

PROPERTY RECORD RECEIPT

VOLUSIA COUNTY DIVISION OF CORRECTIONS

Booking No. 844775 SPN 273152 Inmate Name WOOLEY, HEIDI M Housing Location VCCF-NW-H-16L-001 Security/Hdlg MAXI RSA WF37

Form 1 of 1

Received By: jmangun Location: VCCF Property Ro: Container: HOOK 223 Date: 03/26/2011 22:46

Disposition Code
 D-Donated K-Keep in possession M-Mail Storage-Storage
 (Describe valuables as fully as necessary)

Item	Description	Item	Description
<input type="checkbox"/>	Backpack	<input type="checkbox"/>	Bank Card
<input type="checkbox"/>	Belt	<input type="checkbox"/>	Books
<input checked="" type="checkbox"/>	Bra	<input type="checkbox"/>	Cap/Hat
<input type="checkbox"/>	Charge Card	<input type="checkbox"/>	Cigarette Pack
<input type="checkbox"/>	Coat	<input type="checkbox"/>	Condom
<input type="checkbox"/>	Dentures	<input type="checkbox"/>	Dress
<input checked="" type="checkbox"/>	Driver's License	<input checked="" type="checkbox"/>	Food Stamps
<input type="checkbox"/>	Glasses	<input checked="" type="checkbox"/>	Grooming Aids
<input type="checkbox"/>	Hair-Tie	<input checked="" type="checkbox"/>	Key
<input type="checkbox"/>	Legal Documents	<input type="checkbox"/>	Lighter
<input type="checkbox"/>	Medicine	<input type="checkbox"/>	Misc Clothing
<input checked="" type="checkbox"/>	Other	<input checked="" type="checkbox"/>	Other
<input type="checkbox"/>	Other Credit Card	<input checked="" type="checkbox"/>	Other Tagged Item
<input checked="" type="checkbox"/>	Pants/Slacks	<input checked="" type="checkbox"/>	Pen
<input type="checkbox"/>	Pencil	<input type="checkbox"/>	Personal Check
<input checked="" type="checkbox"/>	Phone	<input type="checkbox"/>	Photos
<input checked="" type="checkbox"/>	Purse/Shoulder Bag	<input type="checkbox"/>	Radio/TV
<input type="checkbox"/>	Religious Medal	<input checked="" type="checkbox"/>	Shirt
<input checked="" type="checkbox"/>	Shoes	<input type="checkbox"/>	Shorts
<input type="checkbox"/>	Skirt	<input type="checkbox"/>	Slippers
<input type="checkbox"/>	Social Security Card	<input type="checkbox"/>	Socks
<input type="checkbox"/>	Stockings	<input type="checkbox"/>	Suit
<input checked="" type="checkbox"/>	Sunglasses	<input type="checkbox"/>	Sweater
<input checked="" type="checkbox"/>	Tie/Scarf	<input type="checkbox"/>	T-Shirt
<input checked="" type="checkbox"/>	Underwear	<input type="checkbox"/>	Wallet

Claim Release

I relinquish all claim to the articles listed above as "Donated," and hereby acknowledge receipt of articles listed as "Keep in possession." The above is a correct inventory of personal property in my possession at the time of admission. The value I have placed on those items noted as having value over \$200.00 is a true representation of their fair market value, to the best of my knowledge.

Inmate Signature _____ Date _____ Witnessing Officer _____ ID # _____

I hereby acknowledge the articles as "Storage," which were given to me upon my release from the institution.

Inmate Signature _____ Date _____

ID/Receiving Officer (Print name) _____ (Signature) _____ ID # _____

Transportation Officer (Print name) _____ ID # _____ Agency _____

Property Release

This is to certify that all items listed above have been released or have been stored for more than 30 days from discharge date and have been disposed of as authorized upon property receipt.

