFLICTED GUN SHOT WOUND TO HIS RIGHT TEMPLE. AREA. THE PISTOL WAS IN THE DECEDENT'S RIGHT HAND AND WAS LYING IN THE DECEDENT'S LAP.

TRAFFIC CRASHES ONLY

| Decedent Information | Decedent's Vehicle Type | Collision Information (Object Struck by Decedent's Vehicle) |
|--|---|--|
| <input type="checkbox"/> Operator <input type="checkbox"/> Passenger <input type="checkbox"/> Occupant not otherwise specified <input type="checkbox"/> Pedestrian <input type="checkbox"/> Pedal cyclist <input type="checkbox"/> Other Restrainted: <input type="checkbox"/> Yes <input type="checkbox"/> No Air Bag: <input type="checkbox"/> Yes <input type="checkbox"/> No Deployed?: <input type="checkbox"/> Yes <input type="checkbox"/> No Ejected?: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Partial Helmet/Eye protection: <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Automotive <input type="checkbox"/> SUV <input type="checkbox"/> Pickup Truck <input type="checkbox"/> Truck <input type="checkbox"/> Tractor-trailer <input type="checkbox"/> Bicycle <input type="checkbox"/> Tricycle <input type="checkbox"/> Motorcycle <input type="checkbox"/> None (Pedestrian) <input type="checkbox"/> Other: | <input type="checkbox"/> Rollover Only <input type="checkbox"/> Pole <input type="checkbox"/> Tree <input type="checkbox"/> Abutment <input type="checkbox"/> Truck <input type="checkbox"/> Tractor Trailer <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other: Direction of Collision (Decedent Vehicle Perspective) <input type="checkbox"/> Head on <input type="checkbox"/> Rear-end <input type="checkbox"/> T-bone <input type="checkbox"/> Drivers <input type="checkbox"/> Passenger Side <input type="checkbox"/> Front Quarter <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Rear Quarter <input type="checkbox"/> Left <input type="checkbox"/> Right |
| Roadway: <input type="checkbox"/> Asphalt <input type="checkbox"/> Concrete <input type="checkbox"/> Dirt <input type="checkbox"/> Gravel <input type="checkbox"/> Grass <input type="checkbox"/> Other: | | |
| Condition of Roadway (at time of incident) <input type="checkbox"/> Wet <input type="checkbox"/> Dry <input type="checkbox"/> New <input type="checkbox"/> Worn <input type="checkbox"/> Other | | |
| Lighting Conditions (at time of incident) <input type="checkbox"/> Daylight <input type="checkbox"/> Darkness <input type="checkbox"/> Dusk <input type="checkbox"/> Dawn <input type="checkbox"/> Streetlights <input type="checkbox"/> Other: | | |
| Type of Highway <input type="checkbox"/> Two Lane <input type="checkbox"/> Multiple Lane Divided <input type="checkbox"/> Multiple Lane not-divided <input type="checkbox"/> Other: | | |
| Other Circumstances: Skid Marks from Decedent's Vehicle? <input type="checkbox"/> Yes <input type="checkbox"/> No Suspected Heart Attack at Wheel? <input type="checkbox"/> Yes <input type="checkbox"/> No Suspicious circumstances? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Suspected Suicide? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes to any explain: | | |
| Law Enforcement Request the Following to be Retained as Evidence: <input type="checkbox"/> Clothing <input type="checkbox"/> Hair <input type="checkbox"/> Blood <input type="checkbox"/> Fingernails <input type="checkbox"/> Debris from Body Bag | | |
| Impairments suspected Alcohol Suspected? <input type="checkbox"/> Yes <input type="checkbox"/> No Drugs? <input type="checkbox"/> Yes <input type="checkbox"/> No Open Containers? <input type="checkbox"/> Yes <input type="checkbox"/> No Type of Drug Suspected: | | |
| Decedent's Vehicle: Year Make Model Color | | |
| Other Vehicle Year Make Model Color | | |
| Other Vehicle Year Make Model Color | | |
| Other Vehicle Year Make Model Color | | |

| | | | | | | | | | |
|---|------------|---|------|-----------------------------|--------------------------------|--------------------------------------|--------------|-----|------|
| HILLSBOROUGH COUNTY SHERIFFS OFFICE <input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Supplement | | <input type="checkbox"/> Confidential Page <u>1</u> of <u>2</u> | | | 1. Case No. 07-201904 | | | | |
| 2-Type of Incident DEATH INVESTIGATION | | | | 8. Grid 6762 | 5. Report Date 04 05 07 | | Time 1530 | | |
| 7. Location of Incident Scene 5922 TEALWATER PL. LITHIA, FL 33547 | | | | Victim Name WINTER, JOHN | | | | | |
| FI | # | Name | VRTO | Race | Sex | Age | DOB | | |
| | 24 | FONTAINE, ROBERT WAKEKAM | 01 | W | M | 42 | 10 22 64 | | |
| FL RES | Residence | | | INJ | Res. Phone | | | | |
| <input checked="" type="checkbox"/> Full | [REDACTED] | | | <input type="checkbox"/> | [REDACTED] | | | | |
| <input type="checkbox"/> Part | Business | | | Bus. Phone | | | | | |
| <input type="checkbox"/> Non | N/A | | | N/A | | | | | |
| <input type="checkbox"/> N/A | | | | | | | | | |
| Arrest Date - Time | | Location of Arrest | | Charges | | | | | |
| N/A | | | | | | | | | |
| FI | # | Name | VRTO | Race | Sex | Age | DOB | | |
| | | | | | | | | | |
| FL RES | Residence | | | INJ | Res. Phone | | | | |
| <input type="checkbox"/> Full | | | | <input type="checkbox"/> | | | | | |
| <input type="checkbox"/> Part | Business | | | Bus. Phone | | | | | |
| <input type="checkbox"/> Non | | | | | | | | | |
| <input type="checkbox"/> N/A | | | | | | | | | |
| Arrest Date - Time | | Location of Arrest | | Charges | | | | | |
| | | | | | | | | | |
| Crime Scene / Narrative: INVESTIGATION: | | | | | | | | | |
| ON 04/05/07 AT APPROXIMATELY 1548HRS I ARRIVED TO ASSIST SGT HASSELL #2539 AND | | | | | | | | | |
| DEP. WILSON #4223. AFTER ATTEMPTING TO CONTACT VI#13 JOHN WINTER A LONG TIME | | | | | | | | | |
| FRIEND FI#24 ROBERT FONTAINE ARRIVED AT THE SCENE. I INTERVIEWED HIM. HE ATTEMPTED | | | | | | | | | |
| TO CONTACT JOHN WINTER. I WAS ADVISED THAT JOHN WINTER WAS LAST TALKED TO AT | | | | | | | | | |
| APPROXIMATELY 1540HRS. SGT. HASSELL #2539 INSTRUCTED US TO MAKE FORCED ENTRY. I | | | | | | | | | |
| KICKED THE DOOR TWO TIMES AND WAS UNSUCCESSFUL. I KICKED THE DOOR A THIRD TIME | | | | | | | | | |
| AND THE DOOR CAME OPEN. AS THE DOOR OPENED I HEARD A DISTINCT GUNSHOT FROM THE | | | | | | | | | |
| NORTH SIDE OF THE RESIDENCE. WE CLEARED THE RESIDENCE TO THE GARAGE AND | | | | | | | | | |
| OBSERVED JOHN WINTER. WE FURTHER CLEARED THE RESIDENCE MAKING SURE NO ONE WAS | | | | | | | | | |
| IN THE HOUSE. I RE-INTERVIEWED ROBERT FONTAINE. I TOOK CONTROL OF THE PERIMETER | | | | | | | | | |
| OF THE CRIME SCENE AFTER PUTTING UP CRIME SCENE TAPE. HCFR RESCUE 27 GARY | | | | | | | | | |
| Reporting Officer | | PID | SQ | Dist | Editing Supervisor | | PID | SQ | Dist |
| DEPUTY ADAM DANIELS | | 7376 | 410 | 4 | CPL T. LARSON | | 1238 | 410 | Y |
| 20. <input type="checkbox"/> D1 <input type="checkbox"/> D3 <input checked="" type="checkbox"/> Persons <input type="checkbox"/> Vice | | <input type="checkbox"/> Auto Theft <input type="checkbox"/> Crime Analysis <input type="checkbox"/> HRS | | | | Date | | | |
| <input type="checkbox"/> D2 <input type="checkbox"/> D4 <input type="checkbox"/> Property <input type="checkbox"/> Juvenile | | <input type="checkbox"/> White Collar <input type="checkbox"/> Reporting Officer <input type="checkbox"/> Other | | | | 04/05/07 | | | |
| 21. <input checked="" type="checkbox"/> Active <input type="checkbox"/> Exceptionally Cleared | | <input type="checkbox"/> Death of Offender <input type="checkbox"/> Juvenile/No Custody | | | | <input type="checkbox"/> Direct File | | | |
| <input type="checkbox"/> Inactive <input type="checkbox"/> Cleared by Arrest | | <input type="checkbox"/> Extradition Declined <input type="checkbox"/> Victim/Witness Refused to Cooperate | | | | | | | |
| <input type="checkbox"/> Unfounded <input type="checkbox"/> Request for Prosecution | | <input type="checkbox"/> Prosecution Declined <input type="checkbox"/> Offender Charged with other Crimes | | | | | | | |

