

Exhibit E

To: 3127456995

From: Canon Fax

12/21/17 09:00 AM

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**3/1 CHICAGO POLICE
ARREST REPORT**
CPD-11.420 (REV. 3/02)

1. NAME (LAST - FIRST - MIDDLE)		2. SEX 3. RACE 4. AGE 5. DATE OF BIRTH M 1 18 26 JAN 86																									
CARTER, WILLIAM F.																											
6. C.B. NO. 1585 61 33		7. ALIAS OR NICKNAME NONE		8. DIST./RES. 002		9. HEIGHT 508		10. WEIGHT 160		11. HAIR BLK		12. HAIR STYLE SHORT		13. EYES BRN		14. COMPLEXION DRK											
15. I.R. NO. 1480711		16. RESIDENCE ADDRESS 575 E. BROWNING 308		APT. NO./FLOOR		17. DISTING. MARKS, SCARS, DISABILITIES, ETC.		18. SOCIAL SECURITY NO.																			
19. Y.D. NO. HK-438843		20. CITY - STATE CHGO., IL. 60653		ZIP CODE 773, 548-5397		21. STATE/PLACE OF BIRTH IL., CHGO.		22. STATE/PLACE OF BIRTH IL., CHGO.		23. OCCUPATION UNEMPLOYED		24. BUSINESS NAME - ADDRESS D		25. ADDRESS OF ARREST 540 E. 36th ST.		26. NO. ARRESTED 3		27. LOCATION CODE FOR NATURE OF PREMISES 123		28. BEAT OF ARREST 212		29. DATE OF ARREST 18 JUN 04		30. ARRESTEE TRANSPORTED TO UNIT 002 BY BEAT 4512B		TIME 1015 1030	
31. RESISTED ARREST YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		32. WEAPON PISTOL <input type="checkbox"/> REVOLVER <input type="checkbox"/> RIFLE <input type="checkbox"/> SHOT-GUN <input type="checkbox"/> KNIFE <input type="checkbox"/> OTHER (SPECIFY) DNA		33. PROPERTY INVENTORY NO(S). 18359887 18359892		34. FOR NARCOTIC ARREST SUSPECT CANNABIS <input type="checkbox"/> SUSPECT CONTROLLED SUBSTANCE <input checked="" type="checkbox"/> 8GRAMS \$1,440.00		APPX. WT/ EST. STREET VALUE NO. PILLS																			
35. VEHICLE OF ARRESTEE D		36. PERSON IN INVESTIGATIVE UNIT NOTIFIED		37. DOES ARRESTEE HAVE UNATTENDED DEPENDENT CHILDREN AT HOME YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		38. NAME OF A.S.A./TEL. REV.		39. VICTIM-COMPLAINANT NAME P.O. JONES, A.#19462		40. REFERENCES (CH. - PAR.) 1720ILCS570/402		41. OFFENSES PCS (HEROIN)		42. DISPOSITIONS 5		43. VICTIM INJURED IF YES - DESCRIBE INJURIES NO <input checked="" type="checkbox"/> YES <input type="checkbox"/>		44. STATE LICENSE NO. OR V.I.N. 774 E. 38th ST. CHGO., IL. 60653		45. VICTIM HOSPITALIZED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		46. DISPOSITION OF VEHICLE N		47. CHARGES APPROVED YES <input type="checkbox"/> NO			
48. REFERENCES (CH. - PAR.) 2		49. OFFENSES 3		50. DISPOSITIONS 6		51. REFERENCES (CH. - PAR.) 3		52. OFFENSES 7		53. DISPOSITIONS 8		54. REFERENCES (CH. - PAR.) 4		55. OFFENSES		56. DISPOSITIONS		57. NAME OF A.S.A./TEL. REV. 312 674-3987		58. HOSPITAL NAME							