Release Reason: _____ Release Date: _____ Release Officer _____ Badge # _____

Prisoner/Person Receiving _____ Date _____ Officer _____ Badge # _____

Recipient: _____ Relation _____ Phone Number _____

Address _____ City _____ State _____ Zip Code _____

PROPERTY RECORD RECEIPT

VOLUSIA COUNTY DIVISION OF CORRECTIONS

Booking No.	SPN	Inmate Name	Housing Location	Security/Hdlg	RSA
844775	273152	WOOLEY, HEIDI M	VCCF-NW-H-16L-001	MAXI	WF37

Form 1 of 1

Jewelry	Description	Yellow Color	White Color	Ston	Dangerous Items	Description
<input type="checkbox"/> Body Piercings		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Bowie Knife	
<input checked="" type="checkbox"/> 2 Bracelet	s	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Fingernail File/Clip	
<input type="checkbox"/> Costume Jewelry		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Garrotte	
<input checked="" type="checkbox"/> 2 Ear Ring	s	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Knife	
<input checked="" type="checkbox"/> 1 Necklace	w/charm-s	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Nail Cutter	
<input type="checkbox"/> Other Jewelry		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Other Dangerous	
<input type="checkbox"/> Other Jewelry		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Scissors	
<input checked="" type="checkbox"/> 6 Ring	s	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Sharp/Pointed Object	
<input type="checkbox"/> Watch		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Comments:

Heidi Wooley

Inmate's Signature

Date: 03/26/2011 22:50

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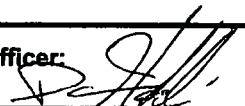
Recipient: _____ Relation _____ Phone Number _____

Address _____ City _____ State _____ Zip Code _____

VOLUSIA COUNTY DIVISION OF CORRECTIONS
Incident Report

PAGE 1 OF 1

THE INFORMATION BELOW WILL BE FILLED IN COMPLETELY BY THE OFFICER FILING THE REPORT AT THE TIME THE INCIDENT TAKES PLACE. USE VCDC 402 (SUPPLEMENTAL REPORT) FOR CONTINUATION.

SUBJECT: PROPERTY		DATE: 03/27/2011	TIME: 1753
INMATE'S NAME: WOOLEY, HEIDI		BOOKING NUMBER: 844775	CELL NO.: N/A
<p>ON March 27, 2011 AT AROUND 1750 CAPT. MCCLELLAND TOLD MYSELF OFC D. HALDI TO INVENTORY INMATE WOOLEY, HEIDI 844775'S PERSONAL PROPERTY IN ID. SHE HAD THE FOLLOWING ITEMS. 1 BRA, 1 DRIVER'S LICENSE, 1 OTHER ID, 1 PAIR OF PANTS, 1 PHONE, 1 PURSE WITH WALLET, 2 SHOES, 1 PAIR OF SUNGLASSES, 1 SCARF, 1 FOOD STAMP CARD, 8 GROOMING AIDS, 6 KEYS, 1 CHANGE PURSE, 5 MISC CARDS, 1 PEN, 1 SHIRT, 2 BRACELETS, 2 EAR RINGS, 1 NECKLACE WITH CHARM, 5 RINGS. ALL ITEMS LISTED ABOVE MATCH THE PROPERTY RECORD RECEIPT EXCEPT IT LISTS 6 RINGS ON THE FORM AND ONLY 5 CAN BE ACCOUNTED FOR. ALL PROPERTY WAS TURNED OVER TO SO. ROBINETT.</p>			
Reporting Officer: D. HALDI Print Name		Reporting Officer: Signature 	Employee No.: 971

CORRECTIVE ACTION OR COMMENTS BY HOUSING SUPERVISOR

Housing Unit Supervisor: Print Name	Housing Unit Supervisor: Signature	Employee No.:

CORRECTIVE ACTION OR COMMENTS BY SHIFT SUPERVISOR

Shift Supervisor: Print Name	Shift Supervisor: Signature	Employee No.:

REVIEWED

	Signature of Warden