HILLSBOROUGH COUNTY SHERIFFS OFFICE

 Confidential

1. Case No.

Narrative

Page 2 of 2

07-201904

 Property Continuation

| Item # | Quantity | Description (Make, Model, Type, etc.) | Serial # | Value |
|--------|----------|---------------------------------------|----------|-------|
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INVESTIGATION CONTINUED:

BRADLEY AND GARRY FLOYD ENTERED THE SCENE AT 1620HRS. SGT. ESCOBIO #223 ENTERED THE SCENE AT 1637HRS AND CRIME SCENE DEP. SACKMAN #437 ENTERED THE SCENE AT 1753HRS. SGT. WILLETTE #14 ARRIVED AT THE SCENE AT 1844HRS AND TOOK CONTROL OF THE SCENE. HE ADVISED NOT TO CONTINUE THE CRIME SCENE LOG. THE BALANCE OF MY INVESTIGATION IS LIMITED TO MY INTERVIEWS.

INTERVIEWS:

1) W/M, ROBERT FONTAINE, FI#24 RELATED THE FOLLOWING UPON HIS ARRIVAL. HE SAID THAT HE LAST TALKED TO JOHN ABOUT 20 MINUTES BEFORE HE ARRIVED AT HIS HOUSE. HE SAID THAT HE WOULD NOT PICK UP AFTER THAT. HE SAID THAT JOHN ADVISED HE WAS GOING TO END IT ALL. HE SAID THAT JOHN DID OWN A GUN BUT DID NOT KNOW WHAT TYPE. HE SAID JOHN SHOULD BE HOME. HE SAID HE CAME BECAUSE HE WAS WORRIED ABOUT JOHN.

SECOND INTERVIEW: HE SAID THAT JOHN TOLD HIM AND JOHN'S WIFE TODAY THAT HE HAD BEEN HAVING AN AFFAIR. HE SAID THAT HE HAS BEEN FRIENDS WITH JOHN FOR 14 YEARS. HE SAID THAT JOHN ADVISED HE WAS GONNA END IT ALL. HE SAID THAT JOHN FELT HE WAS AN EMBARESSMENT AND THAT HIS WIFE WOULD NOT FORGIVE HIM. HE SAID THAT BEFORE JOHN HUNG UP WITH HIM (ABOUT 20 MINS PRIOR TO HIS ARRIVAL) JOHN ADVISED THAT THE POLICE WERE THERE AND THAT HE HAD TO GO.