43. NARRATIVE (The facts for probable cause to arrest AND to substantiate the charges include, but are not limited to, the following):
THIS IS AN ARREST BY P.H.S. TACT UNITS BTS 4512B, C,D. THE ABOVE SUBJECT WAS OBSERVED BY A/OS DURING A NARCOTICS INVESTIGATION HOLDING A CLEAR PLASTIC BAG OF SUSPECT NARCOTICS. A/OS DETAINED THE SUBJECT AND RECOVERED FROM HIS HAND THE CLEAR PLASTIC BAG. FURTHER INVESTIGATION REVEAL THAT THERE WAS (22) SMALLER ZIPLOCK BAGGIES INSIDE THE CLEAR PLASTIC BAG AND THEY CONTAINED A WHITE POWDER SUSPECT HEROIN. THE SUBJECT WAS PLACED IN CUSTODY AND A CUSTODIAL SEARCH PERFORMED WHICH REVEALED \$200.00 U.S.C. SUSPECT NARCOTICS MONEY. ALL THESE EVENTS OCCURRED WITHIN THE CHA IDA B. WELLS COMPLEX AND WITHIN 1000 ft. OF DOOLITTLE ELEMENTRY SCHOOL.

HAS NO VEHICLE

I hereby declare and affirm, under penalty of perjury, that the facts stated herein are accurate to the best of my knowledge, information and/or belief.

FIRST ARRESTING/APPEARING OFFICER'S ORIGINAL SIGNATURE

STAR NO. - 19462 UNIT 715B

DEPUTY CLERK'S ORIGINAL SIGNATURE

STAR/EMPL. NO.

44-2640

44. FIRST ARRESTING/APPEARING OFFICER - PRINT NAME

P.O. JONES, A.#19462

DEAT NO. 4512B FURLO. 12A D.O. GRP. 3 MISD./ORD. CRT. KEY H

45. SECOND ARRESTING OFFICER - PRINT NAME - STAR NO. UNIT

P.O. EDWARDS, D.#16280 715B

46. VEHICLE ASSIGNED

1 ONE 2 TWO 3
□ P.O. □ P.O. □ OTHER

47. INITIAL APPROVAL OF PROBABLE CAUSE - SIG. - STAR

B. JONES A. #19462

48. RESULTS OF FINGERPR. CHECK WAIVED BY-SIG. - STAR

DATE TIME

49. APPROVAL OF CHARGES - SIG. - STAR

DATE TIME

WATCH COMMANDER'S NOTATIONS

WAS THE OFFENDER RELEASED WITHOUT CHARGING?

D NO □ YES IF YES, COMPLETE REVERSE

50. ARRESTEE SEARCHED BY DUMAS		STAR/EMPL. NO. 9182	UNIT 0	51. DATE RECEIVED - LOCKUP 18 JUN 04	TIME 1410	52. PERS. PROPERTY RECEIPT NO. 113	53. TELEPHONE NO. CALLED 1425	TIME 1500
54. BOOKING OFFICER O.51K04		STAR/EMPL. NO. 5255	UNIT 2	55. TIME FINGERPRINTED 1415	56. TIME PHOTOGRAPHED 1426	57. TIME FED 1830	58. PLACED IN CELL NO. 311	TIME 1500
COURT INFORMATION								
59. ARR. OFF. DESIRED COURT DATE 15 JUL 04		BRANCH-CALL 38-4	60. COURT SGT. TO HANDLE YES <input checked="" type="checkbox"/> NO		61. FINAL COURT DATE 19 JUN 04	BRANCH-CALL 1	62. FINAL CRT. DATE	BRANCH-CALL
63. BONDED - DATE		TIME	64. BOND RECEIPT NO.		65. COURT DOCKET NO.	66. FINAL JUDGE'S NAME		

To: 3127456995

From: Canon Fax
MOVING OF ARRESTEE OUT OF & INTO ARREST/DETENTION FACILITY

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DATE	TIME	TURNED OVER TO/ RECEIVED FROM	STAR/ EMPL. NO.	REASON	LOCKUP KEEPER/ OTHER DEPT. MEMBER	STAR/ EMPL. NO.
OUT						
IN						
OUT						
IN						

RECORD OF INTERVIEWS IN LOCKUP

DATE	TIME	INTERVIEWER	STAR NO.	REASON	LOCKUP KEEPER/ OTHER DEPT. MEMBER	STAR/ EMPL. NO.

