



DATE RECEIVED (YYYY / MM / DD)	EXHIBIT NUMBER (IF APPLICABLE)	ITEM(S) RECEIVED
NAME OF ENFORCEMENT OFFICER		
STORAGE LOCATION		

**DESCRIPTION AND TRACKING OF EXHIBIT MOVEMENT**

Describe when and where the item(s) were purchased, moved and the method of destruction.

DATE (YYYY / MM / DD)	DESCRIPTION

ENFORCEMENT OFFICER SIGNATURE	DATE (YYYY / MM / DD)
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