| | | | | | | | | | | |
|--|--|--|--|--------------------------------------|--------------------------------|--------------------|--------------|--------------|-----|------|
| HILLSBOROUGH COUNTY SHERIFFS OFFICE <input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Supplement | | <input type="checkbox"/> Confidential Page <u>1</u> of <u>2</u> | | | 1. Case No. 07-201904 | | | | | |
| 2-Type of Incident DEATH INVESTIGATION | | | | 8. Grid 6762 | 5. Report Date 04 05 07 | | Time 1631 | | | |
| 7. Location of Incident Scene 5922 TEALWATER PL. LITHIA, FL. 33547 | | | | Victim Name JOHN DAVID WINTER | | | | | | |
| FI | # | Name | | VRTO | Race | Sex | Age | DOB | | |
| | 22 | WINTER, KAREN | | 01 | W | F | 35 | 10 08 71 | | |
| FL RES | Residence | | | NJ | Res.Phone | | | | | |
| <input checked="" type="checkbox"/> Full | | | | <input type="checkbox"/> | | | | | | |
| <input type="checkbox"/> Part | Business | TOBACCO DEPOT | | Bus.Phone | | | | | | |
| <input type="checkbox"/> Non | | | | | | | | | | |
| <input type="checkbox"/> N/A | | | | | | | | | | |
| Arrest Date - Time | | Location of Arrest | | Charges | | | | | | |
| N/A | | N/A | | N/A | | | | | | |
| N/A | # | Name | | VRTO | Race | Sex | Age | DOB | | |
| | | | | | | | | | | |
| FL RES | Residence | | | NJ | Res.Phone | | | | | |
| <input type="checkbox"/> Full | | | | <input type="checkbox"/> | | | | | | |
| <input type="checkbox"/> Part | Business | | | Bus.Phone | | | | | | |
| <input type="checkbox"/> Non | | | | | | | | | | |
| <input type="checkbox"/> N/A | | | | | | | | | | |
| Arrest Date - Time | | Location of Arrest | | Charges | | | | | | |
| N/A | | N/A | | N/A | | | | | | |
| Crime Scene / Narrative: | | | | | | | | | | |
| ON 04-05-07 AT 1631HRS WRITER RESPONDED TO 5922 TEALWATER PL. LITHIA, FL. 33547 IN REFERENCE TO A SUICIDE ATTEMPT AND TO ASSIST THE ON SCENE OFFICERS. UPON ARRIVAL, WRITER OBSERVED OTHER HCSO DEPUTIES ON SCENE AND WRITER MADE CONTACT WITH SGT C. HASSELL #2539. WRITER WAS INSTRUCTED BY SGT HASSELL TO MAKE CONTACT WITH FI #22 W/F KAREN WINTER, THE DECEDENTS WIFE AND TO NOTIFY HER OF THE DEATH OF HER HUSBAND, JOHN WINTER. WRITER RESPONDED TO [REDACTED] TO MAKE CONTACT WITH KAREN WINTER. UPON ARRIVAL, WRITER MADE CONTACT WITH KAREN WINTER AND WRITER INFORMED HER OF HER HUSBAND'S DEATH. WRITER COMPLETED A CONSENT TO SEARCH FORM, EXPLAINED THE FORM TO KAREN WINTER AND OBTAINED HER SIGNATURE ON THE CONSENT TO SEARCH FORM. WRITER THEN RETURNED TO THE INCIDENT SCENE AND AWAITED THE ARRIVAL OF KAREN WINTER AND HER FAMILY. WRITER HAS NO FURTHER INFORMATION. | | | | | | | | | | |
| Reporting Officer | | | PID | SQ | Dist | Editing Supervisor | | PID | SQ | Dist |
| DEPUTY T.J. HENDERSON | | | 771 7393 | 410 | 4 | CPL T. LARSEN | | 1838 | 410 | 4 |
| 20. <input type="checkbox"/> D1 <input type="checkbox"/> D3 <input checked="" type="checkbox"/> Persons <input type="checkbox"/> Vice <input type="checkbox"/> Auto Theft <input type="checkbox"/> Crime Analysis <input type="checkbox"/> HRS <input type="checkbox"/> D2 <input type="checkbox"/> D4 <input type="checkbox"/> Property <input type="checkbox"/> Juvenile <input type="checkbox"/> White Collar <input type="checkbox"/> Reporting Officer <input type="checkbox"/> Other | | | | | | | | Date | | |
| | | | | | | | | 04/05/07 | | |
| 21. <input checked="" type="checkbox"/> Active | <input type="checkbox"/> Exceptionally Cleared | <input type="checkbox"/> Death of Offender | <input type="checkbox"/> Juvenile/No Custody | <input type="checkbox"/> Direct File | | | | | | |
| <input type="checkbox"/> Inactive | <input type="checkbox"/> Cleared by Arrest | <input type="checkbox"/> Extrajiction Declined | <input type="checkbox"/> Victim/Witness Refused to Cooperate | | | | | | | |
| <input type="checkbox"/> Unfounded | <input type="checkbox"/> Request for Prosecution | <input type="checkbox"/> Prosecution Declined | <input type="checkbox"/> Offender Charged with other Crimes | | | | | | | |

HILLSBOROUGH COUNTY SHERIFF'S OFFICE
WAIVERS/AFFIDAVITS

Page 2 of 2

1. Case No.
07-201904

2. Type Of Incident DEATH INVESTIGATION

I, (Name of person Signing): KAREN WENTER the undersigned

REQUEST FOR NON-LAW ENFORCEMENT ASSISTANCE

I, , hereby request assistance from a Deputy Sheriff in a matter not related to law enforcement activity. I understand that said Deputy Sheriff is not a qualified service technician. I will not hold the Hillsborough County Sheriff's Office responsible for any damage arising out of the assistance provided. I am the owner, or I am authorized to act in behalf of the owner, of the vehicle or property for which I am requesting assistance.

CONSENT TO BE INTERVIEWED

I, , do hereby consent to being interviewed by the below listed Hillsborough County Sheriff's Office Law Enforcement Official concerning the above listed incident/offense and I further understand that:
1) I have the right to remain silent and can invoke this right at any time during questioning;
2) If I do make a statement, it can and will be used against me in a court of law;
3) I have the right to the presence of an attorney during questioning;
4) If I cannot afford an attorney, one will be appointed to me without charge before any questioning if that is my desire;
5) If I wish to make any statement, I may invoke my right to an attorney or to remain silent at any time during the questioning.
I understand these rights and no one has threatened, coerced or promised me anything in order to induce me to make a statement. I presently wish to make a statement and/or answer questions without an attorney being present.

CONSENT TO SEARCH/WAIVER OF SEARCH WARRANT

I, , do hereby consent that the premises/vehicle located at 5922 TEALWATER PL LITTLE ROCK, AR 72214 may be searched by any Hillsborough County Sheriff's Office Law Enforcement Official. This consent extends to the main building and any enclosures found on the property. I further agree that anything or any article that may be found in the search of the premises/vehicle may be used at trial in any manner of which I may stand accused. I fully understand my constitutional rights in regard to the search and it is my intention to fully and completely waive such rights by this consent. I give this consent freely and voluntarily, without compulsion or threat of any kind.

CONSENT TO SEARCH/WAIVER OF SEARCH WARRANT FOR ORAL SWAB/DNA

I, , do hereby consent that the below listed Hillsborough County Sheriff's Office collect a mouth swab specimen from me for investigative purposes. I have been fully informed that this specimen will be analyzed and compared as evidence, and I further agree that this evidence can and will be used at trial in any matter of which I may stand accused. I have been fully informed and I agree that the results of any DNA analysis may be entered into a DNA database. I fully understand my constitutional rights in regard to this search and it is my intention to fully and completely waive such rights by this consent. I give this consent freely and voluntarily, without compulsion or threat of any kind.

WAIVER OF PROSECUTION

I, , request not to prosecute by the HILLSBOROUGH COUNTY SHERIFF'S OFFICE regarding my complaint. I am satisfied with the manner in which the investigation was conducted and release the Sheriff's Office of any responsibility regarding this complaint. I request that any further investigation not be pursued.

