

# PROPERTY INVOICE AND RECEIPT

|   |  |                                    |             |                               |                         |
|---|--|------------------------------------|-------------|-------------------------------|-------------------------|
| NOTE: FILL IN EVERY SPACE UNLESS THE INFORMATION IS NOT AVAILABLE PRINT LEGIBLY IN INK. |  | TYPE OF PROPERTY (Circle One Only) |             | DATE AND TIME PROPERTY SEIZED |                         |
|   |  | <u>EVIDENCE</u>                    | SAFEKEEPING | FOUND                         | 11/15 2052              |
| NAME OF VICTIM OR OWNER (LAST, FIRST, MIDDLE)   |  |                                    | ADDRESS     |                               | TELEPHONE               |
|   |  |                                    |             |                               | D.R. NUMBER<br>15000021 |
| NAME OF PERSON ARRESTED, OR SUSPECT (LAST, FIRST, MIDDLE)                               |  |                                    | ADDRESS     |                               | TELEPHONE               |
|   |  |                                    |             |                               | D.O.B.                  |
| NAME OF PERSON ARRESTED, OR SUSPECT (LAST, FIRST, MIDDLE)                               |  |                                    | ADDRESS     |                               | TELEPHONE               |
|   |  |                                    |             |                               | D.O.B.                  |
| NAME OF FINDER OR PERSON REPORTING FOUND PROPERTY                                       |  |                                    | ADDRESS     |                               | TELEPHONE               |
|   |  |                                    |             |                               | CITATION #              |
| CHARGES   |  |                                    |             | FINDER WILL CLAIM PROPERTY    |                         |
|   |  |                                    |             | YES                           | NO                      |
|   |  |                                    |             | LAB TEST                      |                         |
|   |  |                                    |             | YES                           | NO                      |

### NOTIFICATION FOR RETURN OF PERSONAL PROPERTY

You are responsible for claiming your personal property within 90 days from the above date. The property will be disposed of by the Cottonwood Police Department, if no claim is made prior to that date.

ADVANCE AUTHORIZATION IS REQUIRED IF YOU WISH TO DESIGNATE ANOTHER PERSON TO RECEIVE YOUR PROPERTY.

\_\_\_\_\_  
SIGNATURE

| BRIEF SYNOPSIS OF OCCURRENCE: (Also use this space for additional suspects or victims)  |                             |                     |                           |
|---|-----------------------------|---------------------|---------------------------|
| 31 DAY CALIBRATION CHECK  |                             |                     |                           |
| ITEMIZE AND DESCRIBE PROPERTY   |                             |                     |                           |
| LIST ONLY ONE ITEM PER LINE. NUMBER EACH ITEM ON THE FORM. - Where possible, place each item in plastic bag, and attach property tag to outside of bag. |                             |                     |                           |
| ITEM  | DESCRIPTION                 | SERIAL #            | PROPERTY #                |
| 1A  | CALIBRATION CHECK PAPERWORK | 90-004765           | 97723                     |
|   |                             |                     |                           |
|   |                             |                     |                           |
|   |                             |                     |                           |
|   |                             |                     |                           |
|   |                             |                     |                           |
|   |                             |                     |                           |
|   |                             |                     |                           |
|   |                             |                     |                           |
|   |                             |                     |                           |
|   |                             |                     |                           |
|   |                             |                     |                           |
|   |                             |                     |                           |
| Placed in Property Locker # <u>17</u>   |                             | Date <u>11/15</u>   | Time <u>2052</u>          |
| OFFICER: <u>[Signature]</u>   |                             | SERIAL: <u>597</u>  | PAGE <u>1</u> OF <u>1</u> |
| DISPOSITION OF PROPERTY:  |                             |                     |                           |
| Property Items Were:  |                             |                     |                           |
| 1. Returned to Owner  |                             | 3. Sold at Auction  |                           |
| 2. Destroyed  |                             | 4. T.O.T. City      |                           |
| 5. Left at Court  |                             | 6. Unable to Locate |                           |
| Received By   | Date                        | Time                | Remarks                   |
| <u>[Signature]</u>  | <u>11/2/15</u>              | <u>1025</u>         |                           |
| Property Location   |                             |                     |                           |
|   | <u>DTW</u>                  |                     |                           |

EXHIBIT G-2  
THIS REPORT PREPARED PURSUANT TO DUTY IMPOSED BY A.A.C. R13-10-104 (A)

ARIZONA DEPARTMENT OF PUBLIC SAFETY  
STANDARD QUALITY ASSURANCE PROCEDURES  
INTOXILYZER MODEL 8000  
STANDARD CALIBRATION CHECK PROCEDURE

QA SPECIALIST SCAIM, ROGER G. AGENCY COTTONWOOD PD  
DATE 11/15 TIME 2048  
INTOXILYZER SERIAL # 90-00 4765 LOCATION COTTONWOOD PD

- (M) 1. Ensure that gas tank is attached to instrument and contains a standard alcohol concentration solution 0.100 AC.  
OR  
Pour a standard alcohol concentration solution \_\_\_\_\_ AC, into a clean dry simulator and assemble the simulator. Ensure that a tight seal has been made. Turn on the simulator and allow temperature to reach  $34^{\circ}\text{C} \pm 0.2^{\circ}\text{C}$
- (M) 2. Intoxilyzer 8000 display reads "PUSH BUTTON TO START"
- (M) 3. Go to the "Control Testing Menu". Select "D" for dry control test or "W" for wet control test. After selection is made press ENTER.
- (M) 4. Air blank completed.
- (M) 5. Calibration check completed. Test results 0.099 AC.
- (M) 6. Air blank completed.
- (M) 7. Remove printed record. Attach the record to the completed checklist.

SIGNATURE ofc [Signature] 592

INTOXILYZER 8000  
Instrument Initialization  
20:24:01 01/01/2015

INTOXILYZER 8000  
Location: COTTONWOOD PD  
Serial Number: 80-004765  
Core Version: 8105748  
01/01/2015 20:50:40

Standard Lot#: 09113100A1  
Last Changed By: R. SCARIM #592

DAS: R. SCARIM #592  
COTTONWOOD PD

Operator: R. SCARIM #592  
COTTONWOOD PD

| Test            | g/210L | Time     |
|-----------------|--------|----------|
| Air Blank       | 0.000  | 20:51:10 |
| 0.100 Cal Check | 0.099  | 20:51:31 |
| Air Blank       | 0.000  | 20:52:00 |

Preventative Maintenance  
Performed -- Timer Reset

15-000071