RECORD OF VISITORS TO ARRESTEE

DATE	TIME IN	TIME OUT	VISITOR'S NAME - ADDRESS - TELEPHONE	RELATIONSHIP	W. C.'S APPROVAL (SIGNATURE)

RECEIVING SCREENING RECORD FOR
ARRESTEE TO BE HELD IN LOCKUPREFER TO GUIDELINES FOR ARRESTEE SCREENING, CPD-11.523.
NOTE: ALL "YES" ANSWERS REQUIRE ACTION

DATE: 18 Jun 04 TIME: 1410

ARRESTEE'S NAME: CARTER, William C.B. NO.: 15856133 LOCKUP KEEPER'S NAME (PRINT): PAUL DUNNAS STAR NO.: 9182

LOCKUP KEEPER'S VISUAL CHECK

1. DOES ARRESTEE HAVE OBVIOUS PAIN OR INJURY?
2. IS THERE OBVIOUS SIGN OF INFECTION?
3. APPEARS TO BE UNDER THE INFLUENCE OF ALCOHOL/DRUGS
4. ARE THERE VISIBLE SIGNS OF ALCOHOL AND/OR DRUG WITHDRAWAL?
5. DOES ARRESTEE APPEAR TO BE DESPONDENT?
6. DOES ARRESTEE APPEAR TO BE IRRATIONAL?
7. IS ARRESTEE CARRYING MEDICATION?

LOCKUP KEEPER'S ARRESTEE QUESTIONNAIRE

8. ARE YOU PRESENTLY TAKING ANY MEDICATION? (For what.....)
9. (IF FEMALE) ARE YOU PREGNANT?
10. IS THIS THE FIRST TIME YOU HAVE EVER BEEN ARRESTED?
11. HAVE YOU EVER TRIED TO KILL YOURSELF OR DONE SERIOUS HARM TO YOURSELF?
- 12.A. DO YOU HAVE ANY SERIOUS MEDICAL OR MENTAL PROBLEMS? (IF YES, specify problem under REMARKS)
- 12.B. ARE YOU RECEIVING ANY TREATMENT? (If YES, specify under REMARKS)

YES NO REFUSED

PERSON TO BE NOTIFIED IN CASE OF EMERGENCY - NAME

ADDRESS

TELEPHONE

RELATIONSHIP

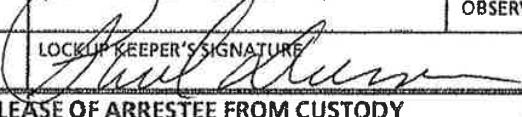
REMARKS

OLD KNUCKLE INJURY ON RT. HAND

SPECIAL DISPOSITION
COMPLETE ONLY FOR ARRESTEES REFERRED OUT OR TO BE MONITORED

REFERRED TO (Specify)	PLACED IN ONE-PERSON CELL NO. (for communicable disease cases)	PLACED IN TWO OR MORE PERSON CELL NO. UNDER SPECIAL/CLOSE OBSERVATION (potential suicides)
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NOTE: LOCKUP KEEPER MUST SIGN IN ALL INSTANCES

LOCKUP KEEPER'S SIGNATURE: 

RELEASE OF ARRESTEE FROM CUSTODY

FOR THE FOLLOWING REASON(S), I HAVE DETERMINED THERE IS NOT SUFFICIENT CAUSE TO FURTHER DETAIN/CHARGE THE ARRESTEE:

SIGNATURE - ARR. OFF./DETECTIVE	STAR NO. UNIT	APPROVED - W/ C - DETENTION FAC. - STAR NO.	DATE-TIME RELEASED FROM CUSTODY