Signed this 5th Day of APRIL 2007, at 1832 hours
Subject: Karen Wenter Witness: _____
Deputy: J. Anderson 7393 Witness: _____

Sheriff's Office**Hillsborough County, Florida**

SUPPLEMENTAL INVESTIGATION 24 April 07 Case No: 07-201904 Page 1 of 5

REPORTING OFFICER

NAME: Croissant, L. **DIV:** CID **BUR:** MCB
PID #: 3417 **GRID:** 6762

OFFENSE INFORMATION

Original Offense: Death Investigation
Offense Changed to: Suicide
Date of Occurrence: 05 April 07
Address of Occurrence: 5922 Tealwater Place, Lithia FL 33547

VICTIM(S) INFORMATION

Name: Winter, John David **W/M/39** **DOB:** 09/08/67
Address: 5922 Tealwater Place, Lithia FL 33547
Phone: [REDACTED]
Bus Address: [REDACTED]
Bus Phone: [REDACTED]
Bus Address: [REDACTED]
Bus Phone: Unknown
Condition: Deceased

INTERVIEW(S):

Name: Fontaine, Robert Wakekam Jr. **W/M/42** **DOB:** 10/22/64
Address: [REDACTED]
Phone: [REDACTED]
Bus Address: [REDACTED]
Bus Phone: [REDACTED]
Bus Address: [REDACTED]
Bus Phone: [REDACTED]
Date/Time Interview: 05 April 07/1800 hours
Location of Interview: 5922 Tealwater Place, Lithia FL 33547
Synopsis of Interview: Mr. Fontaine stated he has known John Winter since he came to work at Channel 8, which has been approximately 14-15 years. In that time, they have become very close friends and business partners in another business called Big U Productions, which is a promotions company. He, Bobby, has become suspicious of John's relationship with a female employee that came to work for Big U approximately 2-3 years ago. He is open with John and others about his personal feelings on adultery, because his ex-wife cheated on him. He has not specifically asked or confronted John with his suspicions and John had never admitted any relationship, however, they have recently had conversations about letting this individual go. Today he received a call from John, around 2:00-2:30 p.m., where John advised him that he had something to tell him. He advised John if it was about the relationship with the female employee, he didn't need to know, however, John told him that he had admitted to Karen, John's wife, about the relationship.

Sheriff's Office**Hillsborough County, Florida**

SUPPLEMENTAL INVESTIGATION 24 April 07 Case No: 07-201904 Page 2 of 5

A few minutes after he hung up from the call he (Bobby) received a call from Teresa Brunton, an employee with Big U Productions, advising that she had just hung up with John and that he sounded suicidal. When he got off the phone, he had decided that he was going to go to John's house. Around 3:15 p.m., he got another call from John and then a call from Karen, who was at work. Karen asked Bobby to go to the house also. As he was driving he got another from John asking to do a 3-way call with he and Karen. During the conversation, John stated he wanted to end it all and that if it was good enough for Bop-bop, it was good enough for him. Bobby and Karen tried to talk him out of it and told him that they could get through this. However, approximately 5-10 minutes before getting to John's house, John said to him on the phone, "I have to go, the police are here", and hung up the phone. He stated that John's grandfather, whom he was referring to a Bop-bop, had committed suicide approximately a year and a half ago also, and that was a concern as Mr. Fontaine's relative had just recently committed suicide also, so John knew Mr. Fontaine's feelings on suicide and that's why he was trying to talk him out of it. He said that once he got to the residence, the deputies were there and had not entered the residence. He tried to call John again on his cell phone, but no answer and the deputies made entry and that's when he heard what he thought was a gun going off.

Name: Brunton, Teresa W/F/40 DOB: 03/04/65

Address: [REDACTED]

Phone: [REDACTED]

Bus Address: [REDACTED]

Bus Phone: Unknown

Date/Time Interview: 06 Apr 07/1500 hours

Location of Interview: [REDACTED]

Synopsis of Interview: Teresa stated that she is the one that called 911 and was transferred to the Hillsborough County Sheriff's Office. She advised that the reason she called was that during a conversation with John on Thursday, 05 April 07, John advised that he wanted to end it all. He has made comments for some time that he wouldn't live past the next couple of years, which disturbed her, but everyone appeared not to take John seriously. She, however, had spoken to John because of his actions and what she thought was a spiral down and he had advised her that he sought counseling and was taking medications. She is not sure now that if that is the case because John had been caught in so many lies recently. During one conversation that day on 05 April 07, John told her not to worry that his wife had taken the gun. In the conversation that alarmed her though, John told her that he had told Karen everything and that he wanted to end it all. Since she was not sure about him having any weapons, she wanted someone to check his welfare, as she was all the way in Pinellas and that his friend and business partner, Bobby, would be driving from Temple Terrace. She advised that John spoke to her one last time and she believed that the officers may have been at the house already at that time. John told her that he had lied about the gun and that he had it and that all of this was her fault. She advised that was the last time she spoke to him. She advised at first she felt responsible because John was threatening her on the phone that if she told anyone or brought anyone to the residence, he would end it. But she feels that if she did not do something, that he would have harmed himself anyway, so she feels that she made the right decision she thought was best at the time.

Sheriff's Office**Hillsborough County, Florida****SUPPLEMENTAL INVESTIGATION 24 April 07 Case No: 07-201904 Page 4 of 5**

Writer noted that MEO Investigator Amanda Whidden responded to the scene and removed the victim to the MEO at approximately 1939 hours. Upon moving the victim, writer notes that Dep. Wilson noted a projectile that had exited the left side of the victim's head and was found on the floor just under the work bench on the east wall of the garage.

Writer then released the residence and personal items within the residence to Tamara and Jeff Hoyland, brother and sister-in-law, as Karen Winter was on scene, but still making notification to family via telephone.

On 06 April 07, writer responded to [REDACTED], Florida, and made contact with and interviewed Teresa Brunton, see interview.

On 24 April 07, writer received the MEO Initial Case Summary indicating that Dr. Hair had conducted an autopsy on the victim on 07 April 07, listing the cause of death as gunshot wound of head with perforation of skull and brain. The manner of death is suicide, decedent shot self with handgun. See MEO case #07-2149 for additional details.

Writer notes that the victim's remains were released to Stower's Funeral Home for disposition.

Writer requests this investigation be Exceptionally Cleared.

ATTACHMENTS: MEO Initial Case Summary
ACTION TAKEN: Further Police Action Required: No
DISPOSITION: Exceptionally Cleared
REFERRED TO: Records
wg/Cpl. F. Losat, Pid #3664, 11 May 2007

HILLSBOROUGH COUNTY
MEDICAL EXAMINER DEPARTMENT
INITIAL CASE SUMMARY

Medical Examiner Case No: 07-02149 A
Police Agency: Hillsboro Sheriff
Police Case No: 07-201904
Responding Officer:
Case Detective: Lisa Croissant

STOWERS FH.

