Indiana State Police Clandestine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date: 2-3-2014

Incident #: 14ISPC000899

County: Pulaski

Address: Pulaski Co. Sheriff Dept Sally Port
110 E. Meridan St Winamac
Indiana 46996

Type of Laboratory Seizure **(check one)**

- ☒ Operational Lab
- ☐ Chemical/Glassware/Equipment (only)
- ☐ Dumpsite (only)

Seizure Location **(check all that apply)**

- ☐ Residence
- ☐ Outbuilding
- ☒ Vehicle
- ☐ Hotel/Motel
- ☐ Open – No Structure
- ☐ Other: _____

Items Found: Location **(bedroom, kitchen, open air, etc)**
(check all that apply)

- ☐ One Pot or Birch Reaction(s): _____
- ☐ Red Phosphorous/Iodine Reaction(s): _____
- ☐ Hydrochloric Acid Gas Generator(s): _____
- ☒ Flammable Solvents: Back Seat
- ☒ Water Reactive Metal (Lithium): Back Seat
- ☐ Anhydrous Ammonia: _____
- ☒ Corrosive Acid: Back Seat
- ☒ Corrosive Base: Back Seat
- ☒ Other (item and location):Crushed Pseudoephedrine

Vehicle Information:

Owner: Nicole Kidd
VIN: 2G2WP552481191214
Year: 2008
Make: Pontiac
Model: Grand Am

Child under age 18 discovered **(check appropriate)**

- ☐ Yes _____ (number present)
- ☒ No
- ☐ Children not present but evidence they reside or visit often

Living conditions of home: ☐ clean ☐ disarray ☐ unclean

Estimated length of time manufacturing had been occurring: _____

Additional Information:_____

This report has been faxed* or emailed to the following agencies that serve the location:

Fire Department City, Township or County Winamac VFD Fax: 574-946-3221
Health Department County: Pulaski County Fax: 574- 946-6654
Department of Child Services Hotline: dcshotlinereports@dcs.in.gov Fax: 317-234-7595 or 317-234-7596

For further information regarding this methamphetamine laboratory, contact
Investigating Officer: S/TRP Dan Tschida Phone 219-696-6242

*This form is to be faxed to the Fire Department, Health Department and/or Department of Child Services listed within 24 hours of scene processing.