

**VOLUSIA COUNTY DIVISION OF CORRECTIONS  
CONTROL CARD (214)**

*CH*  
*D090 D02L*

NAME: **WOOLEY, HEIDI M**  
ADDRESS: **805 E RICH AVE**  
**DELAND, FL 32724-0000**  
  
ALIAS: **WOOLEY, HEIDI M**  
**WOOLEY, HEIDI MICHELLE**

DOB: **9/21/1973**      BOOKING NO: **844775**  
AGE: **37**      POB: **PA**  
R/S: **WIF**    HGT: **502**    WGT: **213**    HR: **BRO**    EYE: **BRO**  
SMT:      SSN: **[REDACTED]**

NAME: **WIGGINS, DENNIS**  
ADDRESS: **[REDACTED]**

- Next of Kin -

**DELAND**      **FL 32720-**  
**Mother**

NAME: **WOOLEY, JOYCE**  
ADDRESS: **[REDACTED]**

**DELAND**      **FL 32724-**  
**Father**

NAME: **SALLEBY, LAURENCE**  
ADDRESS: **DECEASED**

**REMARKS**

POSSESSION OF PARAPHERNALIA  
POSSESSION OF COCAINE

500.00  
1000.00



RT THUMB

RT THUMB



DT/TIME OF RLS: .....  
SIG. RLS. OFF: .....

ITEM	COMMENT	ISSUED	ITEM	COMMENT	ISSUED
Blanket	.....	<input type="checkbox"/>	1 Bra	.....	<input type="checkbox"/>
Blue Shorts	.....	<input type="checkbox"/>	1 Blue T-Shirt	.....	<input type="checkbox"/>
Coat	.....	<input type="checkbox"/>	1 Comb	.....	<input type="checkbox"/>
Green Shorts	.....	<input type="checkbox"/>	1 Green T-Shirt	.....	<input type="checkbox"/>
Inmate Handbook	.....	<input type="checkbox"/>	1 ID Wristband	.....	<input type="checkbox"/>
Jumpsuit	.....	<input type="checkbox"/>	1 Kitchen Pants	.....	<input checked="" type="checkbox"/>
Kitchen Shirt	.....	<input type="checkbox"/>	Laundry Bag	.....	<input type="checkbox"/>
Pillow Case	.....	<input type="checkbox"/>	2 Shower Slides	.....	<input checked="" type="checkbox"/>
Sheets	.....	<input type="checkbox"/>	1 Soap	.....	<input type="checkbox"/>
Socks	.....	<input type="checkbox"/>	1 Toothbrush	.....	<input type="checkbox"/>
Towel	.....	<input type="checkbox"/>	Toothpaste	.....	<input type="checkbox"/>
White T-Shirt	.....	<input type="checkbox"/>	1 Underwear	.....	<input type="checkbox"/>
Washcloth	.....	<input type="checkbox"/>			

**VIOLENT HISTORY**  
**HOUSE APPROPRIATELY**  
**UNTIL RISK-ASSESSED**  
**BY CASE MANAGEMENT**

WOOLEY, HEIDI M 844775, acknowledge receipt of the items indicated above. I understand that I am responsible for and will be held accountable for all the items issued upon release. Should they be lost or destroyed I understand the cost will be deducted from my trust account. I also understand and agree that the Volusia County Division of Corrections is not responsible for the safekeeping of any personal items I may wish to keep in my housing assignment. I hereby certify that I was permitted telephone calls at VCBJ and that I received a copy of the inmate handbook of rules and regulations.

INMATE SIG: *Heidi Wooley*      OFF SIG: *Felix Lane*      DT: **3/26/11**      TIME: **10:57 PM**  
CHECK OUT TIME: .....  
F SIG: .....

PROPERTY LOCATION: **TRBJ**

PIN: **6306**

*223*