Name of Deceased: Winter, John
(L, F M)

Age/Sex/Race: 39/M/White

D.O.B.: Sep 8, 1967 Soc. Sec.#: [REDACTED]

Address: 5922 Tealwater Place Lithia, FL 33547

Occupation: Employer:

DEATH

Place: 5922 Tealwater Place
Lithia
Date, Time: Apr 5, 2007 4:07 PM

INCIDENT

Place: 5922 Tealwater Place
Lithia Fl
Date, Time: Apr 5, 2007 4:07 PM

Next of Kin: Karen Winter, wife

Karen Winter, wife

Address: [REDACTED]

[REDACTED]

Telephone: [REDACTED]

[REDACTED]

History and Circumstances:

Terminal Event: Per Det Croissant, HCSO: 39/M friend called 911 on 04-05-07 stating dec'd was threatening suicide. HCSO responded to dec'd residence, forced entry through front door. As they were entering residence they heard a shot. Dec'd was found in the garage with a gunshot wound to his right temple area. HCFR responded, no ACLS initiated. 45 cal handgun was in dec'd lap, which deputy moved due to dec'd hand twitching. Bullet exited dec'd left side of head and was found under a shelf to dec'd left. A suicide note was found in the kitchen, an open bible on counter and grandfather's funeral notice was on weight bench in garage. Grandfather had committed suicide in 2005.

Medical History: Unknown

Meds: Sonata, Hydrocodone, Lexapro, Alprazolam

Social: Married, worked as weather reporter.

FI Whidden (scene)

5 photos and meds sent in

F.I. Amanda Whidden

Medical Examiner: Laura Hair, M.D.

Date of Autopsy: Apr 7, 2007

Cause of Death: Gunshot Wound of Head with Perforation of Skull and Brain.

CONFIRM TOXICOLOGY STATUS

Contrib Cause:

Manner of Death: Suicide (Decedent shot self with handgun)

Alcohol: No Test Run

M. E. at Scene
or Impound Lot

NO YES

| | | | | | | |
|---|------|--|------------------------------------|---------------------------------|--|-----------------------|
| HILLSBOROUGH COUNTY SHERIFF'S OFFICE <input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Supplement | | <input type="checkbox"/> Confidential Page <u>1</u> of <u>4</u> | | 1. Case No. <u>27-201904</u> | | |
| 2. Type of Incident <u>DEATH INVESTIGATION</u> | | | | 8. Grid <u>676Z</u> | 5. Report Date Time <u>04/05/07 1545</u> | |
| 7. Location of Incident Scene <u>5927 TEAWATER PL LITHIA, FL 33547</u> | | | Victim Name <u>WINTER, JOHN</u> | | | |
| # | Name | VRTO | Race | Sex | Age | DOB |
| FL RES Residence <input type="checkbox"/> Full <input type="checkbox"/> Part <input type="checkbox"/> Non <input type="checkbox"/> N/A | | | | INJ <input type="checkbox"/> | Res. Phone Bus. Phone | |
| Arrest Date - Time | | Location of Arrest | | Charges | | |
| # | Name | VRTO | Race | Sex | Age | DOB |
| FL RES Residence <input type="checkbox"/> Full <input type="checkbox"/> Part <input type="checkbox"/> Non <input type="checkbox"/> N/A | | | | INJ <input type="checkbox"/> | Res. Phone Bus. Phone | |
| Arrest Date - Time | | Location of Arrest | | Charges | | |
| Crime Scene / Narrative : | | | | | | |
| <u>INVESTIGATION:</u> I RESPONDED TO THE ABOVE LISTED LOCATION IN REFERENCE TO A POSSIBLE WELFARE CHECK ON A JOHN WINTER. THE ORIGINAL COMPLAINANT WAS ANONYMOUS AND PROVIDED NO CONTACT INFORMATION. UPON ARRIVAL AT 1545HRS, I NOTED A BLACK 4-DR CADILLAC IN THE DRIVEWAY AND THE GARAGE DOOR CLOSED. I RANG THE DOORBELL AND KNOCKED ON THE FRONT DOOR WITH NEGATIVE RESULTS. DEP. DANIELS #7376 AND DEP. WILSON #4223 ARRIVED WITHIN A FEW MINUTES. DEP. WILSON REQUESTED MCSO DISPATCH CALL THE RESIDENCE AND DEP. WILSON ADVISED ME THE ATTEMPT WENT TO THE RESIDENCE'S VOICEMAIL. THE FRONT DOOR WAS LOCKED. | | | | | | |
| Reporting Officer <u>SGT. C. HANSELL</u> | | PID <u>2539</u> | SQ. <u>410</u> | Dist <u>4</u> | Editing Supervisor <u>CPL. JEFF MESSANO</u> | |
| | | PID <u>4712</u> | SQ. <u>409</u> | Dist <u>II</u> | | Date <u>4/6/07</u> |
| 20. <input type="checkbox"/> D1 <input type="checkbox"/> D3 <input type="checkbox"/> Persons <input type="checkbox"/> Vice <input type="checkbox"/> Auto Theft <input type="checkbox"/> Crime Analysis <input type="checkbox"/> HRS <input type="checkbox"/> D2 <input checked="" type="checkbox"/> D4 <input type="checkbox"/> Property <input type="checkbox"/> Juvenile <input type="checkbox"/> White Collar <input type="checkbox"/> Reporting Officer <input checked="" type="checkbox"/> Other <u>HOMICIDE</u> | | | | | | |
| 21. <input type="checkbox"/> Active <input type="checkbox"/> Exceptionally Cleared <input type="checkbox"/> Death of Offender <input type="checkbox"/> Juvenile/No Custody <input type="checkbox"/> Direct File <input checked="" type="checkbox"/> Inactive <input type="checkbox"/> Cleared by Arrest <input type="checkbox"/> Extradition Declined <input type="checkbox"/> Victim/Witness Refused to Cooperate <input type="checkbox"/> Unfounded <input type="checkbox"/> Request for Prosecution <input type="checkbox"/> Prosecution Declined <input type="checkbox"/> Offender Charged with other Crimes | | | | | | |

HILLSBOROUGH COUNTY SHERIFF'S OFFICE
Narrative

Confidential
Page 2 of 4

1. Case No.
07 201904

Property Continuation

| Item # | Quantity | Description (Make, Model, Type, etc.) | Serial # | Value |
|--------|----------|---------------------------------------|----------|-------|
|--------|----------|---------------------------------------|----------|-------|

AT APPROXIMATELY 1600 HRS, MR. ROBERT FONTAINE ARRIVED WITH HIS WIFE AND DEP DANIELS SPOKE TO HIM.

