ARKANSAS STATE POLICE

ASP-2 A
(Rev. 10/14)

Supplemental Receipt For Evidence/Property Form

Collecting Officer: Jaran K McCormick (First/MI/Last Name) Rank: Cpl Badge #: 570

Date of Confiscation: 1/2/24 (Month/Day/Year) Time: 220 ☐ AM ☒ PM Location: Troop L Lowell

Description Of Items Transferred

Thumb Drive w/ Digital Data

Transferred From: [signature] Rebecca Dawdy Date: 1/2/25
Signature (Rank/First/MI/Last Name/Badge #) (Month/Day/Year)

Transferred To: Cpl Jaran McCormick 570 Date: 1/2/24
Signature (Rank/First/MI/Last Name/Badge #) (Month/Day/Year)

Transferred From: _____ Date: _____
Signature (Rank/First/MI/Last Name/Badge #) (Month/Day/Year)

Transferred To: _____ Date: _____
Signature (Rank/First/MI/Last Name/Badge #) (Month/Day/Year)

Case File/Incident Number: ASP-2024-1560

If currency is transferred, Witnessing Officer: _____ Date: _____
Signature (Rank/First/MI/Last Name/Badge #) (Month/Day/Year)

USE ADDITIONAL PAGE IF NECESSARY