I HAD INQUIRED OF A NEIGHBOR IF THE CAR IN THE DRIVE WAY AT 5929 TERWATER PLACE, BELONGED TO THE RESIDENCE. THE NEIGHBOR SAID IT DID AND THAT THE OWNER, JOHN WINTER, WAS EMPLOYED AT TV STATION CHANNEL 8. I WAS IN CONTACT WITH AN EMPLOYEE OF CHANNEL 8 ATTEMPTING TO OBTAIN MR. WINTER'S CELL PHONE WHEN MR. FONTAINE ARRIVED. I TERMINATED THE CALL,

HOWEVER I LEARNED FROM THE EMPLOYEE ^{WINTER} HAD NOT REPORTED TO WORK AS SCHEDULED.

DEP. DANIELS HAD INTERVIEWED MR. FONTAINE AND ADVISED ME THAT HE HAD BEEN ON THE PHONE WITH MR. WINTER BUT WINTER HAD ENDED THE CALL FIFTEEN TO TWENTY MINUTES EARLIER AND DID NOT ANSWER HIS CELL PHONE OR HOME PHONE. WHILE BEING BRIEFED BY DEP DANIELS, MR. FONTAINE STATED KAREN WINTER, JOHN WINTER'S WIFE, WAS ON HIS CELL PHONE. I SPOKE TO KAREN VIA THE PHONE AND SHE ADVISED ME THE GARAGE ACCESS CODE FOR THE EXTERNAL GARAGE KEY PAD. I ATTEMPTED NUMEROUS TIMES TO ACTIVATE THE REMOTE WITHOUT SUCCESS. I NOTED KAREN WAS AUDIBLY UPSET OVER THE PHONE. I ADVISED HER OF MY CONCERN FOR JOHN WINTER'S SAFETY AND WELL-BEING. SHE SAID IT WOULD TAKE TWENTY MINUTES OR LONGER TO RETURN

| | | | | | |
|---|----------|--|-------------|--|---------------------|
| HILLSBOROUGH COUNTY SHERIFF'S OFFICE | | <input type="checkbox"/> Confidential | | 1. Case No. | |
| <input type="checkbox"/> Continuation <input type="checkbox"/> Supplement | | Page <u>3</u> of <u>4</u> | | <u>07-201904</u> | |
| 2. Type of Incident | | | | 8. Grid | 5. Report Date Time |
| 7. Location of Incident Scene | | | Victim Name | | |
| # | Name | VRTO | Race | Sex | Age DOB |
| FL RES Residence | | | | <input type="checkbox"/> INJ | Res. Phone |
| <input type="checkbox"/> Full | | | | <input type="checkbox"/> | |
| <input type="checkbox"/> Part | Business | | | Bus. Phone | |
| <input type="checkbox"/> Non | | | | | |
| <input type="checkbox"/> N/A | | | | | |
| Arrest Date - Time | | Location of Arrest | | Charges | |
| # | Name | VRTO | Race | Sex | Age DOB |
| FL RES Residence | | | | <input type="checkbox"/> INJ | Res. Phone |
| <input type="checkbox"/> Full | | | | <input type="checkbox"/> | |
| <input type="checkbox"/> Part | Business | | | Bus. Phone | |
| <input type="checkbox"/> Non | | | | | |
| <input type="checkbox"/> N/A | | | | | |
| Arrest Date - Time | | Location of Arrest | | Charges | |
| Crime Scene / Narrative : | | | | | |
| <i>INVESTIGATION CONT:</i> | | | | | |
| <i>FROM WORK TO HER RESIDENCE. I ADVISED KAREN THAT</i> | | | | | |
| <i>PENDING ANY ADDITIONAL INFORMATION I MAY RECEIVE, I WOULD BE</i> | | | | | |
| <i>FORCING ENTRY INTO THE RESIDENCE.</i> | | | | | |
| <i>BASED ON MR. WINTER'S STATEMENTS TO MR. FONTAINE, THE</i> | | | | | |
| <i>ANIMALS COMPLAINT TO THE SHERIFF'S OFFICE, THE LACK OF</i> | | | | | |
| <i>CONTACT WITH MR. WINTER FOR OVER TWENTY MINUTES, THE</i> | | | | | |
| <i>BELIEF THAT HE WAS IN THE RESIDENCE, I BELIEVED MR. WINTER</i> | | | | | |
| <i>WAS INCAPACITATED AND NEEDED IMMEDIATE MEDICAL ASSISTANCE.</i> | | | | | |
| <i>I ORDERED DEP DANIELS TO FORCE ENTRY INTO THE RESIDENCE</i> | | | | | |
| <i>VIA THE FRONT DOOR. DEP DANIELS KICKED THE FRONT DOOR.</i> | | | | | |
| Reporting Officer | | PID | SQ | Dist | Editing Supervisor |
| | | | | | |
| 20. <input type="checkbox"/> D1 <input type="checkbox"/> D3 <input type="checkbox"/> Persons <input type="checkbox"/> Vice <input type="checkbox"/> Auto Theft <input type="checkbox"/> Crime Analysis <input type="checkbox"/> HRS | | | | | Date |
| <input type="checkbox"/> D2 <input type="checkbox"/> D4 <input type="checkbox"/> Property <input type="checkbox"/> Juvenile <input type="checkbox"/> White Collar <input type="checkbox"/> Reporting Officer <input type="checkbox"/> Other | | | | | |
| 21. <input type="checkbox"/> Active | | <input type="checkbox"/> Exceptionally Cleared | | <input type="checkbox"/> Death of Offender | |
| <input type="checkbox"/> Inactive | | <input type="checkbox"/> Cleared by Arrest | | <input type="checkbox"/> Juvenile/No Custody | |
| <input type="checkbox"/> Unfounded | | <input type="checkbox"/> Request for Prosecution | | <input type="checkbox"/> Extradition Declined | |
| | | <input type="checkbox"/> Prosecution Declined | | <input type="checkbox"/> Victim/Witness Refused to Cooperate | |
| | | | | <input type="checkbox"/> Offender Charged with other Crimes | |

07-201904

L This is a Station-to-Station message. ->

.DATE 16 APR 07 12:12:10 FROM STATION -513P MCB
00981S290001751 PROP%ERG 07005419 001 7165 02620 3BTGXC7ZGI
20070416121100053ERG FLO2900H3TDC7012 SW PI45 45
PI2007040607201904 PROP # 07005419 ITE
M # 001 AGENCY HCSO CASE # 07201904 1 S & W 45 CAL SEMI-AUTO PISTOL/MO
D# 45D6/SR# TDC7012

--NCIC--

1L01FLS1030056407

FLO2900H3

NIC/G791554801 SER/TDC7012

OCA/07201904

--FCIC ACKNOWLEDGEMENT--

ENTER ACCEPTED AS FOLLOWING RECORD

RECOVERED GUN

SERIAL NO: TDC7012

MAKE: SW

MODEL: PI45

CALIBER: 45

TYPE: PI

ENTERING MNE: S29000175

RECOVER CASE: 07201904

RECOVER AGY: FLO2900H3

NOTIFY AGY: NO NOTIFY/PUBLICLY AVAILABLE

MISC: PROP # 07005419 ITEM # 001 AGENCY HCSO CASE # 07201904

1 S & W 45 CAL SEMI-AUTO PISTOL/MOD# 45D6/SR# TDC7012

--END--

..... END REPORT

ENTRY DATE: 04/16/2007

RECOVERY DATE: 04/06/2007

PCN: G108182079

NIC: G791554801

Sheriff's Office**Hillsborough County, Florida**

SUPPLEMENTAL INVESTIGATION 10 Apr 2007 Case No: 07-201904 page 1 of 5

REPORTING OFFICER

NAME: Sackman, C DIV: Forensic Services
PID NO: 437 SEC: Crime Scene

OFFENSE INFORMATION

Original Offense: Suicide
Date of Occurrence: 05 Apr 2007
Address Of Occurrence: 5922 Tealwater Place Lithia, FL
Address Dispatched: SAA

VICTIM(S) INFORMATION

Name: Winter, John
Address: SAA

SCENE / TANGIBLE EVIDENCE

Was Scene Processed: Yes
Det / CSI Assigned: Sackman

PHOTOGRAPHS (digital)

1 information placard
2 front of house
3 address on front of house
4 overall front door
5 damage to front door and lock
6-14 overalls of exterior windows of house
15 overall of rear patio area
16-18 overalls of exterior windows of house
19 overall of Cadillac, tag # IAC 339
20 close-up of exterior garage door opener
21 overall of garage door
22 damage to front door lock
23-24 overalls of foyer
25-30 overalls of office area
31-33 overalls of dining room area
34 overall of foyer
35 overall of family room area
36 note on laptop computer on kitchen counter
37-38 close-up of note
39-43 overall of family room area
44-49 overalls of kitchen
50 overall of family room area
51 overall of hallway
52-56 overalls of south bedroom area

Sheriff's Office**Hillsborough County, Florida**

SUPPLEMENTAL INVESTIGATION 10 Apr 2007 Case No: 07-201904

page 2 of 5

| | |
|-------|--|
| 57 | overall of hallway |
| 58-59 | overalls of sitting area |
| 60-63 | overalls of home gym area |
| 64-65 | overalls of guest bath |
| 66 | overall of laundry room |
| 67 | overall of door leading to garage |
| 68-73 | overalls interior garage |
| 74 | overall of deceased on floor of garage |
| 75-76 | pistol on floor |
| 77 | overall of deceased |
| 78-79 | shell casing on floor |
| 80-83 | overalls of deceased |
| 84 | overall of cell phone on workbench |
| 85-86 | overalls of holster and card on gym seat |
| 87-88 | close-up of card |
| 89 | wound to head of deceased |
| 90 | left arm of deceased |
| 91 | right arm of deceased |
| 92 | overall of Bible on kitchen counter |
| 93 | close-up of Bible |
| 94-99 | overalls of master bedroom and bath area |
| 100 | overall of deceased and workbench |
| 101 | projectile under workbench |
| 102 | overall of workbench |

EVIDENCE – Inventory # 448867

| <u>ITEM</u> | <u>QTY</u> | |
|-------------|------------|---|
| 1 | 1 | .45 caliber Smith & Wesson revolver, model 4506, stainless steel finish, serial # TDC7012 |
| 2 | 1 | pistol magazine from item # 1 |
| 3 | 1 | .45 caliber bullet, Federal from chamber of gun |
| 4 | 4 | .45 caliber bullets, Federal from pistol magazine |
| 5 | 1 | spent .25 caliber shell casing, Federal from floor |
| 6 | 1 | spent projectile from floor under workbench |

Inventory # 448894

| | | |
|---|---|-----------------------|
| 1 | 1 | note |
| 2 | 1 | black colored holster |

INVESTIGATION

On 05 Apr 2007 at approximately 1635 hours, this writer was dispatched to the above address. Upon arrival to the scene at approximately 1725 hours, writer met Det L Croissant, PID 3417, present conducting an investigation of the above incident. Det Croissant gave a brief statement of what had

Sheriff's Office

Hillsborough County, Florida

SUPPLEMENTAL INVESTIGATION 10 Apr 2007 Case No: 07-201904 page 3 of 5

occurred and requested that photographs be taken and that the scene be processed for evidence, as noted in the Scene Tangible Evidence Section of this report.

ATTACHMENTS: (2) Property Receipts
REFERRED TO: Records
CID / Det Croissant
pnk/Cpl A Picard, PID #653, 19 April 2007

Sheriff's Office**Hillsborough County, Florida**

SUPPLEMENTAL INVESTIGATION 24 April 07 Case No: 07-201904 Page 3 of 5

INVESTIGATION

On 05 April 07 at approximately 1710 hours, writer was contacted by Sgt. Willette and requested to respond to 5922 Tealwater Place in reference to a suicide investigation.

Writer arrived on scene at approximately 1750 hours and made contact with Sgt. Willette, Sgt. Hassell and Sgt. Escobio and Crime Scene Det. Sackman. Writer noted that deputies had responded to the residence on an attempt to contact call, as the caller was calling from Pinellas and advised that their friend, John Winter, advised he wanted to end it all by unknown means.

Upon arrival, deputies noted a black vehicle in the driveway and the residence was locked up with all the blinds closed, except for one open in what appeared to be an office area at the front of the residence, however, they were unable to see or hear any movement within the residence. They attempted to contact neighbors and John Winter's wife, Karen Winter, via telephone, to see if that was his only vehicle and if he had made it to work. Ms. Karen Winter gave them the garage code, but it did not work. She advised that the day before all the other alarm codes had been changed. A few minutes later, John Winter's friend, Robert Fontaine, arrived on scene and advised that John was at home when he last spoke to him and tried to telephone him again, with negative results. The deputies then attempted entry and upon making entry into the residence, via the front door, they heard what appeared to be a gunshot coming from the garage area. They immediately cleared the residence and responded into the garage where they located the victim, who was still holding the gun in his right hand. Dep. Wilson advised that he removed the weapon from the victim's hand and placed it on the ground a few feet in front of the victim, as there was still movement from the victim. He advised that EMS was summoned and they responded and pronounced Mr. Winter deceased.

Writer was advised that Dep. T.J. Henderson and Dep. Jeremy Davis had responded to Karen Winter, the victim's wife, to notify her at her place of employment at Tobacco Depot [REDACTED] and to obtain a Consent to Search the residence.

Writer viewed the scene and noted the victim was located in the garage area of the residence with his back towards the cabinet against the north wall. The victim was in a seated position, but slumped down with his head turned towards his left shoulder. Writer noted that he was dressed in a gray t-shirt, green shorts, white socks and black Nike tennis shoes.

Writer observed what appeared to be a gunshot entry wound in the victim's right temple, with a clear contact wound.

Writer then responded into the residence where deputies advised they had noted a printed letter sitting on top of a laptop on the kitchen counter. Writer noted that the same letter had been emailed from John Winter to his work e-mail address at Big U, and therefore was in his sent box of his e-mail. Writer also noted an open Bible lying on the kitchen counter towards the laundry room, which had an entry door into the garage and the victim's wedding ring and watch lying on top of a wallet on the kitchen counter.

HILLSBOROUGH COUNTY SHERIFF'S OFFICE
PROPERTY RECEIPT

Confidential
PAGE 1 OF 5

Case Number: 07-201904 Event Number: _____

| | | |
|------------------------------------|--|-------------------|
| Type of Incident <u>Suicide</u> | Type of Property (Check One) <input type="checkbox"/> Lost/Found/Abandoned Property <input checked="" type="checkbox"/> Evidence/Safekeeping <input type="checkbox"/> Vehicle Impound <input type="checkbox"/> Homicide <input type="checkbox"/> Seizure/Forfeiture | Evidence Use Only |
|------------------------------------|--|-------------------|

Exact location where property was impounded: 5922 Tealwater Place, Lithia fl

Impound Date: 4/5/07 Time: 1725 Inventory Number: 448867

| | | | | | | | | |
|---|--|--|--------------------------------|-----------------------------------|------|-----|-----|-----|
| # | <input type="checkbox"/> Reported By <u>John Winter</u> | <input type="checkbox"/> Discovered By | <input type="checkbox"/> Owner | <input type="checkbox"/> Other... | Race | Sex | Age | DOB |
|---|--|--|--------------------------------|-----------------------------------|------|-----|-----|-----|

Residence: _____ Residence Phone: _____

| | | | | | | | | |
|---|--------------------------------------|--|--------------------------------|-----------------------------------|------|-----|-----|-----|
| # | <input type="checkbox"/> Reported By | <input type="checkbox"/> Discovered By | <input type="checkbox"/> Owner | <input type="checkbox"/> Other... | Race | Sex | Age | DOB |
|---|--------------------------------------|--|--------------------------------|-----------------------------------|------|-----|-----|-----|

Residence: _____ Residence Phone: _____

| Evidence Use Only | Item # | Qty/Wgt | Description (Make, Model, Serial#, etc.) Complete Reverse For Firearms, Bicycles, and Vehicles) |
|-------------------|--------|---------|--|
| | 1 | 1 | 45 cal S&W Pistol |
| | 2 | 1 | Pistol magazine (from #1) |
| | 3 | 1 | 45 cal bullet (Federal) from chamber of gun. |
| | 4 | 4 | 45 cal bullets (Federal) from pistol magazine. |
| | 5 | 1 | Spent 45 cal shell casing (Federal) from floor. |
| | 6 | 1 | Spent projectile from floor. host item |

Citizen Use

I hereby acknowledge that the above list represents all the property taken from my possession and that I have received a copy of this receipt.
Print Name: _____ Date: _____

The property turned in by me to the Sheriff is not mine and I claim no interest in it.
Signature: Det. L. Croissant #3417

Det. Chuck B. Sackman
Impounding Officer (Print Name)

437/535
PID/SQD/DIST

Det. Chuck B. Sackman
Signature

5 APR 07
Date

| Item # | Received By | PID | Purpose | Received Date/Time |
|--------|--------------------|------|--|--------------------|
| 1-6 | <u>Eddie Jones</u> | 3865 | <input checked="" type="checkbox"/> Sealed <input type="checkbox"/> Open EIS | 4/6/07 0914 |
| | | | <input type="checkbox"/> Sealed <input type="checkbox"/> Open | |
| | | | <input type="checkbox"/> Sealed <input type="checkbox"/> Open | |

PROPERTY RECEIPT CONTINUATION

PAGE ____ OF ____

| Item # | Received By | PID | | Purpose | Received Date/Time |
|--------|-------------|-----|--|---------|--------------------|
| | | | <input type="checkbox"/> Sealed <input type="checkbox"/> Open | | |
| | | | <input type="checkbox"/> Sealed <input type="checkbox"/> Open | | |
| | | | <input type="checkbox"/> Sealed <input type="checkbox"/> Open | | |
| | | | <input type="checkbox"/> Sealed <input type="checkbox"/> Open | | |
| | | | <input type="checkbox"/> Sealed <input type="checkbox"/> Open | | |
| | | | <input type="checkbox"/> Sealed <input type="checkbox"/> Open | | |

FIREARMS IMPOUND SECTION

Court Order Required? Yes No

1 Make S&W Type Pistol Model # 4506 Caliber Gauge 45 Mag/Cyl Capacity 7 Barrel Length 3 1/2

Finish S/S Serial # TDC7012 Action Type Semi Auto Other ID Marks BLACK GRIPS

N.I.B.I.N.: (Check One) DO NOT process Process immediately Process after being processed for: _____

_____ Make _____ Type _____ Model # _____ Caliber Gauge _____ Mag/Cyl Capacity _____ Barrel Length _____

Finish _____ Serial # _____ Action Type _____ Other ID Marks _____

N.I.B.I.N.: (Check One) DO NOT process Process immediately Process after being processed for: _____

_____ Make _____ Type _____ Model # _____ Caliber Gauge _____ Mag/Cyl Capacity _____ Barrel Length _____

Finish _____ Serial # _____ Action Type _____ Other ID Marks _____

N.I.B.I.N.: (Check One) DO NOT process Process immediately Process after being processed for: _____

_____ Make _____ Type _____ Model # _____ Caliber Gauge _____ Mag/Cyl Capacity _____ Barrel Length _____

Finish _____ Serial # _____ Action Type _____ Other ID Marks _____

N.I.B.I.N.: (Check One) DO NOT process Process immediately Process after being processed for: _____

_____ Make _____ Type _____ Model # _____ Caliber Gauge _____ Mag/Cyl Capacity _____ Barrel Length _____

Finish _____ Serial # _____ Action Type _____ Other ID Marks _____

N.I.B.I.N.: (Check One) DO NOT process Process immediately Process after being processed for: _____

BICYCLE INFORMATION

Make _____ Size _____ Color _____ Male/Female _____ Serial Number _____

Make _____ Size _____ Color _____ Male/Female _____ Serial Number _____

Make _____ Size _____ Color _____ Male/Female _____ Serial Number _____

VEHICLE INFORMATION

Year _____ Make _____ Model _____ Style _____ License _____ State _____

Color _____ VIN _____ Damage _____

Year _____ Make _____ Model _____ Style _____ License _____ State _____

Color _____ VIN _____ Damage _____

